





Service users' perceptions of safety in the acute mental health inpatient setting

- Natalie Cutler, PhD Candidate, Lecturer, School of Nursing, University of Wollongong
- Dr Jenny Sim, Senior Lecturer, School of Nursing, University of Wollongong
- Professor Liz Halcomb, Professor of Primary Health Care Nursing, School of Nursing, University of Wollongong







Patient safety concerns at child mental health unit in Wales

BBC Wales social affairs correspondent By India Pollock

O 20 December 2018





Mental health hospital in Northampton

O 6 June 2019











St Andrew's HEALTHCARE

Authorised Vehicles Only

Access Routes - Parking Restrictions

- No parking at any time on red lines Park only in decimpated around
- und some rooms at the unit lacked items such as beds, pillows and mattresses

t mental health unit has been deemed "unsafe" and threatened

Definitions of safety

Safety is the absence of preventable harm and reduction of risk associated with the delivery of health care.

WHO (2019)

We define patient safety as the avoidance of unintended or unexpected harm to people during the provision of healthcare.

NHS (2017)



What does the concept of safety mean for people who have experienced admission to an acute mental health inpatient unit?



Methods

- Naturalistic Inquiry
 - Qualitative research approach
 - Not representative or generalisable
 - Reference: Guba & Lincoln (1985)

Ethics

- Vulnerable group
- Capacity for consent
- Reference: National Statement on Ethical Conduct in Human Research
 2007 (Updated 2018)

Methods

- Setting and sample
 - Greater Sydney region, New South Wales, Australia
 - One or more admissions to an acute mental health inpatient unit
 - Not currently an inpatient

- Data collection
 - Semi-structured individual interviews



Methods

- Analysis
 - Thematic analysis (Braun & Clarke, 2006)
 - Three themes identified
 - Impact of Nurses: Availability, Responsiveness, Caring

- Rigour and trustworthiness
 - Guba & Lincoln (1994)
 - Reflexivity and consensus-seeking
 - Verbatim quotes



Demographics

- Fifteen (15) participants
 - Two-thirds female (10/15)
 - Aged between 23-56 years (mean 39)
- Seven (7) participants (47%) had five or more acute inpatient admissions
 - Length of longest admission ranged from 3-days to fivemonths
 - All but two participants had experienced involuntary admission
- Most common (5/15) self-reported diagnosis was Bipolar Disorder



Findings

Availability

- "Some of the nurses would come and sit in the common area and watch TV
 with the patients...they knew much more about what the patients were doing
 than that dude standing at the window with the clipboard" (Ellen)
- "It's not about giving someone medications and waking them in the morning and giving them a meal... it's about nurses spending time with you, and that makes you feel safe" (Kristen).
- "In theory you can go and chat to the nurses, but they're really busy, and the hourly checks are the only time they're around" (Alex)

Findings

Responsiveness

- "She would talk to me until she worked out what I needed" (Brian)
- "I'd been in hospital for weeks and wanted to go home for the weekend. When
 my doctor said 'no', I was devastated. The nurse spoke to the doctor about it,
 and even though I still didn't get leave, I felt safe whenever that nurse was on
 shift" (Nalini)
- "Some nurses wouldn't talk or listen to me... it meant I withdrew and stayed in my room. If I had a concern I'd just keep it to myself" (Jack)



Findings

Caring

- "The nurses sit down on your bed and say, 'So how are you feeling today?"" (Gloria)
- "they make me feel like I have someone in my corner that genuinely cares what happens to me" (Kristen)
- "I could talk a lot about the little acts of kindness that have made me feel very safe" (Marlon)
- "Some nurses don't really show empathy or kindness...they're just there to do their eight or 10 hours, and then go home....they don't care" (Brian)

Discussion

- Implications for practice
 - Recovery-oriented nursing aligned with safety
- Implications for service evaluation
 - Service-user measures of safety
- Implications for further research
 - Explore nurses' perceptions of safety
 - Explore barriers to availability, responsiveness and caring



Next steps

- Publications
 - Findings (themes x 3)
 - Concept analysis

 Investigate national and international linkages to promote consumer safety in acute mental health inpatient units



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References

Australian Government (2018). National Statement on Ethical Conduct in Human Research 2007 (Updated 2018). The National Health and Medical Research Council, the Australian Research Council and Universities Australia, Canberra

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology, 3* (2), 77-101.

Grubaugh, A. L., Frueh, B. C., Zinzow, H. M., Cusack, K. J., & Wells, C. (2007). Patients' perceptions of care and safety within psychiatric settings. *Psychological Services*, *4*(3), 193.

Guba, E. G., & Lincoln, Y. S. (Eds.). (1994). *Competing Paradigms in Qualitative Research* (2nd ed.). Thousand Oaks, CA: Sage publications.

Lincoln, Y., & Guba, EG. (1985). *Naturalistic inquiry*. Newbury Park, CA: Sage.

World Health Organisation. (2019). Patient Safety. Retrieved from https://www.who.int/patientsafety/en/





Self-identified diagnosis



