

# Service Priorities and Programmes Electronic Presentations

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An Evaluation Nursing Audit on the use of "Suicide Risk Screening and Precaution Observation Record (General Ward)" at the Regional Hospital YEUNG PH(1), LAM L(2), LEUNG PNC(1)(4)(5), ABOO GH(1)(4)(5), WU A(2)(3)(5), PANG KY (5)

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## **Keywords:**

Suicide Risk Screening Suicide Nursing Intervention Suicide Risk Assessment Suicide Precaution Observation Record (General Ward) Nursing Audit

#### Introduction

HKEC developed the "Suicide Risk Screening and Suicide Precaution Observation Record (General Ward)" with a cluster guideline to enhance early identification of patients at risk of suicide and appropriate interventions instilled in general wards.

# **Objectives**

In 2016, the Cluster Working Group on Prevention of Patient Suicide carried out an evaluation audit on the "Suicide Risk Screening and Suicide Precaution Observation Record (General Ward)" with an objective to enhance patient safety; and to study nurses' compliance to the accurate documentation on the "Suicide Risk Screening and Suicide Precaution Observation Record (General Ward)"

## **Methodology**

An audit checklist with reference to the HKEC Guidelines on Prevention of Patient Suicide in General Wards was developed and reviewed by expert panels. Test – retest reliability correlation coefficient in 5 checklists was 0.83. The scope of audit included adult and paediatrics in-patients in the regional hospital; except patients area where ICU, EDU, OT, Psychiatry and Day wards. The audit was conducted on 26 September to 30 December 2016. Patient put on suicidal precaution with the "SP" symbols on the Patient's Allocation Map (地圖) in each audit ward and was recruited in the audit date. Data was collected through reviewing the "Suicide Risk Screening and Suicide Precaution Observation Record (General Ward)", patient notes and psychiatrist's consultation.

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# Result

Total 61 records were collected in the regional hospital. The overall compliance rate was 97.65%. Results demonstrated nurses were competent of the suicide risk screening and nursing intervention. However, there was room for improvement in two areas in the "Suicide Risk Assessment and Suicide Precaution Observation Record (General Ward)"; including 1)indicated patients' clinical information and precipitating factors in the suicide risk assessment; (2)nurses using the descriptive words on patient's emotional status, whereabouts, activities and nurse's signature. Further improvement strategies are needed to ensure accurate and complete documentation on suicide risk assessment and suicide precaution observation record.