

Service Priorities and Programmes Electronic Presentations

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Anti-ligature Project in Castle Peak Hospital SIU YCR, LEE YMT, LAW WFS, LING H Castle Peak Hospital

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Anti-ligature ligature points patient suicide

Introduction

Studies in the UK show that suicide rates by hanging and suffocation have steadily increased since 1981 and have been the most prevalent methods of all suicides. Removing/reducing easy access to lethal methods of self-harm is an effective way of preventing suicide.

Staff of Castle Peak Hospital (CPH) had visited psychiatric hospital in the UK to fathom the anti-ligature installations and started to explore sources of anti-ligature ironmongery in HK. Concurrently, comprehensive risk assessment on patient suicide was conducted in CPH to better understand the ligature risks of the Hospital to formulate an improvement plan.

Objectives

To mitigate ligature risks in clinical area in order to reduce patient's suicide attempts and self-harm.

Methodology

A review of incidents and mortality reports from Jan 2005 to Apr 2013 had been conducted by the Working Group on Window Grille Management of CPH and a survey to over 800 staff on residual environmental risks of patient suicide had been conducted by the Nursing Services Division in Nov 2013. Ligature points were identified and prioritised.

A two-tier approach was established to mitigate the ligature risks.

Tier one – high risk items are window grilles in all in-patient area and water faucets in forensic wards. For wards on the ground floor, window grilles are removed and casement windows are sealed. For other wards, inner fixed 12mm-thick polycarbonate panels are installed. This proposal balances the need to eliminate ligature points and avoid institutional look.

Tier two – the risk level of other residual ligature points are medium to low. As the works are extensive which required ward decantation, CPH has taken the opportunity of ward renovation and incorporated the anti-ligature installations, including anti-ligature door ironmongery (door handles/knobs, door closers/hinges), two way doors, handrails, water faucets, detachable shower heads and hoses, removal of

window grilles for wards not included in tier one.

Effectiveness is evaluated after the removal of window grille or ward renovation through questionnaires to Ward Managers.

Result

The window grille project is proceeded in phases and the installation of anti-ligature water faucets for two high risk forensic psychiatric wards was completed. All tier one works will be completed by 1Q2017.

For tier two, three wards renovation were completed and two more wards will be done in 2017. About two wards will be renovated each year starting from 2016/17. The overall rating from the reviews collected is "satisfied".