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The road ahead – follow-up on the 72 re-admitted patients after "A randomized controlled trial of a novel Telephone Nursing Support Service (TNSS) for psychiatric patients discharged from an acute psychiatric unit in Pamela Youde Nethersole Eastern Hospital"

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Introduction

The randomized controlled trial study on TNSS was conducted from 1st December 2009 to 31st November 2010 with the aims to

1.Enhance patient's knowledge in mental health;
2.Enhance patient's life skills and quality;
3.Support patients / caregivers in detecting early relapse, and
4.Reduce serious consequences of deteriorated mental condition.

Although the study results showed that TNSS was effective in enhancing symptom management and social functioning as well as reducing hospitalization, there were still 72 out of 279 patients readmitted. Follow-up study on these 72 cases was considered helpful to further improve the context of existing post-discharged support service in future.

Workflow of TNSS

Discharged
Community
Discharged
1st Week
2nd - 12th Weeks
TNSS Nurse calls client / carers within THREE working days upon discharge
TNSS Nurse calls client / carers at least twice within the first week upon discharge
TNSS Nurse gives subsequent calls to client / carers as scheduled for supportive counseling and ongoing mental state monitoring
TNSS Nurse completes the service at the 12th week after client successfully transited back to his/her living environment after discharge
If client is mentally UNSTABLE within 1st week of discharge, TNSS Nurse to discuss with Supervisor / Case doctor for further management
Early Follow Up
CPN
CPT
A&E
If client is mentally STABLE, but problems identified in recovery, Refer client for appropriate intervention
Problems related to medication: Client is refer to CPNS for Concordance Medication Management Training
Problems related to symptoms: Client is invited to attend Symptom Management Training
Promblems related to family relationship: Refer client to CPN for family intervention
Problems related to Social Skill enhancement : Refer client to community partner for support

Objectives:

1.To understand on the profile of the patients with readmissions during the study period of TNSS.
2.To explore factors that can predict early relapse of psychiatric illness

Methodology:

Analysis of these 72 patients with another 72 patients who successfully sustained in the community for 12 weeks after discharge from psychiatric hospital in relation to their parameters such as socio-demographic background, diagnosis, clinical features and re-admission profile, family history of mental illness, group allocation to Intervention Group (IG) or Control Group (CG) of TNSS, contact with community psychiatric nursing services (CPNS) or recovery support service (RSP).

Results and Data Analysis:

The characteristics of all re-admitted patients, 43% were coming from IG compared with 57% of CG. Majority (58.3%) of them were suffering from Schizophrenia and 29.4% were suffering from Mood Disorder. The gender differences among these 72 patients are not remarkable (Male 51.4%, Female 48.6%). The socio-demographic information and community services utilizations were showed in following diagrams.

In view of the differences on socio-demographic information, further exploration was sought by comparing same number of patients who were successfully maintained in the community for at least 12 weeks post-discharge. The results highlighted some socio-demographic information that may be considered as factors for prediction of re-admission.

Table 1. Comparison of socio-demographic parameters between readmitted patients and patients successfully sustained in community for more than 12 weeks after discharge.

		Readmission Group (n=72)		Treatment Completed Group (n=72)		Levene's Test for Equality of Variances	
Socio-Demographic Parameters		No. of Patients	%	No. of Patients	%	F	p
Living Status	Alone	12	16.7	8	11.1	4.41	0.037
	With Friend	2	2.8	1	1.4		
	With Relatives	58	80.6	63	87.5		
Employment Status	Unemployed	47	65.3	43	59.7	6.32	0.013
	Own Business	2	2.8	1	1.4		
	Outside Employ.	13	18.1	12	16.7		
	Part Time Job	6	8.3	6	8.3		
	Sheltered Workshop	2	2.8	1	1.4		
	Retired	1	1.4	2	2.8		
	Others	2	2.8	7	9.7		
Previous Admission	No	19	26.4	30	41.7	6.99	0.009
	1 - 2	14	19.4	21	29.2		
	3 – 4	8	11.1	8	11.1		
	> 5	31	43.1	13	18.1		
Criminal Record	No	63	87.5	67	93.1	5.197	0.024
	Yes	9	12.5	5	6.9		
History of Substances Misuse	No	57	79.2	65	90.3	14.953	0.000
	Yes	15	20.8	7	9.7		

Table 1:

By comparing 18 numbers of socio-demographic parameters of 72 readmitted patients and 72 patients successfully maintained in the community for more than 12 weeks after discharged from psychiatric hospital; only 5 parameters were found significantly different between 2 groups. The findings indicated that family support and day time work related engagement were the favorable factors to maintain discharged patients in the community.

On the contrary, previous psychiatric hospitalization, history of criminal involvement and substances misuse could be considered as predictors for early relapse leading to re-hospitalization.

Results & Outcome:

Telephone Nursing Support Service (TNSS) model provides integrated care management for post-discharged mental patients and their caregivers, which acts as a link between primary and secondary care in the community. The results of this study supplement the quality of service provision by suggesting some factors that can facilitate our clients to improve their length of stay in the community as well as some factors that could alert the health care providers in the prediction of re-hospitalization. It is recommended that a study with bigger sample size should be conducted to affirm our findings. It is also worthy of exploring more favorable factors to sustain the post-discharged patients in the community with more predictors in understanding re-hospitalization.

Acknowledgement: Department of Psychiatry; TNSS Working Group Members; Project Coordinator; CPNS, PYNEH