

# Behind every dot there is a patient

## Timely and Efficient Diagnosis and Treatment of Co-morbid Physical Disease among mental health patients in the Faroe Islands

Eydna Iversen Lindenskov (BScN & IA), Maria Vang (G.P.), Lisbeth Vang (BScN) and Bjørghild Nolsøe (BScN)

### BACKGROUND

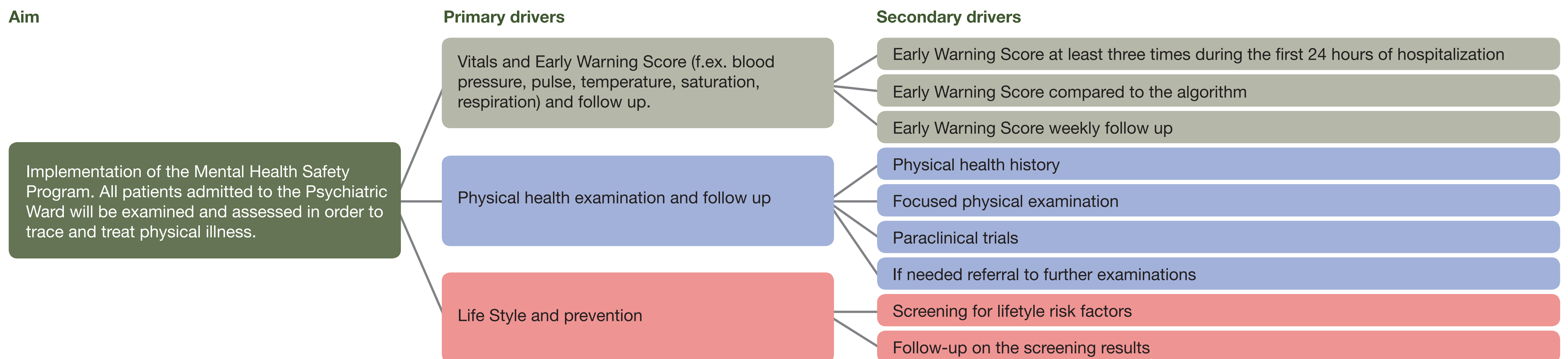
Psychiatric Center at the National Hospital of the Faroe Islands is one of eight pilot units in the collaborative “Danish Patient Safety Program for Mental Health”. The program runs from January 2015 through December 2017. People with severe mental health illness, such as schizophrenia, bipolar disorder, schizoaffective disorder and major depression, live 15-20 years shorter than

other people. 60% of this excess mortality occurs due to undiagnosed physical health problems, primarily cardiovascular diseases and certain metabolic diseases  
[www.sikkerpsykiatri.dk/media/1455/somatisk-sygdom\\_pakkerne\\_01042015.pdf](http://www.sikkerpsykiatri.dk/media/1455/somatisk-sygdom_pakkerne_01042015.pdf)

