Implementation of Treatment Escalation Plans in a Community Psychiatric Hospital

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Background:

Treatment Escalation Plans (TEP) detail appropriate ceilings of care and guide treatment of patients based on shared decision making. Whilst established in many acute trusts, TEP are not frequently used in community mental health hospitals. This is particularly concerning in organic mental health wards, where patients with severe dementia may be transferred to acute hospitals for treatment without consideration about whether this is appropriate. Our aim for this quality improvement project was to develop and implement TEP within a community mental health hospital to support the management of our older patients with severe mental illness.

Methods / case presentation:

We designed a TEP form based on a prototype used in a partner acute trust and evaluated its use on our wards, comprising 20 patients between August-September 2020. We obtained quantitative data on use of TEP, including the length of time from admission to completion, as well as qualitative data from healthcare staff regarding their experience of using TEP.

Results / Outcome:

TEP implementation was feasible and well received among members of staff. All 20 patients had a TEP in place within 2 weeks of admission. The mean number of days taken to complete a TEP form in August-September was 7.1. A snapshot done 2 months later showed new admissions had a mean number of days to complete TEP reduced to 3.2. There was an improvement in understanding the purpose, comprehensiveness and location of TEP forms during their implementation. The key theme that arose from qualitative analysis of healthcare staff comments was that TEP forms provided clear guidance on appropriateness of escalation of care.

Key Messages / Follow up discussion:

TEP forms offer clear guidance to treating clinicians about the ceilings of care for patients. This is especially important in mental health inpatients with dementia, when escalation of treatment is not always appropriate. TEP were successfully implemented in our community mental health hospital and we plan further post-implementation evaluation. We intend to roll out the TEP form across our mental health trust and share findings nationally to promote best practice.