

Quality Improvement Projects

Project Title: Physical Health Checks for People with Severe Mental Illness

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Problem/Background:

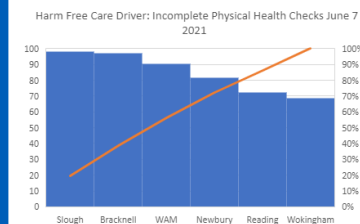
People with SMI are at a greater risk of poor physical health and have a higher premature mortality than the general population, often dying 20 years sooner of preventable long-term conditions i.e., cardiovascular disease or cancers.

They are more at risk due to:

- likely to have higher alcohol consumption
- 3 times more likely to smoke
- double the risk of obesity and diabetes
- 3 times the risk of hypertension
- 5 times the risk of dyslipidaemia

Current State in June 2021:

Compliance in Berkshire Healthcare for all 6 elements of the health check (blood pressure, BMI, lipids, blood glucose, smoking, alcohol) was **14%** in 2021.



Vision:

To ensure physical health checks are completed for all new patients with SMI in order to bring their life expectancy in line with the general population. 100% of patients to be offered a physical health check.

Goals:

Minimum 60% compliance with all 7 parameters of the health check by March 2022
 Minimum 85% compliance with all 7 parameters of the health check by March 2023

Analysis & Root Causes

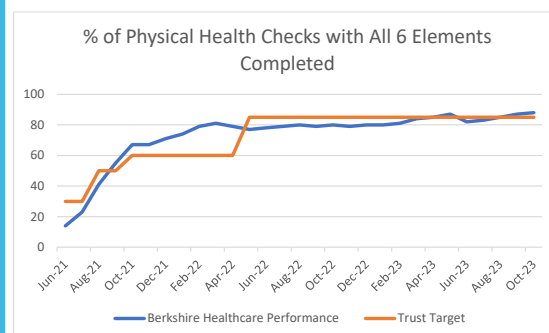


- Culture that physical health not part of mental healthcare
- Staff unaware how to facilitate PHC's
- Staff unaware of location of Physical Health & Lifestyle form or how to use
- Patients are not aware of their entitlement to physical health checks
- There had been no designated physical health team and CMHT staff are too busy to do the checks.

Countermeasures & PDSA Cycles:

- Tableau dashboard
- Clinics in all localities and home visits
- Physical Health Awareness programme for mental health staff including refreshers
- Point of care testing
- Rapid improvement event for top contributor
- Joint visits with care co-ordinators and students
- GP and system wide collaboration & communication

Outcomes: Improvement has been sustained for over 12 months and target consistently met since March 2023.



Insights/Learning:

- Accurate and reliable data 'you can't make improvements on an unstable platform'
- Familiarity with QI tools & methodologies – what would work for the project?
- Improvement huddles are pivotal – gets the whole team involved including administrators
- Service user and stake holder collaboration & coproduction
- Flexibility and most importantly, listening to what our patients are saying