

Intensive Care in a Forensic Medium Secure Service

Dr Gerard Waldron
Consultant Forensic Psychiatrist

10th September 2010

Summary

- Introduction
- The area
- The service
- The ward
 - Structural security
 - Procedures and protocols
 - Clinical practice
 - Vignettes

Introduction

- The evolution of a new speciality
- Services developed in relative independence
 - A recent survey found that approximately 50% of MSUs operated with a designated PICU (Adams and Clarke, 2008)
- Significant risk is ordinarily a prerequisite to entry to these services

The area

- East London
 - Hackney (and the City), Tower Hamlets, Newham, Waltham Forest, Redbridge, Barking & Dagenham, and Havering.
 - Total population is approximately 1.5 million
- High indices of depravation

The service

- The John Howard Centre
- A secure unit predominantly on one site
- Various types of wards (medium and low secure, and open)
- Sub-specialist services including rehabilitation, women's service, personality disorder service, learning disability service

The service

- A total of 210 beds
 - 80 medium secure beds
 - 47 admission beds spread over three wards
 - 7 intensive care beds

The ward

- Moorgate ward
- 7 beds
- One seclusion room and the use of one other seclusion room on another ward

Staff mix

- Nursing team
 - 5/5/4 shifts with a senior nurse providing cross shifts
- A ward based Occupational Therapist
- Medical, Clinical Psychology and Social Work input from the sector team for an individual team
- Input from a member of the security team for the service

Components of care – Structural Security

- 7 beds, instead of 16+ on admission wards
- A locked door at either end of the ward (not an air-lock)
- One seclusion room
- Secure escape proof windows
- A recreation area with a high fence

Components of care – Procedures

- Searching
- Drug and alcohol screening
- Visits
- Off ward leave
- Structured assessment of risk
- Lead for service in use of seclusion

Components of care – Relational Security 1

- Structured assessments
 - Before and after admission
- Pre-admission planning where possible
- Welcome pack for new patients
- Practical management plans done in consultation with patients

Components of care – Relational Security 2

- Weekly ward rounds
 - Frequent reviews of mental state with attention to medication prescription (regular and PRN)
 - Review of observation
 - Review of leave status
 - Non-medication interventions
 - Ward and off ward psychosocial interventions
 - Psychological interventions including advice on behavioural plans

Seclusion

- Access to two seclusion rooms, one off ward
- Nursing team lead on management of seclusion within the service
- Emphasis on MDT involvement continuing during a period of seclusion
- Long term seclusion a factor predicting the provision of a second opinion and/or referral to high security

Some facts and figures 1

- Rough figures
- 77 admissions and transfers over two years
 - June 2008 – May 2009 = 44
 - June 2009 – May 2010 = 33
- Seven people re-admitted over the two years

Some facts and figures 2

- Detention order

- Section 2 or 3 = 18

- Section 38 = 10

- Section 37/41 = 15

- Section 48/49 = 10

- Section 47/49 = 20

Some facts and figures 3

- Transferred from
 - Prison = 33
 - Another JHC ward = 29
 - PICU/Low Secure Unit = 11
 - Police Station = 2
 - Open ward = 2