

# IMPROVING PHYSICAL HEALTH CARE AND MONITORING IN A FORENSIC PSYCHIATRIC SECURE SERVICE

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## BACKGROUND

- Psychiatric inpatients are at **increased risk of developing physical health complications** due to a combination of diet and exercise in the inpatient environment, the metabolic side effects of medications and social factors [1].
- Psychiatric patients have a **higher mortality rate** than non-psychiatric patients [2].
- Close physical health monitoring of psychiatric patients is paramount to narrow this mortality gap.
- Weight and waist circumference are important parameters of metabolic health.

## OUTCOME MEASURES

- Patient **weight** and **waist circumference** data was collected at **baseline** and **weekly**
- A questionnaire on **patient understanding** of a healthy lifestyles was distributed **weekly**
- Design of both interventions was a collaboration with staff and patients

## INTERVENTIONS

### PDSA 1 (weeks 1-4)

- Series of 4 psychoeducation sessions each followed by group exercise
- Session 1: Balanced diet and healthy lifestyle
- Session 2: Fats and Cardiovascular Disease
- Session 3: Snacks and drinks
- Session 4: Sugar and Diabetes

### PDSA 2 (weeks 5-8)

- Implementation of patient healthy living diaries
- One side included simple tick box goals for exercise, diet and fluids
- Other side for staff to fill in with detailed information and patient reflection

## DISCUSSION

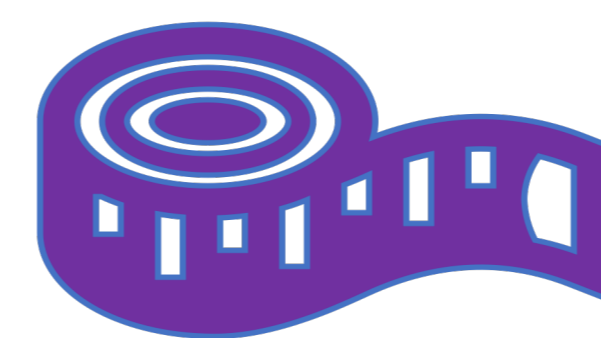
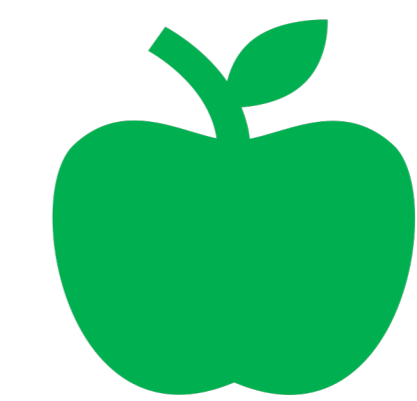
- No significant decrease in weight or waist circumference was observed.**
- Our target of 60% of patients lowering their weight or waist circumference was reached on two occasions.
- There was a **significant impact on participant's knowledge**, demonstrating a subjective benefit of our interventions.
- Adherence to monitoring policy was low** amongst staff, and lack of any standardised measurement methods resulted in **significant operator-dependent variations.**
- After conversations with ward staff, we observed an improvement in the consistency of measurement recording

## OBJECTIVES



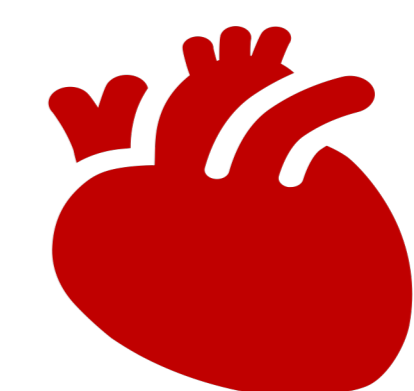
Improve physical health initiatives on the forensic inpatient wards

