

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

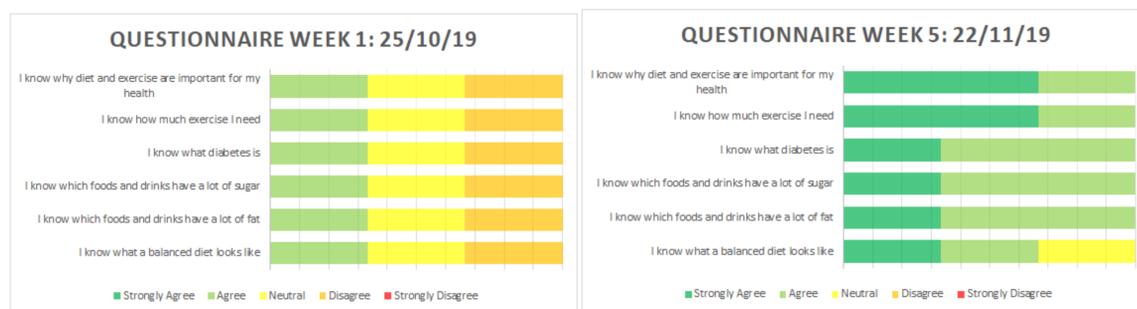


Reduce weight and waist circumference in 60% of patients

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