

Mental Health Services 2012

Inspection of Mental Health Services in Outpatient Services

EXECUTIVE CATCHMENT AREA/INTEGRATED SERVICE AREA	Waterford/Wexford
HSE AREA	Waterford/Wexford
OUTPATIENT SERVICES INSPECTED	Newport Outpatients Services
CATCHMENT POPULATION	49,000
LOCATION	Dungarvan, Waterford
SECTOR TEAM	West Waterford
DATE OF INSPECTION	26 June 2012

Summary

- Multidisciplinary individual care planning was not used by the service.
- There was good evidence in the clinical files of shared care between the consultant psychiatrist and the general practitioner.

LOCATION

The Newport outpatient service was located at the rear of St. Joseph's Community Hospital in Dungarvan in the same location as the day centre and the community mental health team.

Two consultant psychiatrists provided a psychiatric outpatient service for the West Waterford region: one consultant for the general adult population and one consultant for psychiatry of old age.

All service users had access to the multidisciplinary team where needed. The day centre was easily accessed if required.

FREQUENCY OF CLINIC

The outpatients department held appointments for service users primarily on a Tuesday and Friday each week. New referrals to the outpatients services were seen by the consultant psychiatrist on Fridays and existing services users were followed up on Tuesdays.

NEW PATIENT CLINIC

New patients were seen by the consultant psychiatrist every Friday.

ACCESSIBILITY OF CLINIC

The outpatient's services were located to the rear of St. Joseph's Community Hospital. There was pedestrian access and parking was available. There was no local bus service. The premises were wheelchair accessible.

SECRETARIAL SUPPORT

The outpatient service had two 0.5 whole time equivalent administrators for the service.

FACILITIES FOR STORING RECORDS

All clinical files relating to service users currently attending or recently discharged were stored in the administrative office of the outpatient service.

ROOMS AVAILABLE:

WAITING AREA

There was a large waiting area for service users attending the service. A television provided distraction for service users waiting to be seen. There were magazines to read and toilet facilities for service users. The area was quiet and calm on the day of inspection and in good decorative order.

CLINIC ROOMS

The outpatient services had two interview rooms and one clinical room available for medical and nursing staff.

COMMUNITY MENTAL HEALTH NURSE ROOM

One room was provided for the community mental health nurse. Service users were seen for depot medication or for consultation in this room.

TOTAL NUMBER OF SERVICE USERS ATTENDING	450 - 480
AVERAGE NUMBER OF SERVICE USERS ATTENDING PER CLINIC	15 - 30
WAITING TIME FROM REFERRAL TO CONSULTATION	Within 5 weeks If referred from the Emergency Department then seen at next appointment
CLINICAL FILES	6

COMMENTS

Six clinical files were examined on the day of inspection. In four of the clinical files the source of referral was from the service user's general practitioner. Two referrals were from the Department of Psychiatry in Waterford following an acute admission. Two service users were being reviewed every two weeks whilst the other four service users were being reviewed every four to eight weeks.

The length of time that service users had been attending the outpatient service varied according to their needs with most service users attending the services for two years.

Some service users attended the outpatient service to see the community mental health nurse only, and were referred to the doctor when necessary.

There was evidence in the clinical files of shared care between the consultant psychiatrist and the general practitioner.

There was no evidence in the clinical files of multidisciplinary team input as the clinical files contained only notes from medical and nursing staff.

There were no discharge plans in any of the clinical files seen. Review dates with the consultant psychiatrist and on-going care and treatment plans were documented. One service user had been referred from the acute unit at the Department of Psychiatry in Waterford in August 2011 but did not attend their appointment on three occasions. There was a letter written to the general practitioner highlighting the service user's non attendance. Two other service users had been referred from their general practitioner but did not attend their appointments. Follow-up appointments were given to the service users who failed to attend their new appointment.