

Implementation of Treatment Escalation Plans in a community psychiatric hospital

Anne Y.T Chua | Sangeeta K. Makh | Adnaan Ghanchi | Jessica Grayston | Nida Yasmeen
Sean M. Insigne | Stephen Woolford | Sahan Wijayaweera | Harnish P. Patel | Jay Amin

Background:

The Older Persons Mental Health inpatient wards at the Western Community Hospital consist of mental health patients over the age of 65 suffering from organic and functional disease.

This patient group often suffer with multiple medical comorbidities and frailty which makes them susceptible to sudden deterioration.

During the COVID-19 pandemic it was clear that a formal process of documented decision making regarding levels of escalation was required.

Intervention:

Treatment Escalation Plans (TEP) are formalised documents detailing the ceiling of care for a patient in case of clinical deterioration, whilst taking into account patient or next of kin's (NOK) wishes.

Our aim is to tailor the TEP form to a community mental health setting, increase awareness of the TEP form and its usage.

MDT responses to: "In my own words, I think a treatment escalation plan is:"



Methods:

- Qualitative data was collected from multi-disciplinary team (MDT) members in the form of a 7 point questionnaire. A mix of closed and open questions were used (n=10 in 1st cycle, n=20 in 2nd cycle).
- Qualitative data was also collected from patients' NOK (n=10) via a 5 point questionnaire.
- Quantitative data was collected over August-September 2020 and a snapshot was taken in November 2020.

Results:

- 100% of inpatients now have a TEP form easily locatable in their files.
- MDT understanding of TEP forms increased by 40% and views on comprehensiveness by 77%.
- Time to complete TEP form from date of admission decreased by 55%.
- Patient NOK's understanding and desire to have a formalised TEP was 96%.
- 90% of patients were for full escalation, 10% were for ward-based care and none for palliative care.

Treatment Escalation Plan (TEP)

Patient Name: _____

NHS Number: _____

DOB: _____

This Form is for guidance and DOES NOT replace clinical judgement.
Only valid for current admission
Review if clinical condition changes and complete new form

Has a discussion of TEP with the patient/relatives occurred?

Yes No If no, why? _____

Name of person discussed with _____ Relation to patient _____

For Full Escalation to Tertiary Care

For Western CH Ward Based Care:

Oral antibiotics Yes No

Subcutaneous Fluids Yes No

Blood Tests Yes No

Radiological Investigations Yes No

ECG Yes No

Regular Medications Yes No

For Palliative Care

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Impact and Future Plans:

- TEP forms were successfully implemented in our community mental health hospital and we plan further post-implementation evaluation.
- Qualitative data showed improved understanding by MDT members and NOK, although a formalised teaching session would prove beneficial.
- We intend to roll out the TEP form across our mental health trust and share findings nationally to promote best practice.