### AIM

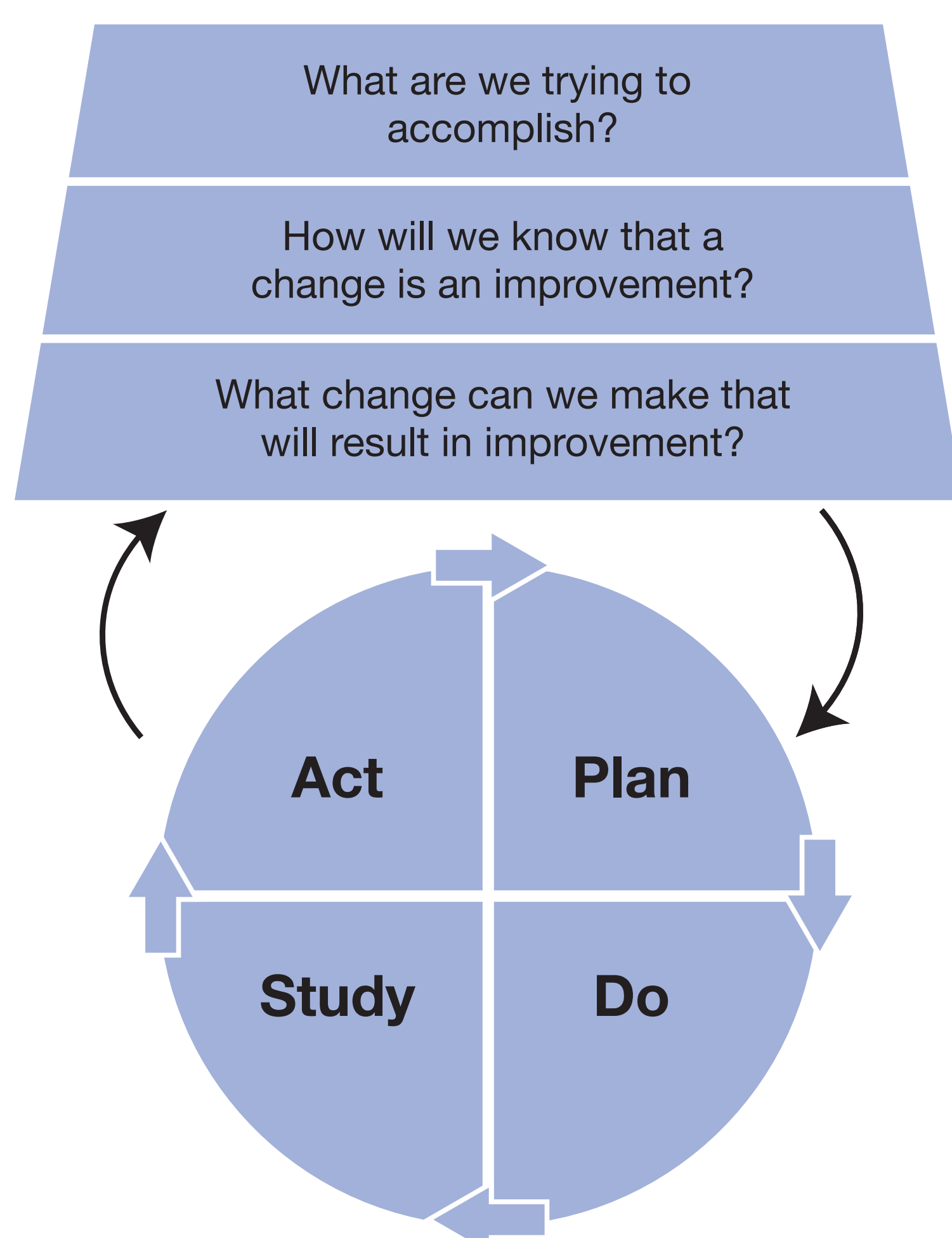
To examine and assess the physical health of all patients admitted to the psychiatric ward in the Faroe Islands in order to trace and potentially treat physical illness.

### DRIVERDIAGRAM



### METHODS

#### Model for improvement



### CASES

#### Cases from the Mental Health Safety Program at the Psychiatric Ward

#### Cancer discovered based on EWS screening

A geriatric patient is urgently admitted to the Psychiatric ward with symptoms of depression and anxiety.

The patient is found to have respiratory difficulty with a high respiratory rate. Acute x-ray of the lungs initially indicates pneumonia, and the patient is treated with antibiotics accordingly.

On the following day, the EWS has worsened, indicating the need for a new medical review. An examination of the patient shows a deterioration of the patient's condition and the patient is urgently transferred to the medical department.

A CT-scan is performed following an abnormality seen on a new X ray. The CT-scan shows malignancy, and the patient is now undergoing treatment for cancer.

