

FNOF incidents in MH services – Responding to the results of a root cause analysis

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AIMS OF TODAY'S MEETING

- Present an overview of the Root cause analysis of 5 FNOFs that occurred in MH services in 2020 – 2021.
- Discuss the details of the contributory factors identified.
- Discuss how we might address in OPMH in-patient units - the linked contributory factor in the cases

RCA findings summary

Background details	Identified contributory factors
Male PT Celyn Ward Time of fall 02.35hrs	<ul style="list-style-type: none">• Lateness of admission.• Patient was confused during admission, wanting to leave the Ward.• Patient had little sleep.
Female Pt Celyn Ward Time of fall 08.15hrs	<ul style="list-style-type: none">• Patient had little sleep prior to the fall.• Deterioration in mental health.
Male Pt Derwen Ward Time of fall 03.45hrs	<ul style="list-style-type: none">• Patient confused.• Sleep issues, fall occurred during night.• Increased periods of restlessness in the days leading up to the fall requiring PRN Medication
Female PT Onnen Ward Time of fall 02.38hrs	<ul style="list-style-type: none">• Sleep issues - fall occurred during night



RCAs continued



Female PT Suite 2 Time of fall 19.50hrs	<ul style="list-style-type: none">• Confusion. Patient diagnosed with Vascular Dementia, and also diagnosed with a UTI on the morning, prior to fall.• Sleep problems. Patient had intermittent sleep the night before the fall.• Patient would often remove Hearing Aid.• Medication causing falls.• COVID 19 fatigue.• Time when fall occurred.• The Ward was busy as Patients are preparing for bed.• Occupational Therapists are not available in the evenings to take Patients for walks and distraction techniques.• Qualified staff are completing entries in notes.• Distraction techniques (walking outside with OT Staff) were unavailable as OT Staff are not available in the evenings.

Conclusions of RCA overview.

