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Service user experience of receiving Remote Inpatient Mental Health Treatment via the homecare service



Service user experience of receiving Remote Inpatient Mental Health Treatment via the homecare service

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#### St Patricks Mental Health Services: Who are we?

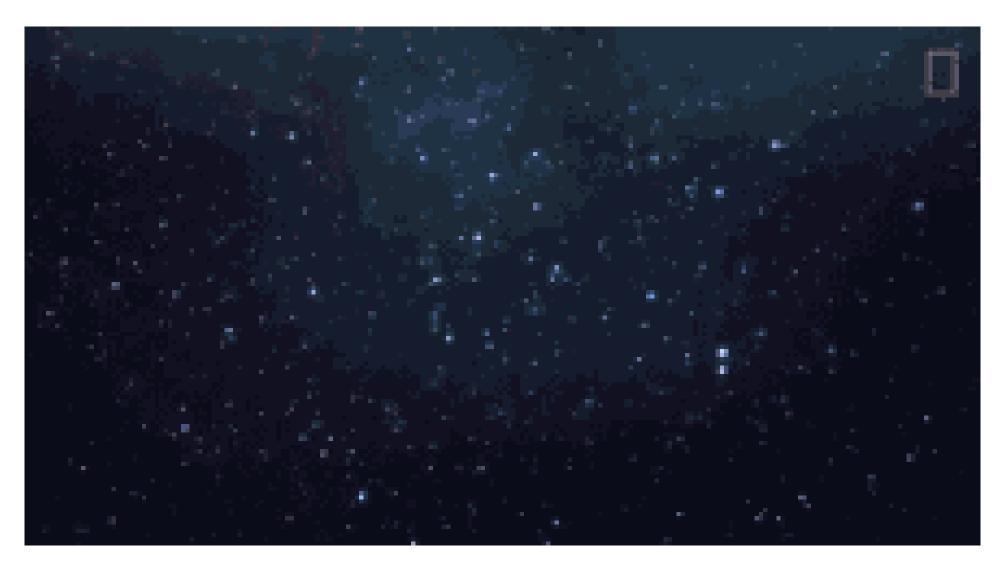
The foundation of St Patrick's Hospital was brought about by the will of Jonathan Swift, Dean of St Patrick's Cathedral, noted satirist and patriot, who, upon his death in 1745, left £12,000 to 'build a house for fools and mad'.

- Largest mental health services organisation in Ireland
- Independent, not for profit
- Founded in 1746 by author of Gulliver's Travels, Jonathan Swift
- 2 campuses
- 3 Mental Health Commission Approved Centres
- 305 physical bed pre-Covid
- 7 Dean Community Clinics pre-Covid
- 6 Associate Dean Clinics pre-Covid
- Over 700 staff pre-Covid
- Over 25 Day Programmes pre-Covid



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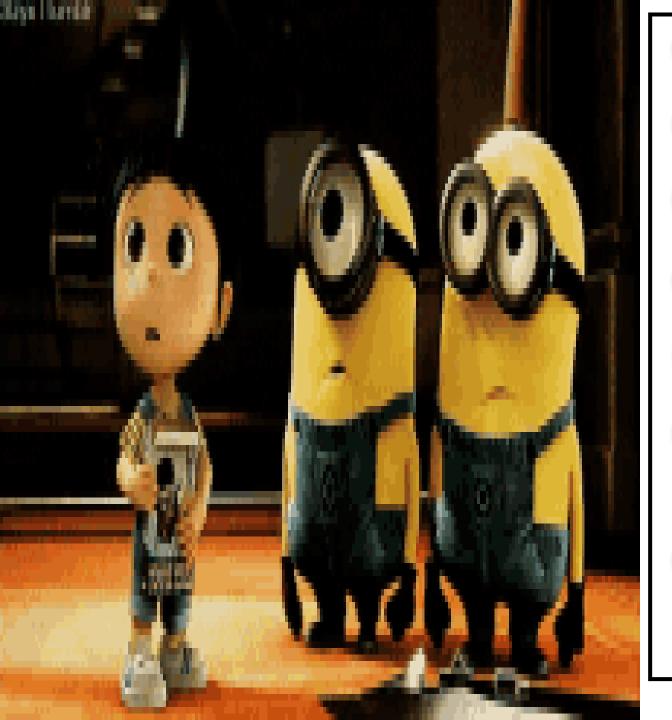
# March 2020 Big Bang!!!!!!!!





