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News

The 17th annual NAPICU Conference *Pathways to high quality acute inpatient care*: 6th–7th September 2012, Manchester Conference Centre, UK

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The 17th NAPICU conference was held at the Manchester Conference Centre, in the heart of Manchester, on the 6th and 7th of September 2012. The theme for the conference was *Pathways to High Quality Acute Inpatient Care* in both low secure and psychiatric intensive care settings.

Ranging from clinical opinion sessions, to presentations of new research, practice-based projects, audits and investigational studies, there was a diverse and interesting programme covering many aspects of inpatient care.

The conference was organised by a planning committee comprising Mrs Caroline Parker, Consultant Pharmacist for Adult Mental Health Services, Central & North West London NHS and NAPICU Director of Research and Scientific Programmes; Dr Faisil Sethi, Consultant Psychiatrist, South London and The Maudsley NHS Foundation Trust and NAPICU Vice Chairman; and Mr Paul Deacon NAPICU Deputy Director of Research and Scientific Programmes.

DAY ONE

We were warmly welcomed by the chair for the morning, Malcolm Rae OBE, who was Nursing Officer for Mental Health and Forensic

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Psychiatry at the Department of Health up to 2002, and who was made an honorary fellow of NAPICU last year.

As part of his welcome he said that he hoped we would reflect and learn new ideas, and that what we would hear at the conference would challenge our assumptions.

He expressed how delighted NAPICU was to be able to welcome international delegates from Iceland, Belgium and the Netherlands. He talked about the other positive things that could be gained from the conference, encouraging us to use it as an opportunity to network, make friends and to learn from each other.

The opening address was given Dr Stephen Pereira, Chairman of NAPICU. Dr Pereira reminded us about how much NAPICU has achieved over 15 years; developing national standards, delivering high quality services and raising the profile of PICU care. The NAPICU executive team has continued to work with the Royal College of Psychiatrists Centre for Quality Improvement (CCQI) in the development and roll-out of the AIMS-PICU Accreditation programme. The Journal of Psychiatric Intensive Care continues to expand, publishing articles reviewing and exploring the evidence-base and clinical practice in PICU and low secure care

Dr Faisil Sethi, the deputy chair, added his welcome and told us about current challenges

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that we face, especially with the imminent update of low secure and PICU guidelines for commissioners. The NAPICU executive team continues to engage with the Department of Health in looking at the policies and guidance in this area.

The first keynote speaker of the day was Professor Sean Duggan, Chief Executive for the Centre of Mental Health who spoke about Aiming for efficient and world class secure care. He talked about the importance of all three sectors being involved in effective PICU care and gave us very interesting perspectives regarding recent national political developments. He also reminded us about important matters in the bigger national picture: commissioning, clinical commissioning groups and the criminal justice system interface with the NHS. Overall it was a really interesting and useful strategic overview.

The second speaker was Peter Finn, Mental Health Lead of Mazars LLP. He talked about national benchmarking data and the patterns of use of psychiatric inpatient beds, and about the work of his organisation disseminating good practice across the NHS. The talk gave a great deal of valuable context about the use of benchmarking and its relevance for mental health. He gave us more detail about the Mental Health Needs Index, developed to help local managers, district purchasers and national policy makers in allocating resources, and showed us interesting examples of variations in PICU and low secure use nationally.

The third speaker of the morning was Professor Len Bowers from the Institute of Psychiatry. His talk was entitled: What are PICUs for and by what outcomes can they be evaluated? Professor Bowers described his large study of 136 wards over 6 months. He looked at the rates of transfer of patients from open wards to PICUs and compared units with and without a PICU on site. Transfer rates overall to PICU were fairly low; aggression, drug use and absconding were the reasons for transfer. But Professor Bowers and colleagues found no link between having access to a PICU and the number of aggressive incidents. PICU transfers were associated with seclusion, manual restraint

and other severe containment measures. He concluded that transferring patients to a PICU may not be an effective means of reducing adverse incidents on acute wards and may not have appreciable cost benefits. However, he acknowledged that PICUs may still produce a range of valued outcomes such as injury reduction, more effective and efficient treatment and greater feelings of security on acute wards. Understandably, presenting these results provoked a lot of stimulating debate and discussion about the research findings, about future research and about the function of PICUs.

