

A Quality Improvement Programme (QIP) to improve the rates of physical health monitoring in patients prescribed antipsychotics at South London and Maudsley (SLaM) inpatient units
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(Data collection in collaboration with Lewis Pope, Clara Chan, Ian Osborne, Hannah Lee)

Introduction

It is well established that there is higher physical morbidity and mortality amongst patients with a mental health illness, largely attributable to cardiovascular disease and metabolic conditions associated with antipsychotics (1). To address the physical healthcare disparity amongst mental health patients, the Trust is required to ensure that all adult mental health patients have evidence of an offer for glucose/ HbA_{1c} and full lipid profile tests conducted on admission.

Aim and Objectives

To undertake a two part audit and retrospectively assess whether adult inpatients prescribed an antipsychotic have evidence in their records of plasma glucose/ HbA_{1c} and lipid tests being offered upon admission between 16/11/13 and 13/12/13. To improve rates, a pharmacy-led intervention will be implemented.

Method

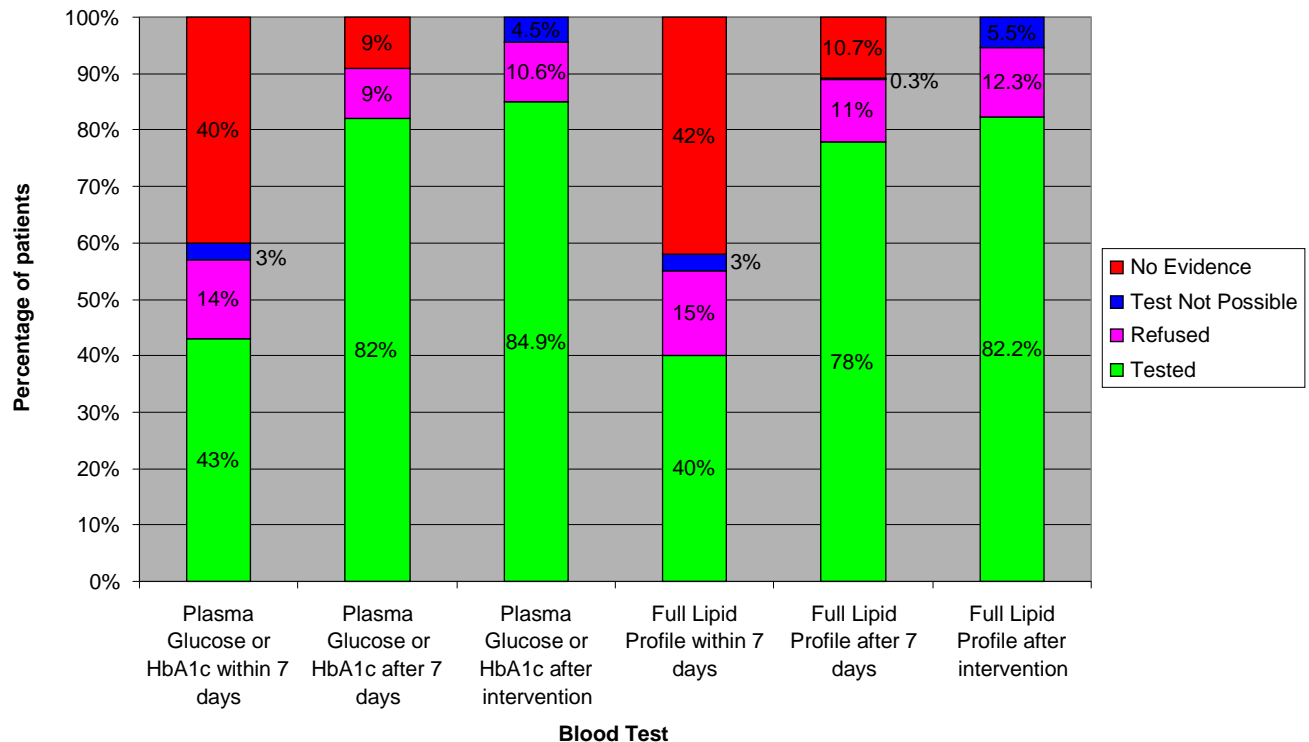
A total of 381 inpatient records were scrutinised. Inpatients with missing tests were identified and missing blood tests were requested. The pre- and post-intervention results were analysed and compared.

Inclusion criteria: Adult inpatients.

Exclusion criteria: Ladywell unit, triage ward, patients admitted <7 days, patients who refused tests >3 times in the last 6 months.

Results

Fig. 1 Proportion of patients prescribed an anti-psychotic with evidence on ePJS of tests offered during current admission (within 7 days of date of admission), more than 7 days after date of admission, and after intervention (Total n = 381)



Discussion and Conclusion

Part one of the audit shows that 40% (n=152) of inpatients records showed no evidence of plasma glucose/ HbA_{1c} and 42% (n=160) for lipid tests within 7 days. Post pharmacy intervention, 100% of inpatient records showed evidence of an offer made. This QIP demonstrates that pharmacists have a valuable role in the multidisciplinary team to help improve physical health monitoring rates and are appropriately skilled to make an intervention to ensure baseline tests are carried out. With greater emphasis on parity of esteem between mental and physical health, this QIP tackles an important gap in physical health monitoring within the psychiatric population.

References

1. MHRA Drug Safety Update 2011. Atypical (second generation) antipsychotics: reminder to monitor and manage weight, glucose and lipid levels