

Audit of Compliance with the Mental Health Commission's Code of Practice on Admissions to Approved Centres



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Audit presentation approved by Dr. Sinead O'Brien, Clinical Director of South Lee Mental Health Services.

Background

- Approved centres for the care of people with mental illness must follow the Mental Health Commission's (MHC) 2009 *Code of Practice on Admission, Transfer and Discharge to and from an Approved Centre*.
- The Code of Practice (COP) is designed to reflect international best practice and promote patient-centred care.
- Failure to follow MHC COPs may result in enforcement measures up to and including de-registration of the approved centre.
- We aimed to evaluate compliance with the COP for admissions at the Acute Mental Health Unit (AMHU), Cork University Hospital, and to develop interventions to improve compliance.

Methods

- We randomly selected 10 healthcare records of AMHU inpatients and examined them to calculate % compliance with each of the 14 standards for admissions in the COP.
- Following discussion with the multidisciplinary audit committee, we implemented interventions to improve compliance: emailing information on MHC standards to staff responsible for admissions, and including the initial audit results in the local academic teaching program.
- Three months after implementation of the above interventions, we conducted a re-audit to evaluate their efficacy.

Results

Standard	Initial audit compliance %	Re-audit compliance %
Information booklet offered to patient on admission, documented	0	0
Reasons for admission explained to patient	30	100
Primary care referral letter, where applicable	90	100
Family / loved one involvement, where possible	90	90
Physical examination on admission	90	100
All nine other standards in COP	100	100

Table 1. Comparison of audit outcomes

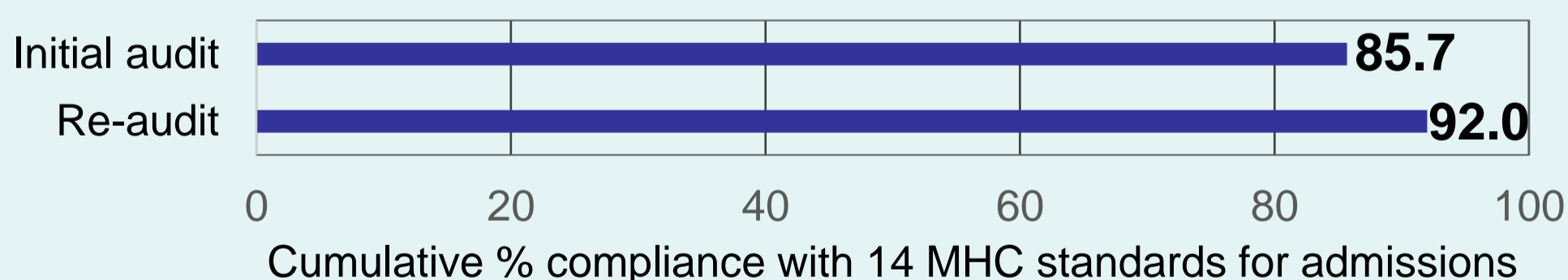


Figure 1. Cumulative change in compliance

In the re-audit, compliance was <100% for two of the 14 standards: documentation that the admitted patient was offered a copy of an information booklet on the unit (0%), and evidence that the patient's family / loved one was involved in the admission where possible (90%) (Table 1).

Cumulative compliance improved from 85.7% to 92% (Figure 1).

Discussion

- Compliance with the MHC COP improved following interventions to increase awareness of MHC standards among staff responsible for admissions.
- Although patients stated they were offered a copy of an information booklet on the approved centre on admission, this was not documented in any case.
- We plan to augment the standard admission checklist to include a designated space in which to document that the information booklet has been offered to the patient.
- Comprehensive documentation of admissions is essential to ensure compliance with the MHC COP.