The Efficacy of Psychiatric Consultation Liaison Nursing Service in Hong Kong East Cluster in filling the needs of patients in General Hospital with Mental Health Problem

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Introduction
Psychiatric Consultation Liaison Service is a subspecialty of psychiatry that focuses on the interface between psychiatric and physical illnesses. Since Aug 2011, Psychiatric Consultation Liaison Nursing Service (PCLNS) was extended to cover the Accident and Emergency Department (AED) and General Wards in Ruttonjee Hospital (RH). The service aims to ensure the safety and stability of the patient within the medical environment, to gather essential history and medical data from applicable sources to assess the patients, to conduct a mental status examination, to make an impression and establish a differential diagnosis, and to initiate a nursing management and discharge plan. The efficacy of this service was evaluated through the review of the service outcome.

Objectives
To study the characteristic of patients referred for psychiatric consultation in an acute general hospital. To study the specificity of psychiatric admissions and discharge cases after psychiatric consultation provided by PCLNS

Methodology
The data was critically analyzed after collected by PCLNS during the consultation in RH from Aug 2013 to Jul 2014. Areas included demographic data, sources and reasons of referrals, past psychiatric history, psychiatric diagnoses, outcomes, intervention, and distribution of admission destinations.

Result
Total 206 consultations from 174 patients were recruited during the study period. For about 16% of the total referrals required follow-up assessment. Depression and adjustment disorder were the most prevalent mental illness which accounted for 38% of the referrals and up to 20% were diagnosed with schizophrenia and psychosis. Among all consulted patients, suicide and self-harm were the most common reasons of referrals which accounted for 34% of the referrals while aggression and violence
accounted for another 10% of the referrals. Such life threatening behaviours contributed to a substantial amount (72%) of total psychiatric admission. In fact, the overall psychiatric admission (both voluntary and compulsory) was only accounted for 35% of the total referred cases with PCLNS provided. In respect of the efficacy of PCLNS, we examined the necessity of psychiatric admission, the mortality and readmission rate of patients after discharged from general hospital with the provision of PCLNS. Among the psychiatric admission cases, 80% of them were prescribed with psychiatric medication during hospitalization and after discharged. Regarding the length of stay in psychiatric ward, 80% of them stayed for one week or above and 25% of them required to stay more than a month. For those who stayed less than one week, 50% of them were discharged against medical advice. The findings suggested that the patients who required in-patient care was in fact have imminent needs for receiving psychiatric treatment. Concerning the discharged cases, 50% of the total referrals were considered mentally fit for discharge from general hospital after psychiatric consultation. There were 13 patients deceased within one year because of physical illness. No suicide was reported from the remaining subjects. For the readmission rate, around 5% of the discharged patients were readmitted to AED within one year and also no report of suicide or violence. With the growing needs of psychiatric consultation from RH, the amount of consultation from Aug 2014 to Jul 2015 was noted to increase by 33% in compared with year 13/14. As with the support from Psychiatric Consultation Liaison Team, the expansion of PCLNS is expected to provide better coverage across the cluster to meet the enhanced service needs.