

Documentation of Risk in Older Adults Liaison Psychiatry Assessments in the University Hospital of Hairmyres

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Introduction

- Risk assessment is a vital part of any psychiatric assessment.
- There is a peak in suicide rates associated with those aged 80 to 84 years in England and Wales ⁽¹⁾.
- It is difficult to determine the risk in Scotland as the annual number of deaths for those aged 85+ were not shown in a 2019 report ⁽²⁾.
- Most countries who report suicide statistics to the World Health Organisation demonstrated a peak in the suicide rates in the elderly ⁽³⁾.
- Risk factors in the elderly associated with suicide include mental illness, physical illness, functional impairment, pain, threats to autonomy and stressful life events ⁽⁴⁾.
- The Royal College of Psychiatrists' standards state that patients should have a comprehensive evidence-based assessment which includes suicide risk, with a clear joint procedure for managing high risk assessments between the psychiatry team and acute colleagues ⁽⁵⁾.

■ Yes ■ No

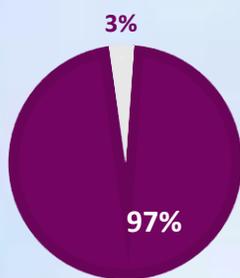


Figure 1: Documentation of risk in any format

■ Yes ■ No

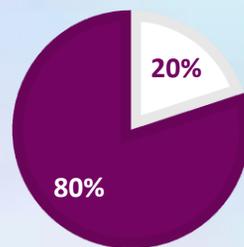


Figure 2: Documentation of risk in all three formats

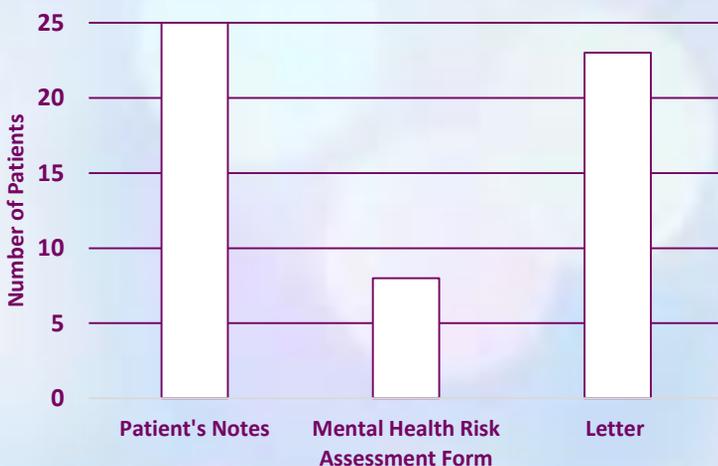


Figure 3: Documentation of Risks in Different Formats

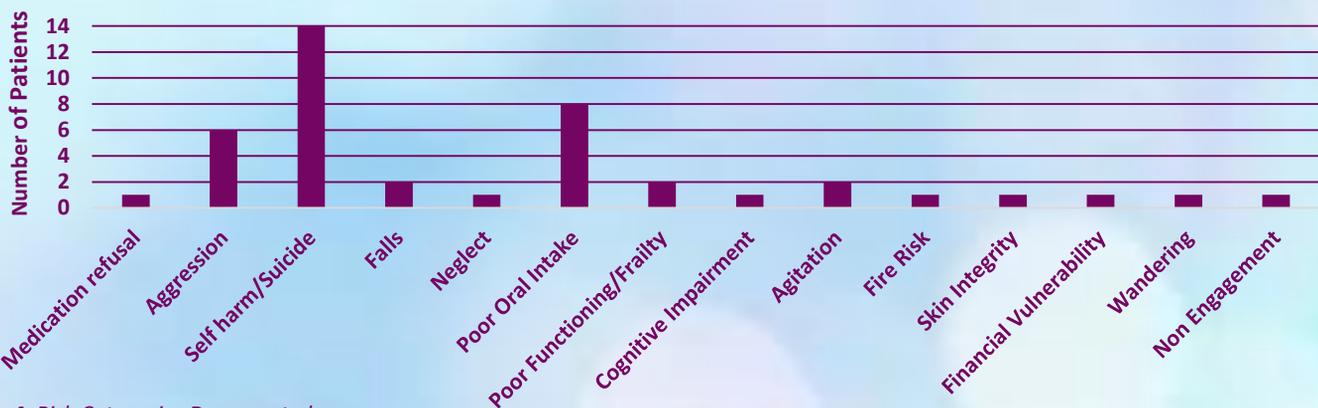


Figure 4: Risk Categories Documented

Aims

This audit aimed to assess the level of risk documentation in patients reviewed by the old age liaison psychiatry service during July, August and September 2020.

Methods

The old age liaison psychiatry referrals database was searched for referrals during the months of July to September 2020. All referrals which led to face-to-face assessments were included. Every patient assessed had their notes, Mental Health Risk Assessment form (if completed) and letters checked for documentation of risk.

Results

- Total referrals received = 42
- Total no. of patients assessed face to face = 30
- Total no. of patients with risk documented in any format (notes or Mental Health Risk Assessment form or letter) = 29
- Total no. of patients with risk documented in all three formats = 6

Conclusions

- Overall, risk is very well documented in old age liaison psychiatry assessments.
- Documentation in patients' notes was most common, and least common in Mental Health Risk Assessment forms.
- Self-harm/suicide was the most documented category of risk.

Discussion

- Overall, risk is very well documented so current practice should continue.
- Poor documentation rate in letters is concerning as letters are the only documents GPs have access to.
- Self-harm/suicide was the most commonly documented risk, in keeping with the Royal College's Standards.

References

- (1) Office for National Statistics, "Suicides in England and Wales :2019 registrations" [online]. (Last updated 1st September 2020) Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicidesintheunitedkingdom/2019registrations>. [Accessed on 10/12/20]
- (2) The Scottish Public Health Observatory, "Suicide: Scottish trends". [online]. Available at: <https://www.scotpho.org.uk/health-wellbeing-and-disease/suicide/data/scottishtrends/>. [Accessed on 10/12/20]
- (3) World Health Organization (2016), Global Health Observatory data repository: "Suicide rate estimates, crude, 10-year age groups. Estimates by country." [online]. (Last updated 14th August 2018) Available at: <https://apps.who.int/gho/data/node.main.MHSUICIDE10YEARAGEGROUPS?lang=en> [Accessed on 10/12/20]
- (4) Conwell, Y., Van Orden, K., & Caine, E. D. (2011). Suicide in older adults. The Psychiatric clinics of North America, 34(2), 451–ix. <https://doi.org/10/1016/j.psc.2011.02.002>
- (5) Royal College of Psychiatrists (2020) "Psychiatric Liaison Accreditation Network (PLAN) Quality Standards for Liaison Psychiatry Services, Sixth Edition." Available at: https://www.rcpsych.ac.uk/docs/default-source/improving-care/ccq/qualitynetworks/psychiatric-liaison-services--sixth-edition20209b6be47cb0f249f697850e1222d6b6e1.pdf?sfvrsn=1ddd53f2_0 [Accessed on 10/12/20]