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## Background

- NICE guidance recommends that patients with SMI should have a physical health review at least annually, usually in primary care, in addition to annual observations for those on antipsychotic medication
- Research has shown SMI patients have a life expectancy up to 20 years shorter than the average population, with preventable cardiovascular disease as the major cause of death
- Mental and physical health are closely related, however patients with SMI face health inequalities not seen in the wider population
- Some factors which can influence this include the nature of the mental illness itself, reluctance & lack of engagement with GP services due to perceived stigma or difficulty forming therapeutic relationships, as well as psychotropic drugs and their side effects

## Rationale

- SMI patients have poor access to primary care services
- 48% of our Forensic Outreach Service (FOS) caseload were listed to have physical health co-morbidities
- Initial data collection showed just 11.5% of our FCS caseload having an annual physical health check

## Method

- Implementation of a fortnightly MDT led physical wellbeing clinic for FOS patients (1 hour each)
- Included exploration of physical health, health screening & education, physical examination and investigations
- Results communicated to GP for investigation & management if indicated

## AIM

**100% of Forensic Outreach Service (FOS) patients to be offered an annual physical health check by September 2021**

## DRIVERS

### Communication

Improve communication between Oxleas and GP practices  
Utilise ConnectCare use

### Technology & equipment

Monitoring equipment is not mobile and requires clinical setting

### Physical health

Patients' awareness of health concerns & conditions  
Accessibility of physical health checks

### FOS staff skills

Staff knowledge of physical health monitoring  
Staff skills in performing clinical assessments

