PLAN Standards and writing to patients: Quality Improvement by Audit

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Background

"The Psychiatric Liaison Accreditation Network (PLAN) was established in 2009 to support in the quality improvement of psychiatric liaison teams in the UK and Ireland. It is one of over 20 networks within the College Centre for Quality Improvement (CCQI) within the Royal College of Psychiatrists" [1]

PLAN is a quality improvement and accreditation network of mental health liaison services. PLAN standards provide a clear and comprehensive description of best practice in liaison psychiatry services. One such standard is that patients should receive copies of correspondence about their health and treatment should they wish.

Aims & Objectives

Aims: Assess the adherence of a hospital psychiatric liaison team to the Psychiatric Liaison Accreditation Network (PLAN) standards framework; to identify areas of improvement; to identify barriers to and improve adherence

Objectives: Quantify standards, present to team and discuss findings, then reassess standards at later point and disseminate results via presentation to team

Methods

Data was extracted from 27 randomly selected patient assessments from 01/07/2020 to 31/08/2020 and then 27 assessments from 01/10/2020 to 30/11/2020 for re-audit. Data was collected on adherence to 30 domains extracted from the PLAN Standards.

Qualitative data regarding PLAN standards, including attitudes towards writing to patients was gathered from 1:1 discussions with 7 members of staff.

Interventions between rounds of audit:
- Presentation of results of 1st data collection to team in November 2020 followed by discussion
- Emailed instructions to create a Cerner template based on PLAN standards for assessments to staff
- Lobbied for Cerner access at team office to facilitate use of above

Results

Quantitative: Overall improvements were seen in adherence to all aspects of documentation of assessments including collateral history (from 23% to 67%) past medical history (30% to 70%) and acknowledging the patient/carer perspective (46% to 74%). Some improvement was seen in offering correspondence to patients (0% to 20%) [see Fig. 1]

Qualitative: The majority of comments regarding writing to patients were positive, with no staff members opposing the standard, however, some barriers were identified including increased workload [see Fig. 2]

Figure 2: Qualitative data collected from staff members

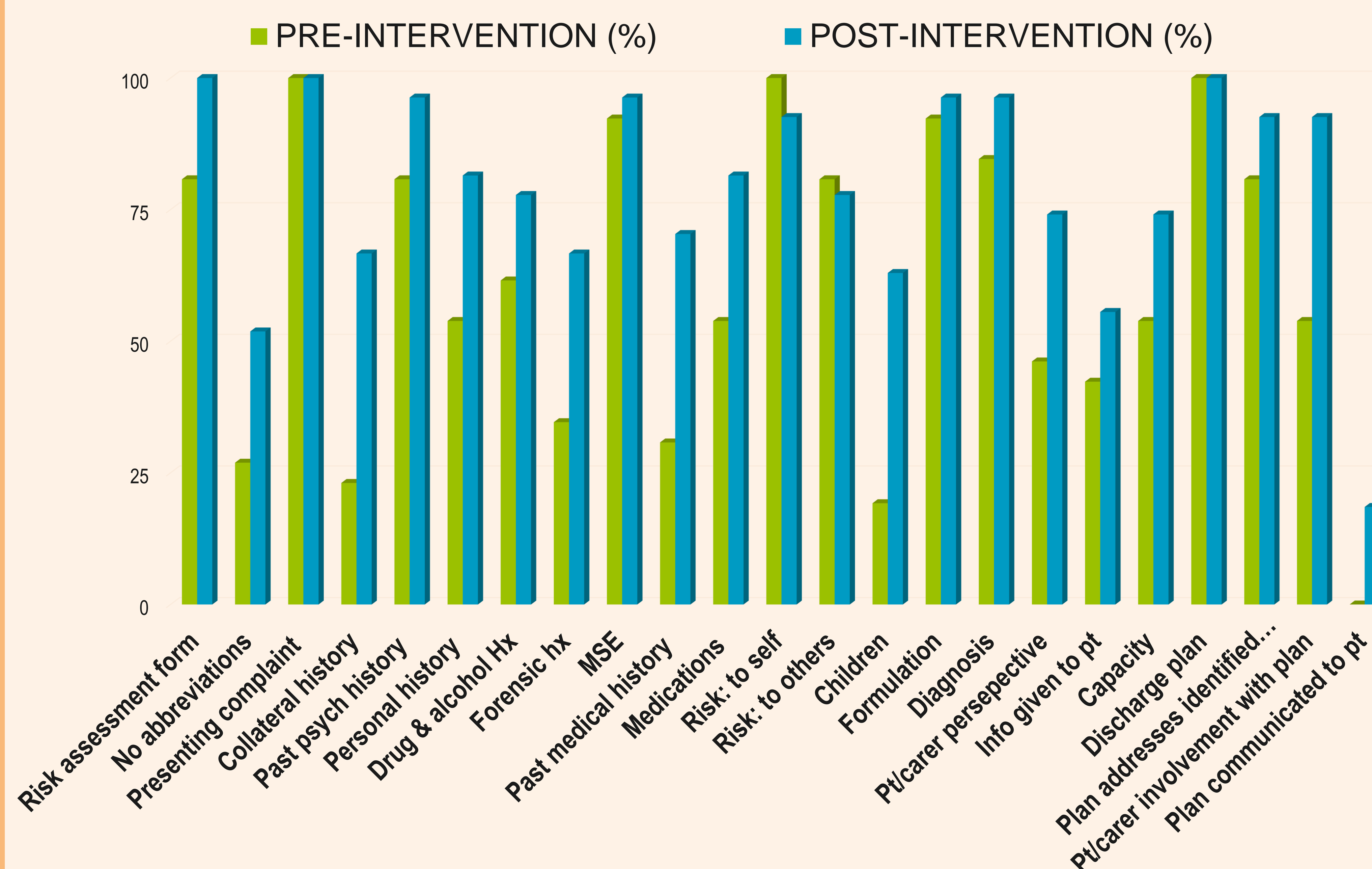

Figure 1: Quantitative data extracted from assessments

Conclusions

Team adherence to PLAN standards for documentation of assessments was improved through low intensity interventions. Overall adherence was high, however certain areas leave space for improvement.

The audit facilitated conversations around writing to patients on discharge, both in the form of formal gathering of qualitative data and informal discussions between staff. Attitudes towards writing these letters were positive and some improvement was seen between audits.

Ongoing audit activity aims to further improve adherence and monitor improvements.

1. https://www.rcpsych.ac.uk/docs/default-source/improving-care/ccqi/quality-networks/psychiatric-liaison-services-plan/quality-standards-for-liaison-psychiatry-services---sixth-edition-2020