#### Relapse turns out to be a bloodclot

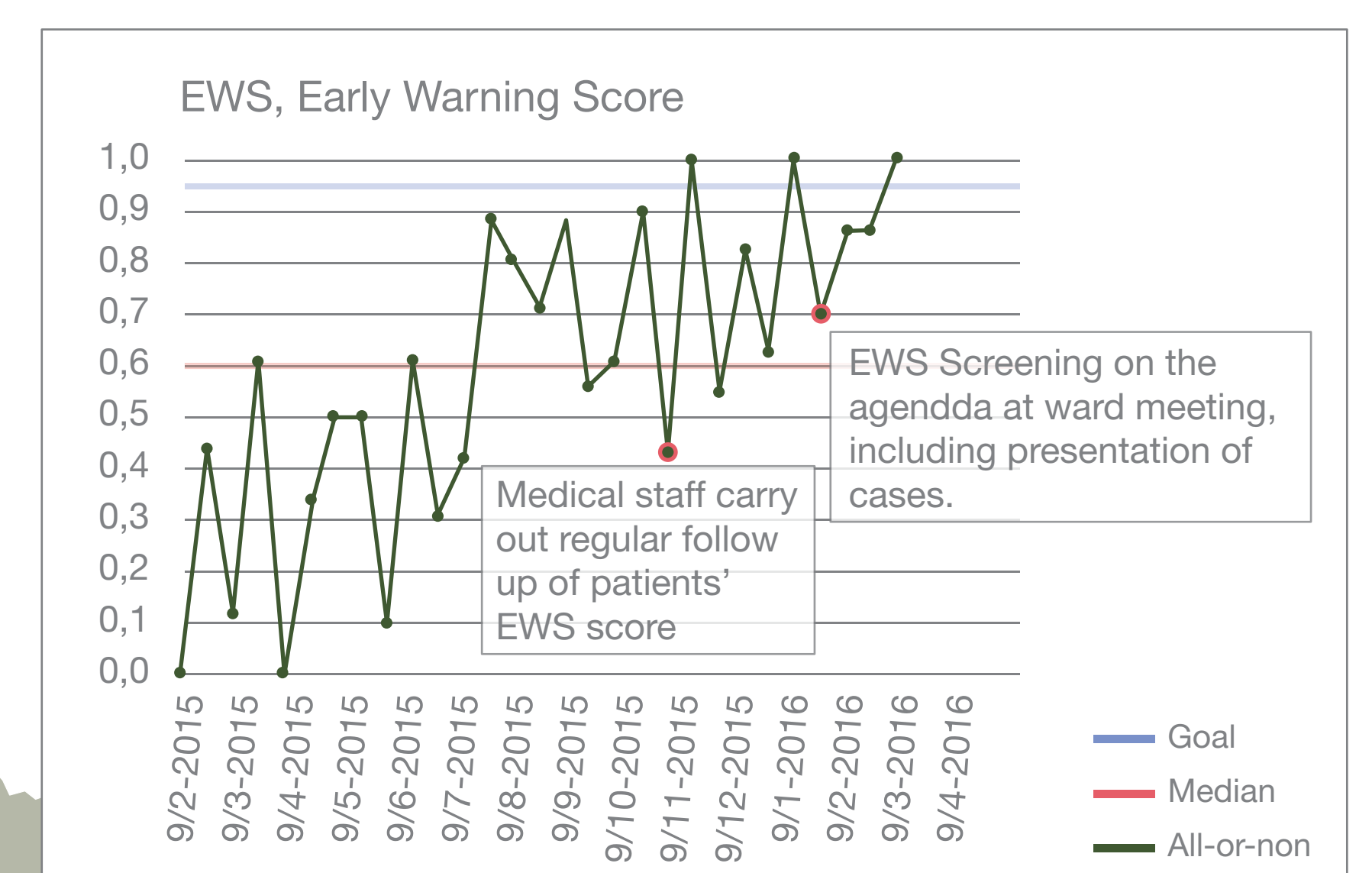
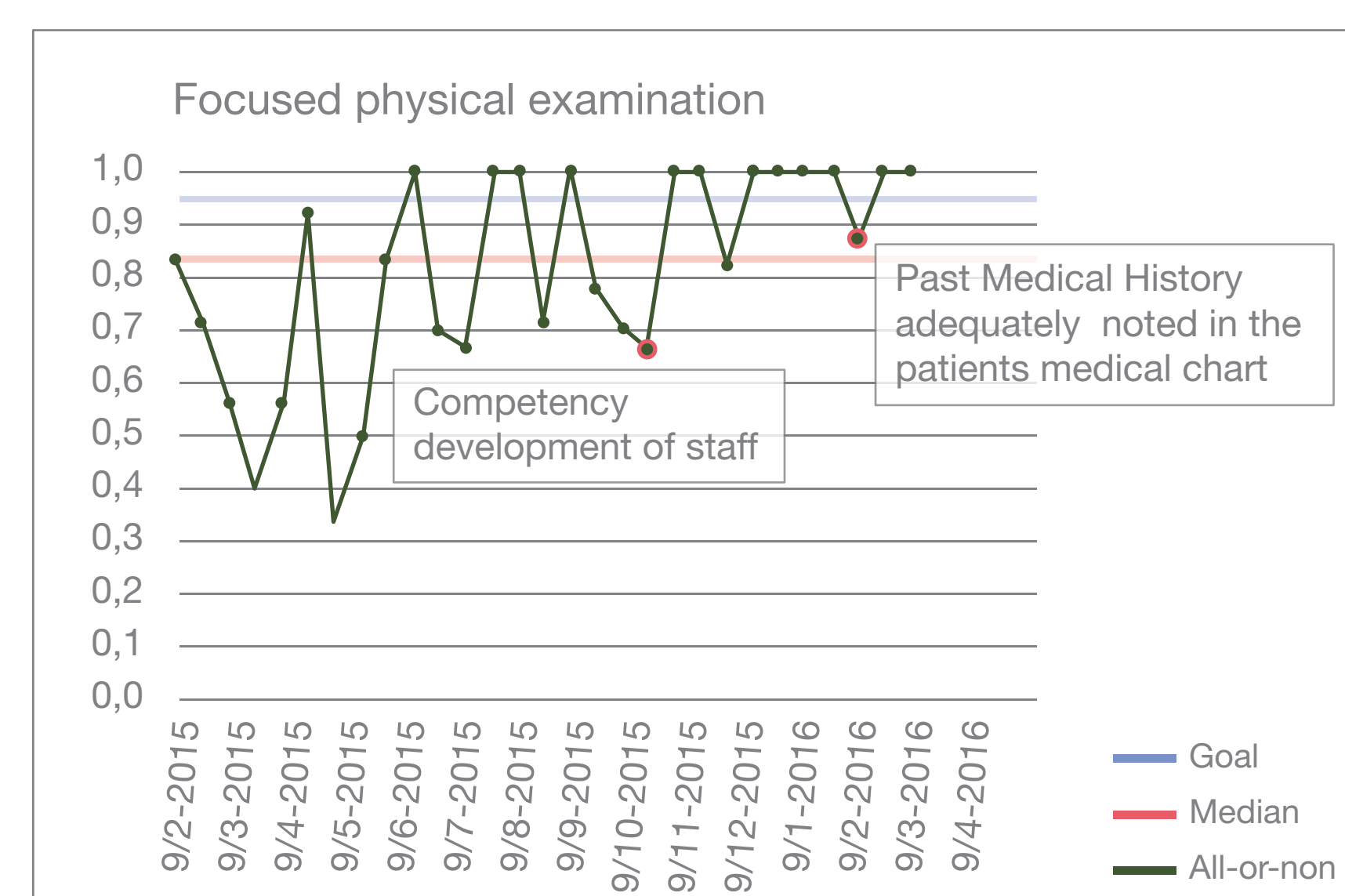
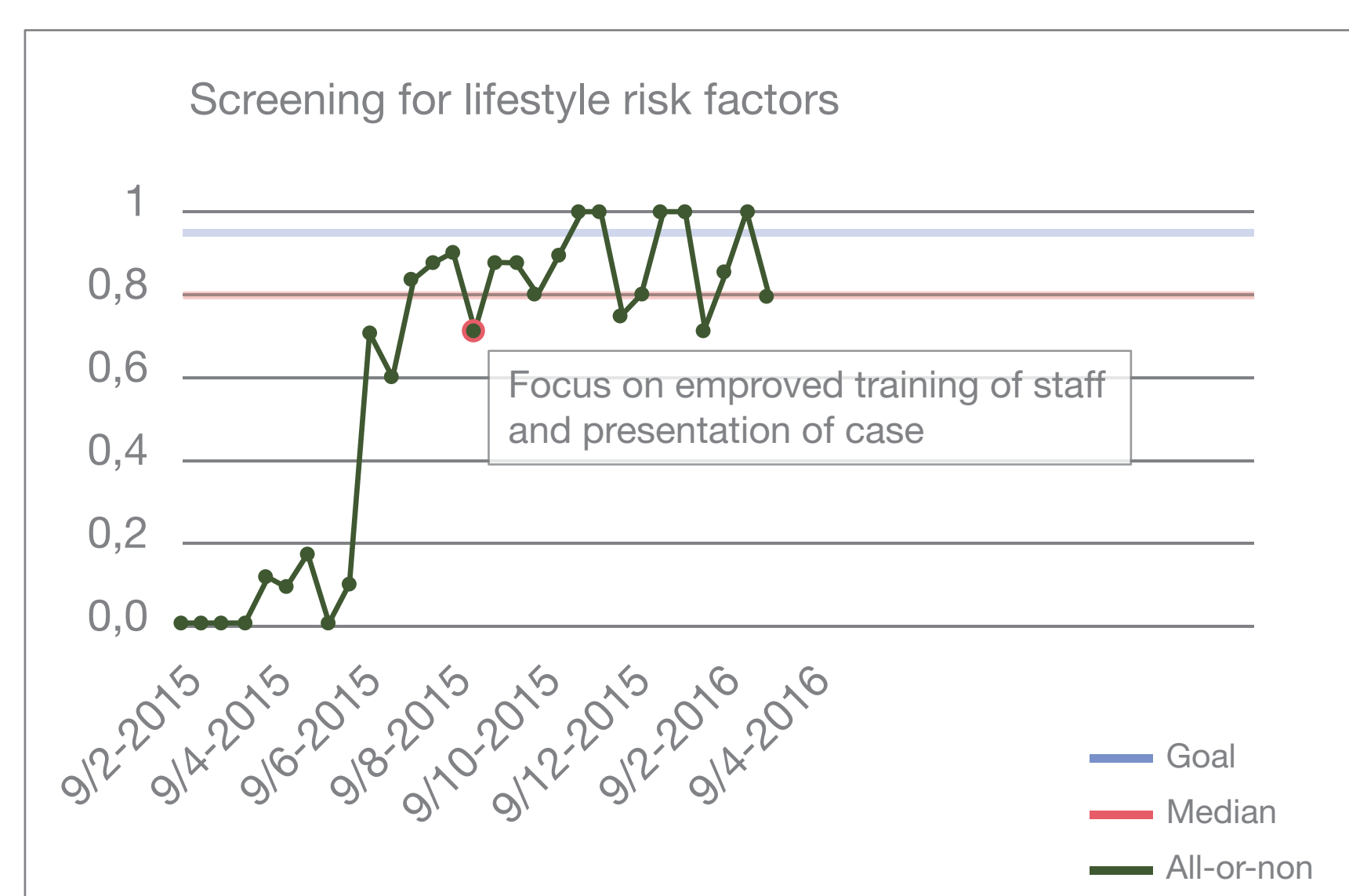
A patient is admitted to and detained in the Psychiatric ward under the Mental Health Act due to relapse and severe acting out.

The patient is treated with standard doses of Olanzapine but develops acute respiratory failure. EWS assessment shows oxygen saturation has dropped drastically and temperature has risen to 38.6 C.

On inspection, the patient has shallow breathing and a cough is noted. Listening to the lungs reveals a one-sided decrease in respiratory sounds. An acute X ray of the lungs does not show any clear reason for this.

A CT scan of the lungs, however, shows a bloodclot in the right lung. The patient has subsequently started on treatment with a blood thinning agent.

### RESULTS - Run chart illustrating the three primary drivers in the somatic bundle



### LESSONS LEARNED SO FAR

#### The importance of

- Involving case stories/patient stories
- Involving management at all levels
- An interdisciplinary improvement team working with the huddle
- Having the Safety Program on the agenda at every ward meeting
- Ongoing presentation of results for staff, hence involving them directly in improvement
- Competency development of staff

#### Faroe Islands

The Population of the Faroe Islands is 49.000. Faroese is the national language. There is only one Psychiatric Hospital in the Faroe Islands, consisting of 19 beds.