## CHANGE IDEAS



**Formation of face-to-face physical health clinic in the community**



**Bespoke & editable letterform with clinical transformation for GP**



**Physical health care plan including intervention when clinically indicated**



**Information booklet to highlight key risks & manage expectations**

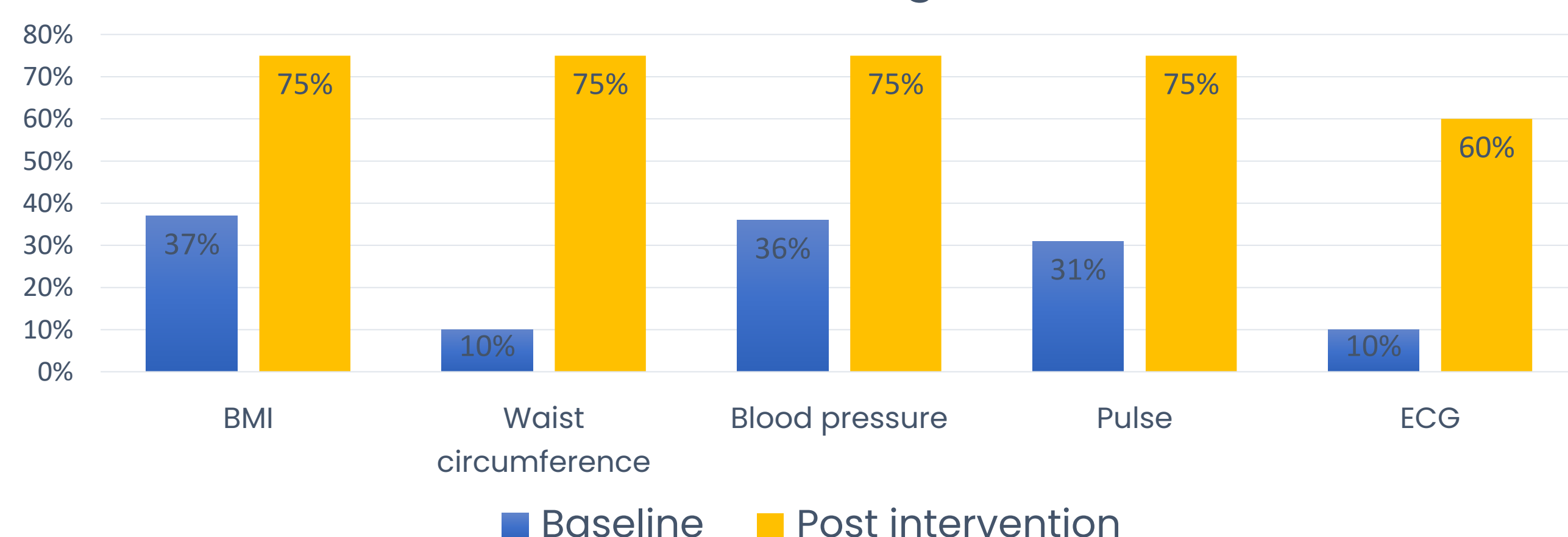


**Training identified for staff and Standard Operating Procedure used for clinics**

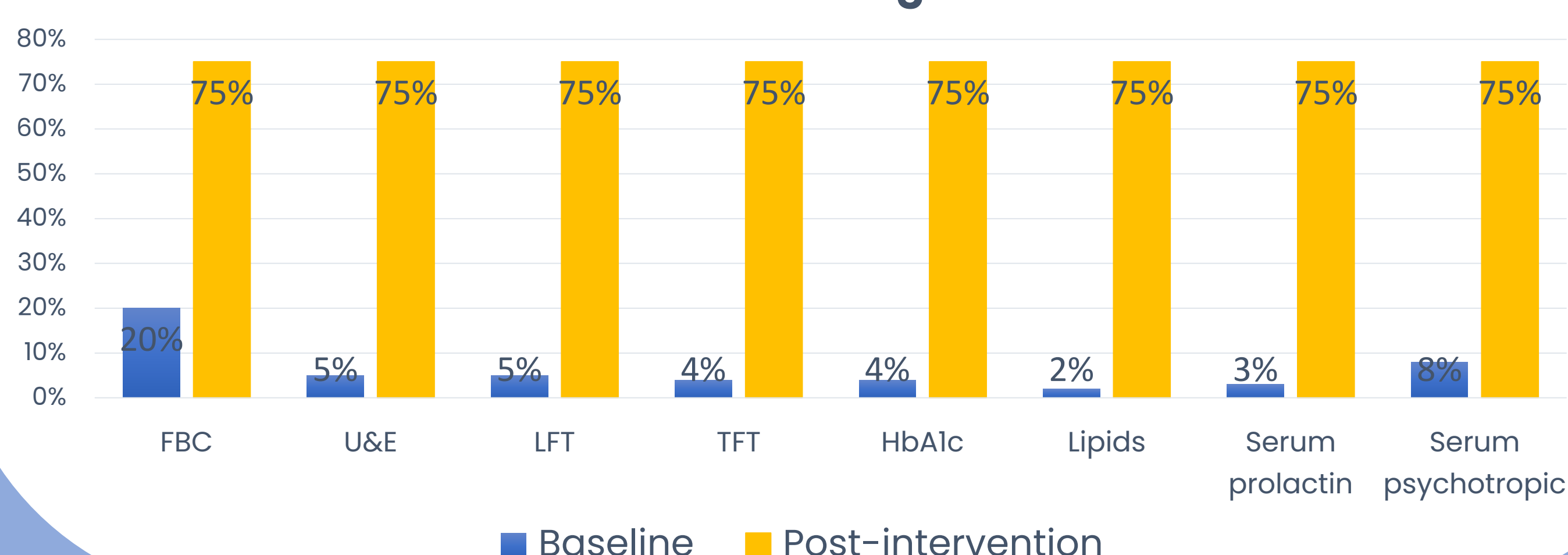
## Results

- 100% of FOS patients were offered an annual physical health check despite the restrictions secondary to COVID pandemic.
- Of the 52 FOS patients, 75% attended the physical wellbeing clinic, despite limitations from COVID restrictions.
- DNA rates were <5%
- An improvement in physical observation monitoring from 35% to 75%
- An improvement in completion of investigations from 10% to 75%

