Improving physical monitoring for patients’ taking antipsychotic medication

Creating parity of esteem between mental and physical health
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Attention to the physical health of patients is part of a holistic approach, and has been recognised as an increasingly important part of the work within mental health services. Second generation antipsychotics with preferential side effect profiles in terms of movement disorders, have prevalent metabolic side effects which need to be monitored (McEvoy et al. 2005). NICE guidelines detail the monitoring required, with suggested frequencies as to how often this should take place. The pilot of the National Audit of Schizophrenia in 2012, showed that monitoring of physical health parameters was significantly below expectations.

Aims
- to improve compliance with the national monitoring standards in the test population within SEPT to 90% within 6 months by providing interventions to improve monitoring compliance and information sharing
- to engage patients in the monitoring of their physical health and improving their health awareness

A plan to improve services for patients was developed by identifying challenges in the current system. The PDSA cycle was employed to analyse and improve the current process.

- Can the intervention be used?
- Disseminate knowledge
- Plan the next cycle

- Analyse compliance with the standards compared with the baseline data
- Did it work?
- What was learnt?

- Baseline audit
- Engage stakeholders
- Recruit project team
- Select patient group

- Design and implement an intervention
- Collect data

A baseline audit was designed to assess physical health monitoring in a test group of patients that attend an outpatient service.

Mental health records from 70 patients within SEPT were examined to gain quantitative data about physical health monitoring.

In the last year has the patient had the following blood tests?

- Not done according to ICE
- Not recorded in the notes
- Reference to monitoring in the notes
- Results Recorded in the notes

Following the baseline audit, the local project team engaged stakeholders to develop an intervention to improve monitoring.

- Wellbeing clinic – nurse led in secondary care, to undertake recommended monitoring at yearly intervals, signpost/refer to other services as required
- Health and Wellbeing Booklet – patient owned, improving communication between services and health information

Both interventions are currently being used within one outpatient service in SEPT and a re-audit will take place in October.

Successes
- This project became part of the Trusts’ Managed Clinical Network work stream with plans to share learning across the EOE deanery.
- The booklet has been supported by the CCQI and NAS and the learning has been shared via the RCPsych website section on Quality Improvement.
- A service user questionnaire and focus group were used to incorporate their views into the design of the booklet – qualitative service user data will form part of the analysis
- Through presentations and learning events interest has been sparked in local Trusts and across our own Trust, where we aim to develop further wellbeing services.
- The booklet is being embedded in future IT systems, which will improve communication of monitoring between services