

Understanding and Interpreting Trends of Care Within Ethnic Diversity

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Introduction: An audit was designed to compare 3 ethnic groups (White British (WB), South Asian (SA) and Other (Black and others)) to identify trends in Diagnosis, Length of admission, No. of admissions, Status on admission, Services on Discharge. The initial cycle was commenced in 2009, data were collected for 1 year. More people from ethnic minorities were detained, had longer hospital stay, were diagnosed with psychosis more than WB.

Objectives: Observe outcome of assessment and treatment of patients from different ethnic background, after recommendations of the 2009 audit were implemented (better use of interpreting services, educational events for carers and patients, effective discharge planning)

Aim: repeat the audit cycle to close the loop

Methods: data were collected, covering a period of 1 year (1/4/12-31/3/13). Number of patients: 241

Results:

Diagnosis: 47% of SA were diagnosed with psychotic disorder compared to 18% of WB, more depressive disorders recorded in SA (16%) compared to previous audit (3%)

Length of admission: similar length of stay in SA (69%) and WB (71%) for admission < 28 days, similar results for admission > 28 days

Number of admissions: 18% of WB have > 2 admissions compared to 9% of SA

Status on admission: 41% of SA are detained compared to 21% of WB.

Services on discharge: More SA (13%) are now referred to IHBT (Intensive Home Base treatment) compared to previously (2%) and is comparable to WB (12%)

Conclusion: Better use of interpreting services improved communication, timely assessment and lead to reduced length of stay. Better liaison with community/crisis services lead to effective discharge planning, reduced length of stay. In-depth audit of pathway leading to MHA admission is needed.