Clinical Re-audit to Screen for Substance Misuse in Patients Admitted with Psychosis as per NICE Guidelines CG120

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BACKGROUND

Substance misuse is an important issue to address when caring for a patient presenting with psychotic symptoms.

Substance misuse is a broad term encompassing, in this guideline, the harmful use of any psychotropic substance, including alcohol and either legal or illicit drugs. Use of such substances is harmful when it has a negative effect on a person's life, including their physical and mental health, relationships, work, education and finances or leads to offending behaviour.

Previous research suggests that patients with schizophrenia have a higher tendency than the average population to abuse substances.

Substance abuse has been shown to increase severity of symptoms, suicidal thoughts and having poorer response to treatment.

AIM

To look at how well relevant information is gathered regarding substance misuse in psychotic patients in order to best care for them.

METHODS

Patients admitted to psychiatric ward (Cedar) Harrogate, with an ICD-10 diagnosis of F20-F29 were selected in the month of August and September 2015. (n=4)

Data from patients' electronic record (PARIS) within 72 hours of admission were analyzed using a designated audit tool (depicted in Fig 1)

A standard of 100% was set for each criteria of the NICE Guideline CG120.



RESULTS

Criteria	%Achieved
Record of being questioned about alcohol	100
Record of being questioned about legal/illicit drug use	100
Evidence that patient was asked about type of substance used	50
Evidence that patient was asked about quantity used (+frequency and pattern)	0
Evidence that patient was asked about route of administration	0
Duration of current level of use	50
Assessment of withdrawal	33
Evidence of a Urine drug screen with 72 hours	25

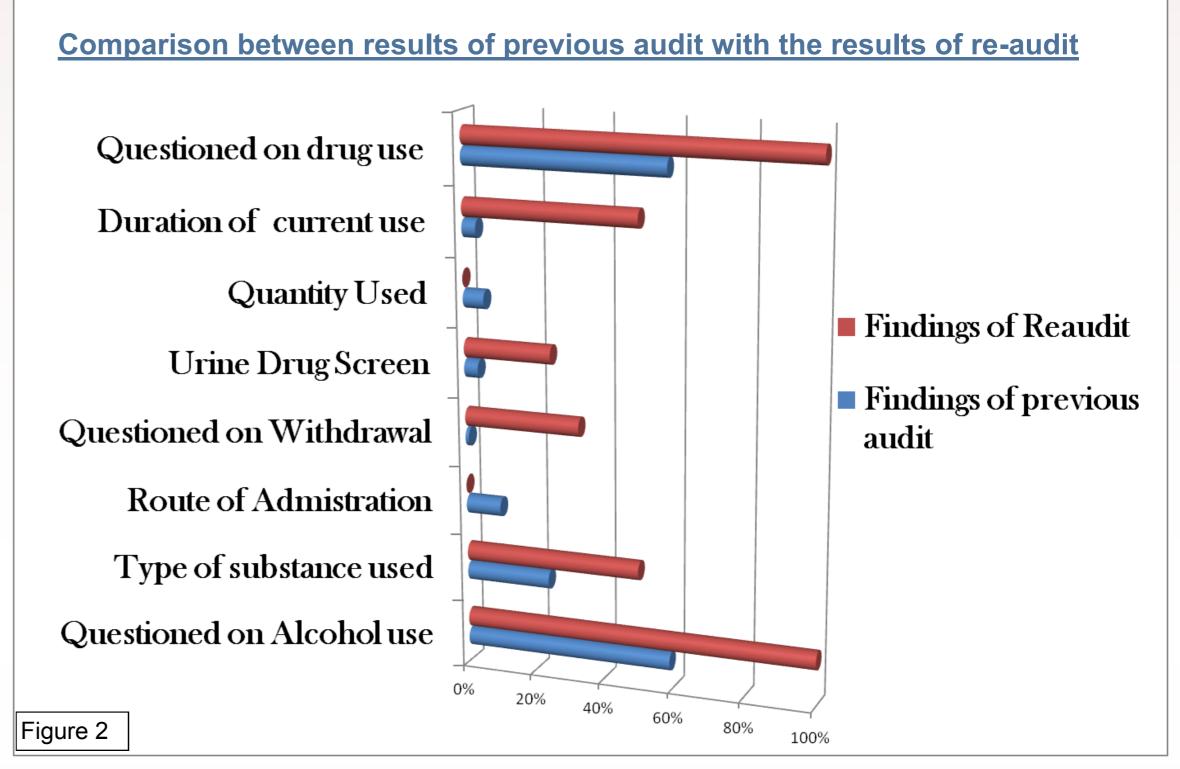


Table 1 reveals the result of this audit. Comparing this result with previous audit (Fig 3) there has been a general increase in the standards by an average of 24%. Out of the 4 patients identified, all of them (100%) were questioned about alcohol and illicit drug use. In contrast, asking about route of administration and quantity seems to be frequently left out during interviews.

CONCLUSION

As a comparison to previous work done, it is clear that there are improvements in the standards. Some areas are yet to reach their 100% target. By using recommendations (below) made by this project, these areas will be the subject of further re-audits.

RECOMMENDATIONS

- To make reference to guidelines in Junior Doctor's handbook.
- . To raise awareness through teaching sessions/audit meetings.
- To document clearly all the relevant information gathered including result of Urine Drug Screen on electronic record (PARIS)
- Re-audit within a year

REFERENCES

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