## The Fear!!!!!!!!!!







<sup>2</sup> Laptop roll out



<sup>3</sup> Microsoft Teams for all



- <sup>5</sup> Group sessions via Teams
- <sup>6</sup> Community assessments via Teams



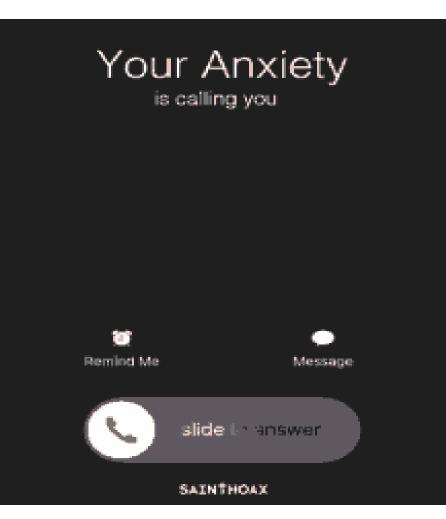
**Remote admission** from home

### What happened when we told our staff?

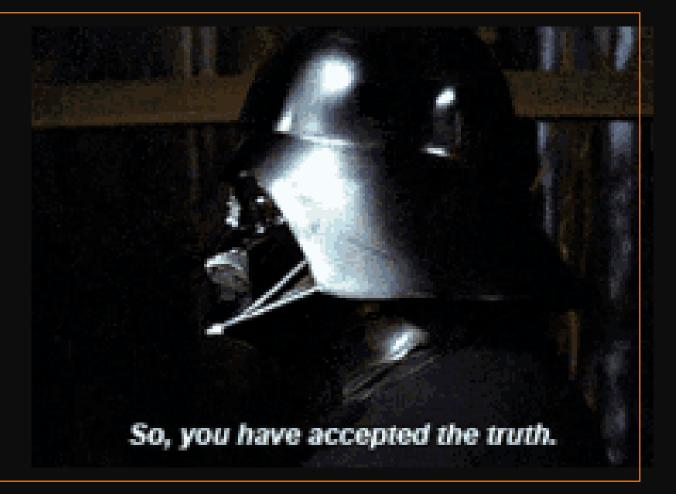


# Staff adjustment

#### Steep learning Curve



# Acceptance



### Homecare Service

1.1. Have support available 24 hours a day, seven days a week

1.6. Be provided with ongoing psychotherapeutic interventions, delivered remotely

> 1.5. Receive appropriate individual therapy sessions with members of your MDT, delivered by videocall

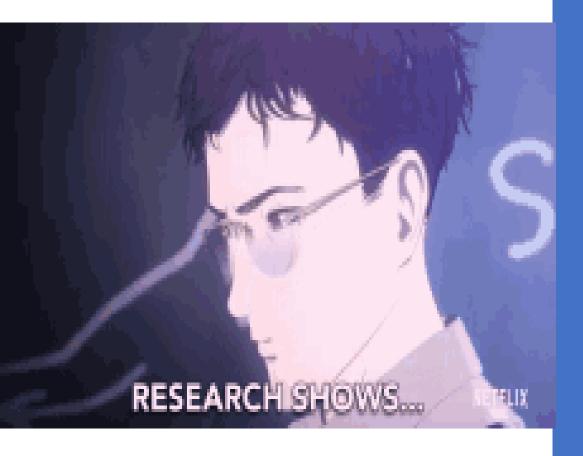
 Have your medication and prescribing reviewed as regularly as other inpatient service users, with measures to ensure you receive any new medication being followed through

Communication

1.2. Be assigned to one of our MDTs, which, depending on your needs, typically includes a consultant psychiatrist, nurse, occupational therapist, psychologist or social worker; your MDT will discuss your care at weekly meetings

2 Abbell

1.3. Be contacted by a member of your MDT at least once every day, by videocall where available and, where not, by phone of ward nursing staff



#### **Research Paper**

Service User Experience of receiving Remote Inpatient Mental Health Treatment via the Homecare Service.



#### Background

#### Nurse Education Centre Team Approach





### Objectives

To explore service user experiences of accessing mental health services using videocall and other technological channels

- To examine the factors that assist or hinder the process of remote delivery of a mental health service.
- 3

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To evaluate service user satisfaction levels with the service

# Method and Data Collection

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Quantitative approach to capture SU satisfaction of using the homecare service.



