



Service Priorities and Programmes Electronic Presentations

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Achieving patient safety with quality and least restrictive care

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Introduction

The prevalence rate on physical restraint in the Department of Psychiatry has been increasing from 4.58% in 2011 to 12.79% in 2014. The significant increase is contributed from the increase use of restraint (Level I) in prevention of fall and imbecile behavior. Part of the contributing factors are increasing number of elderly patients, patients who are developmentally challenged with imbecile behavior. A restraint minimization progroject group was established. The following strategies, i.e. (1) involvement of leadership, (2) staff training, (3) identification of risk and creation of management plans,(4) formal / informal engagement of staff, (5) creation of committee, (6)establishing review and communication of utilization rates are incorporated.

Objectives

The three objectives of the evidence based project are to (1) decrease the prevalence rate restraint, (2) increase use of alternative strategies in caring for patients

Methodology

8 sessions of experience sharing workshops were conducted Identify patients with high fall risk through standard test, i.e. up and go test. Conduct point prevalence survey four times a day at 0900, 1200, 1500 and 1800 Increase muscle strength and activity level through walking exercise, early mobilization Facilitate group project on restraint minimization from the PRCC in Psychogeriatric Nursing Conduct staff training for nursing and supporting staff on restraint minimization with Q&A sessions. Conduct music therapy Enhance patients' nutritional level by monitoring through Malnutrition screening tool (MST) Purchase cycling machine for increasing activity level and build muscle strength Explore the feasibility of using special designed geriatric chair in restraint minimization Explore to install ceiling hoist for facilitating walking exercise

Result

The prevalence rate of physical restraint was decreased from 12.79% in May 2014 to 2.54% in Nov 2015. Reducing the use of physical restraint in psychiatric setting is a

demonstration of quality patient care, staff competence and strong leadership.