Empower patients to follow healthy lifestyle guidance

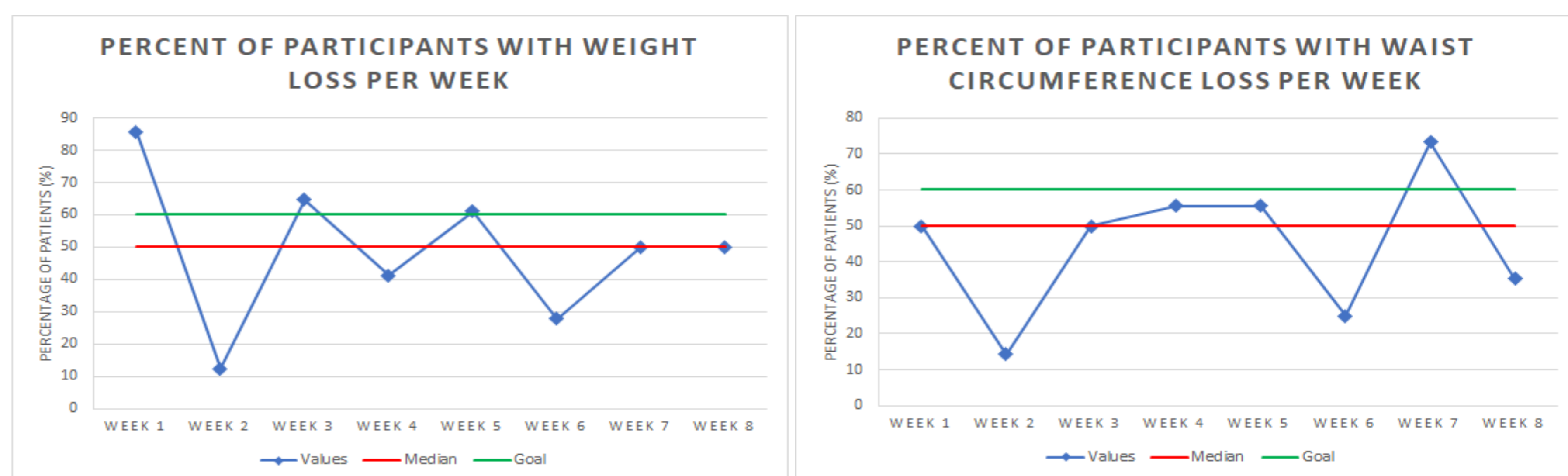
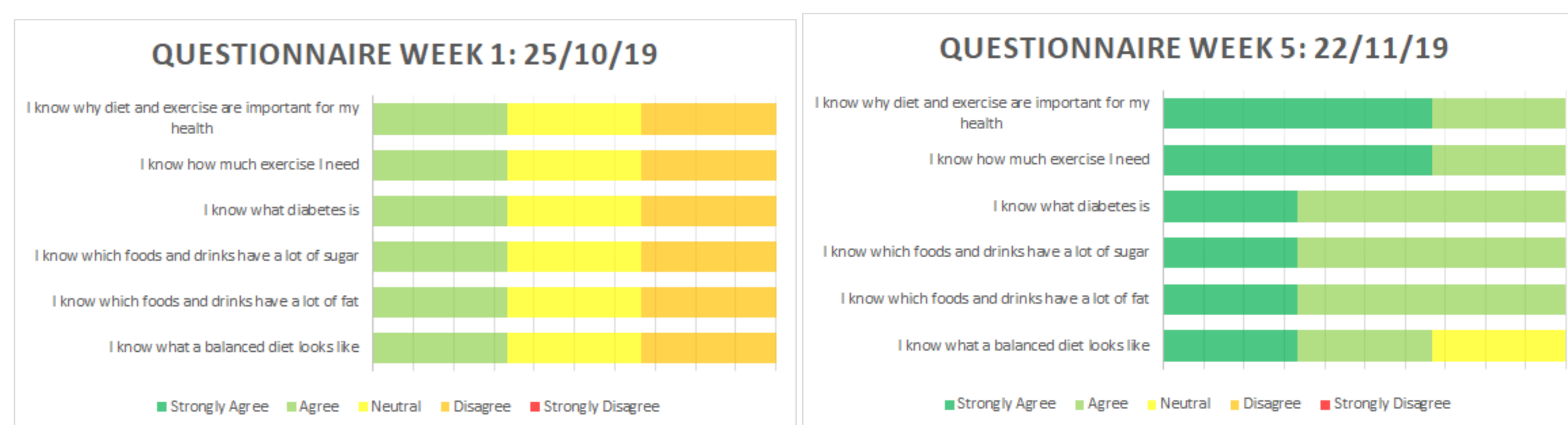


Reduce weight and waist circumference in 60% of patients

Reduce patient risk of metabolic syndrome



## RESULTS



## FUTURE: NEXT STEPS

Though our time was too limited to continue PDSA cycles we **highlighted areas of future QI in the trust**, putting forward ideas to implement a standardised measurement protocol and staff training to combat the inconsistencies in weight and waist circumference data.

## REFLECTIONS

- Whilst aims useful to guide project, not essential to be met for success, lessons learnt from **process equally important.**
- Results from questionnaire showed **role that qualitative measures can have in QI**
- Most importantly, we learnt the **significance of establishing communication channels** between all members of the QIP multidisciplinary team and solidifying the role of each member before beginning the project.
- QI is a **continual process**; we will take the lessons learnt from this project as we progress to future projects