**Percentage of all FOS patients receiving observations monitoring**

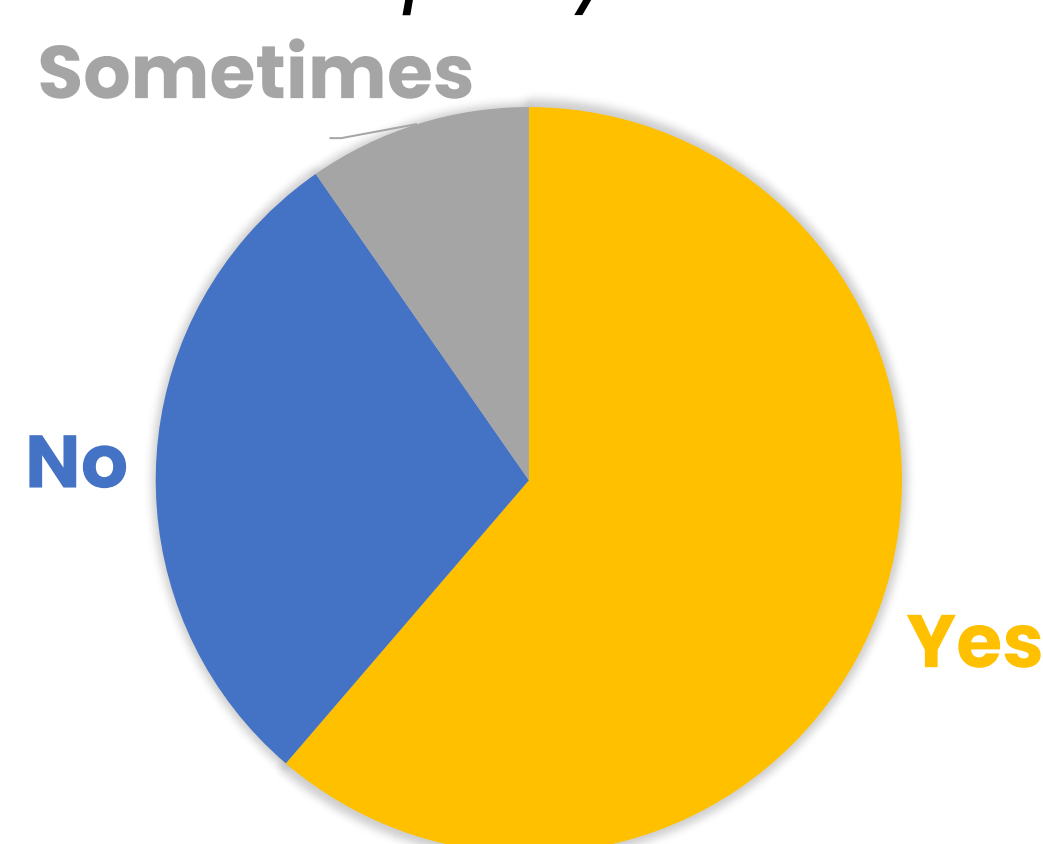


**Percentage of all FOS patients with completed bloods monitoring**

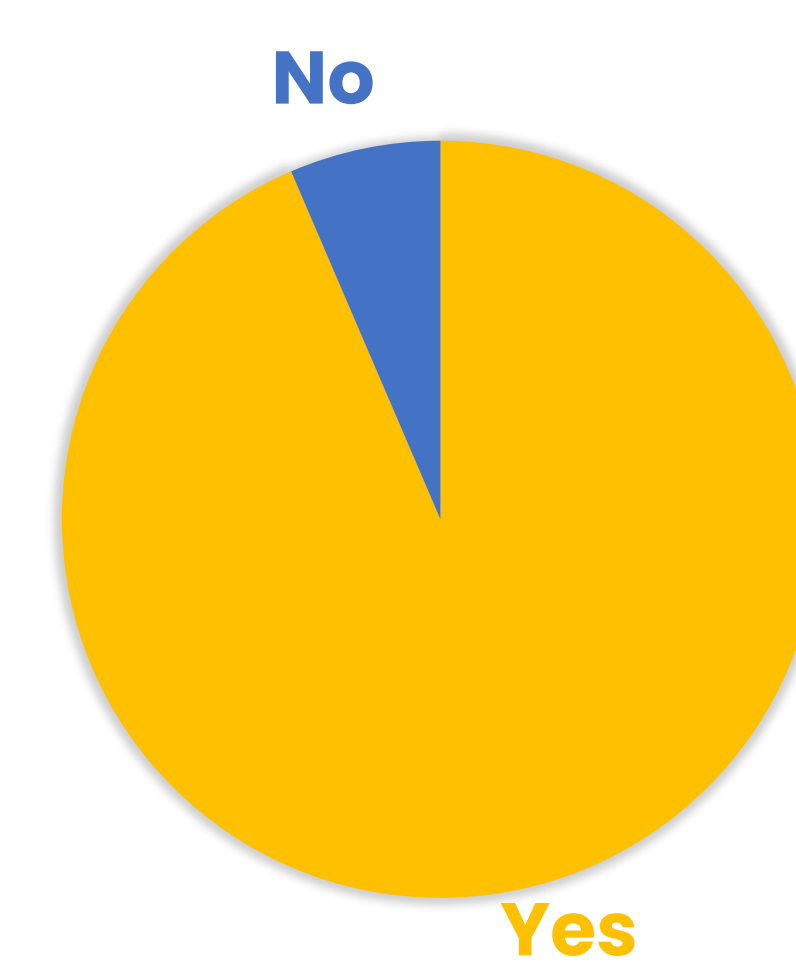


## Patient feedback surveys

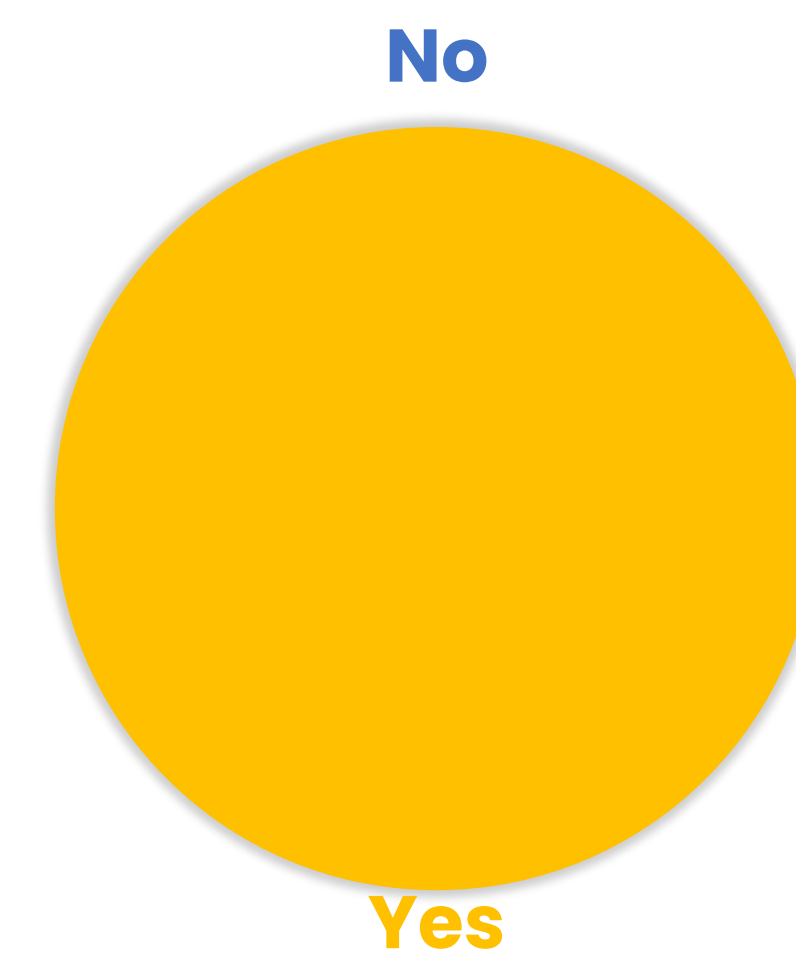
Do you see your GP for a physical health check at least once per year?



Would you be happy to attend this clinic again?



Were you treated with kindness at the clinic?



## Conclusions

- The FOS Wellbeing Clinic successfully improved physical health monitoring and effective communication with GP practices for follow up for over 80% of patients.
- Patient feedback survey reported positive patient feedback experience, increase engagement and adherence with primary and secondary physical health services
- Patient feedback survey showed that patients' access to the Physical Wellbeing Clinic with a known team improved access engagement, eliminated the initial barriers to accessing healthcare and therefore improve the health inequalities patients with SMI may face.

## Future Considerations

- The clinic has now been incorporated into concurrent POCHI clinics – patients attending clinic for Clozapine blood monitoring can have an extended appointment to include the Wellbeing Physical Health assessments
- Engagement with GPs to develop a better understanding of parameters which require further investigation and monitoring in primary care
- Involvement of a Lived Experience Practitioner to support clinic and patient engagement
- The clinic has identified that obesity and raised BMI is prevalent among our service users – we will develop a QI project to support better physical health amongst our FOS patients