All people who availed of the homecare service between December 2020 and March 2021 were sent out a link to an anonymous survey by the gatekeeper and they were invited to complete it online.



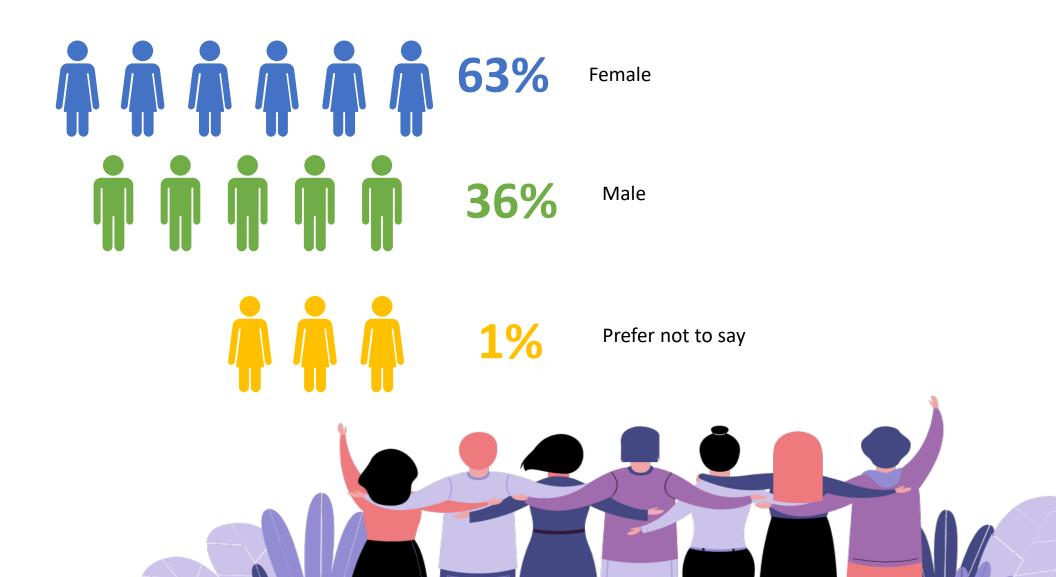
Quantitative data was inputted into SPSS and descriptive and inferential statistics were computed.

# Results

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RESULT'S DAY

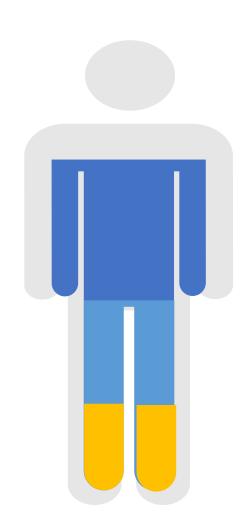
## Results- Participants (n= 88)



### DEMOGRAPHICS

67%

Previous Inpatient Experience



## LOCATION FOR HOMECARE TREATMENT



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The above relates to the average mark out of ten for Homecare service-mean from 65 participants who scored this was 7.6/10.



95.2% rated ward-based nursing staff as good or excellent

89.6% rated TLNs as good or excellent

61% approval with remote admission process

65% approval meeting with Multi-disciplinary Team

1:1 work with a Clinician - 81% approval

Remote Group therapy - 51% approval

Arranging collection of medication from nearest pharmacy was convenient - 91% approval



Happy with my discharge plan from remote care - 70% approval

If I had to use this service again I would prefer to attend remotely – 33% approval – neutral 37% - disagree 28%

# Results Quantitative



#### Themes

1. A viable alternative to inpatient care

"I could not have gone into hospital because of home commitments. Home care was a God send for me as was my only option."

"This is a great service. It is inclusive and can avoid lengthy stays in hospital"

"Accessing the services while in the comfort and familiar surroundings of my own home was really beneficial"

# Qualitative Findings

2. The importance of relationships

"Getting a call every day from the nursing staff made me feel secure."

"Daily contact with hospital staff gave a sense of security when feeling vulnerable"

"The lack of face to face was difficult at times to connect with someone."

# Qualitative findings

#### 3. Technology

"After my initial worry about my ability to manage technology, I became very comfortable with it and was able to participate in and complete the second stage of the depression programme. My experience of using the technology has had a very positive effect personally. My exposure to it has increased my confidence and allowed me to continue my treatment from the comfort of my own home."

## **Qualitative Findings**





#### vices

#### Thank you for your time today. Questions?



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