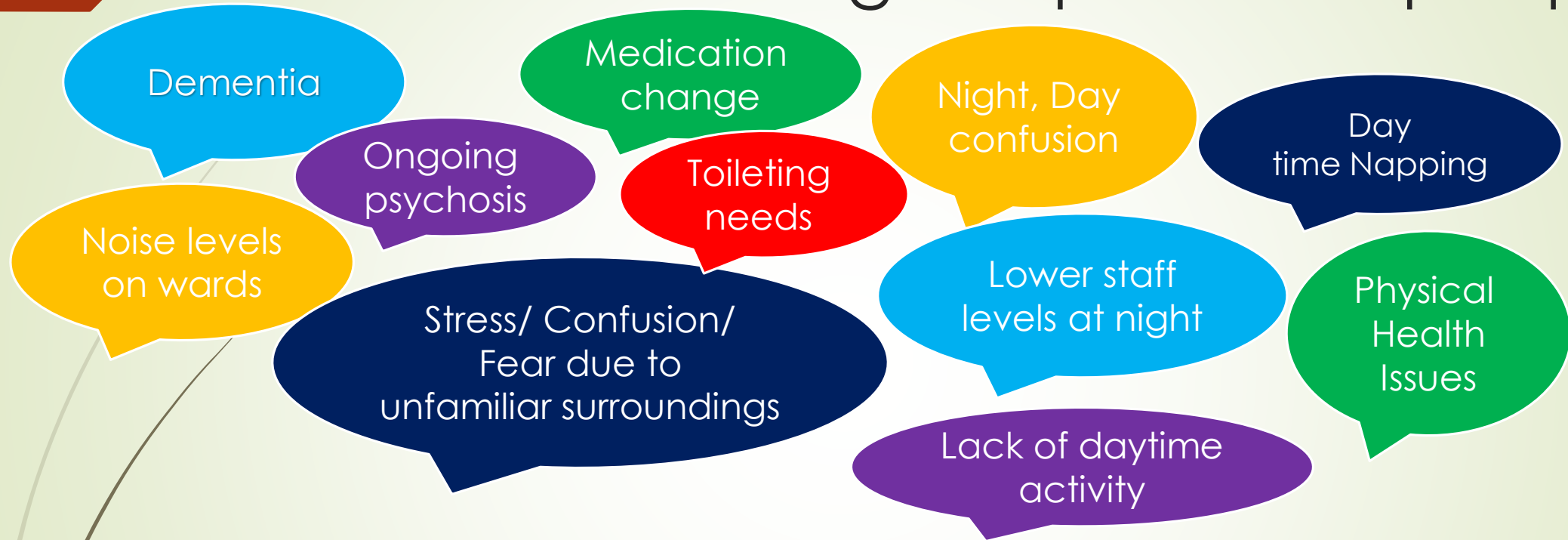


Waterfall question 1- 1 minute to answer

Related to patients in our services – what factors can effect their sleep?



Factors effecting sleep in older people



Factors that Adversely Influence Sleep Quality in Older Individuals

Behavioural and environmental factors		Physical status	
<ul style="list-style-type: none">• Sleep hygiene• Extreme temperature• Noise or light• Lack of exposure to sunlight• Physical inactivity		<ul style="list-style-type: none">• Cardiovascular disorders• Pulmonary diseases• Gastrointestinal disorders• Genitourinary disorders• Neurodegenerative disorders	<ul style="list-style-type: none">• Stroke and seizure• Chronic pain• Thyroid disorder• Diabetes• Menopause
Psychosocial factors		Medication and drugs	
<ul style="list-style-type: none">• Stress• Hyperarousal• Social isolation• Bereavement• Change of residence• Hospitalization• Work status		<ul style="list-style-type: none">• Alcohol• Caffeine• Nicotine• Central nervous system stimulants• Beta-blockers• Thyroid hormones	<ul style="list-style-type: none">• Calcium channel blockers• Decongestants• Bronchodilators• Corticosteroids• Anticholinergics• Antidepressants
Psychiatric disorders			
<ul style="list-style-type: none">• Depression• Anxiety• Psychosis• Delirium• Schizophrenia			

Waterfall question 2 – 1 minute to answer

What do we do well already in regards to dealing with the issues that effect sleep in our elderly patients?



What do we do well to address issues effecting sleep for older persons?




Waterfall question 3 - 1 minute to answer

What could we do better to address issues of sleep in older persons on our units?



What could we do better to address sleep issues for older persons?





Suggested ways to support better sleep in older persons

➤ Behavioural & Environmental

- Personalised sleep hygiene plan
- Regular physical exercise by day
- Manage light/darkness in environment (LED lighting)
- Bright light therapy by day
- Support for night time alertness
- Bedtime mindfulness support

➤ Medication and treatment

- Reduce use of benzos and Z hypnotics
- Consider use of melatonin
- Reduce stimulants after mid-day (de caf)
- Review meds RE stimulant and sleep side effects



Supporting better sleep cont

➤ Psycho-social factors

- Mindfulness RE sleep
- Music sound therapy
- Bedroom personalisation
- Assurance interaction RE sleep – reduce sleep demand interaction

➤ Physical status

- Assess and treat sleep disorders
- Manage pain
- Assess and agree management of physical health issues to support better sleep.
- Support continence



WHAT NEXT?

- ▶ Shall we just circulate the presentation and answers for others to see?
- ▶ Could wards cascade this information in sessions to their own teams?
- ▶ Could an area or all areas –address some of the issues highlighted?
- ▶ Could we take a service approach and agree to address the issues consistently after doing some more work on what this would look like?
- ▶ Could we undertake a piece of research in one area – implementing agreed interventions with a small number of people at high risk of falls and look at that in comparison to others that don't have the planned overall sleep interventions?
- ▶ Shall we do nothing?
- ▶ What else could we do?

What should we do next?



