

MONITORING CLINICAL OBSERVATION ON ACUTE PSYCHIATRIC WARDS

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Background: Clinical observation is very important to manage risk of people who are acutely ill on psychiatric wards. It is always an area of dispute between different specialities and disciplines in serious untoward incidents(SUI).

Three levels of observations have been applied on acute psychiatric wards.

Assessing practice is important to help identifying positive and negative aspects of clinical practice.

Methods: A questionnaire was developed by HN to collect demographic. Medical notes on Westley and Grangewater wards were reviewed. Excel Microsoft Office World Computer Programme was used to analyse the results.

Results:

57% were men.

62% were above 41 years of age.

Majority were suffering from schizophrenia and schizoaffective disorders 61%.

64.28 % were admitted as formal patients.

31.42 % were on level I observation.62.53 were informal.

54.76% were risk to themselves, 28.57 % risk to others.

82.3% were on level II observation, 31.42% formal and 68.50% informal.

21.32% were on level III observation. 66.66% were formal and 66.66% had an incident before this level.

Conclusion: This study have shown that patients are assessed properly before they go on any level of care. Some patients need to go on level III as they pose a risk mainly to other people. Regular reviews of patients, especially on high level of observation should be done more promptly, as being on observation is not a comfortable experience to go through and applying the least restrictive practice should always be sought and adopted.