The breakout sessions, held in the morning and afternoon sessions were:

- Mental health law update led by Mr Andrew Parsons Solicitor and Partner Radcliffe Le Brasseur
- AIMS-PICU: Having been AIMSed the next steps led by Mr Paul Deacon, NAPICU Deputy Director of Research and Scientific Programmes
- Benchmarking and review of PICUs across Greater Manchester led by Ms Helen Marsh, Suicide Audit Development Manager, Greater Manchester Mental Health Network and Dr Parsley Powersmith, Consultant Psychiatrist, Pennine Care NHS Foundation Trust
- What is a high quality productive multidisciplinary team ward round? Led by Dr Peter Curtis, South London and Maudsley NHS Foundation Trust
- Developing junior doctors in the PICUs and LSUs led by Dr Dan Hume, Sussex Partnership NHS Foundation Trust.

In the afternoon there was a split panel lecture discussing what high quality care looks like. This provided some really interesting perspectives from the four speakers who gave views from different disciplinary backgrounds: Dr K. Valsraj, Associate Clinical Director from East London NHS Foundation Trust, gave us a Medical Manager's perspective; Dr Denise Bound who has recently retired after many years as a PICU Consultant at Sussex Partnership Foundation Trust gave us benefit of her years of experience; Roland Dix, Consultant Nurse Intensive Care

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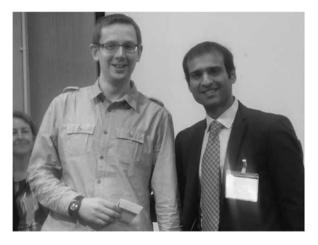


Figure 1. Peter Curtis receiving the poster prize



Figure 2. Alex Onyenaobiya receiving the stall prize on behalf of Ward One, South West London and St George's Mental Health NHS Trust

and Editor in Chief of the *Journal of Psychiatric Intensive Care* talked from the point of view of a senior nurse; and Thomas Kearney, Executive member of NAPICU, gave us a perspective from occupational therapy.

The joint speakers in the afternoon were the NAPICU Vice Chairman Dr Faisil Sethi along with Guy Cross who is the lead for the PICU/Low Secure Consultation and Policy Manager for the Offender Personality Disorder Programme at the Department of Health. They gave us an important update about standard setting and policy guidance in PICU care and talked about the upcoming guidelines for commissioners.



Figure 3. Representatives of Lark Ward, NAPICU Team of the Year 2012, receiving their award

Throughout both days we had the chance to look at very interesting stalls and posters. The poster prize went to Peter Curtis (Fig. 1) for his presentation about creating a high quality multi-disciplinary ward round. The stall prize went to the team from Ward One, South West London and St George's Mental Health NHS Trust (Fig. 2).

The Gala dinner was at the fantastic setting of Old Trafford; the team of the year was awarded to Lark Ward, Norfolk and Suffolk NHS Foundation Trust (Fig. 3).

DAY TWO

Claire Murdoch, the CEO of Chelsea and West London Mental Health Foundation Trust was the Chair for the morning and again welcomed us warmly and enthusiastically. She reminded us in her opening address of the importance of compassion in what we do on a day to day basis.

She introduced the team from Rosebank ward, East London NHS Foundation Trust, the winners of last year's Dragons Den, who fed back to the conference about the development of the subject of their winning bid, their fantastic multi sensory room; and about the positive impact it has had on their patients.

We then heard from Dr Ify Okocha of Oxleas NHS Foundation Trust about the importance

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of the integration of physical and mental health in the PICU. His summary was relevant and very useful; improvements are happening but he made it clear that there is a long way to go.

Colin Dale, Chief Executive of Caring Solutions talked about the important work he has been involved in regarding the relationship between restraint and asphyxia; clearly a very important issue. His presentation was both interesting and crucial for those working in PICUs to be aware of

Michael Doyle, the programme director at the University of Manchester and Greater Manchester West Mental Health NHS Foundation Trust talked about his research around recovery and pathways out of medium and low secure units. The scale he has developed has so far produced interesting results and may well be of value in PICU research.

I don't think anyone in the room could have been failed to be moved by Dr Pereira's interview with Dr Ratna Sakya; Dr Sakya gave us moving insights into his and his wife's experiences in the mental health system caring for their daughter. We were reminded of the hard work and compassion required by carers and how important it is to work with them and support them.

Dr John Tully from South West London and the Maudsley Mental Health NHS Trust also talked to us about his team's work around GPS monitoring of patients on leave from secure services; this was really thought provoking; ethically challenging but potentially useful for many of us.

Finally, Matthew Page talked eloquently about leadership and what it means both from a personal and more institutional perspective; it was a thought provoking way to finish the programme.

CONCLUSION

One of the strengths of NAPICU is its multidisciplinary focus and the conference this year underlined the fact that irrespective of our professional allegiance, clinical or managerial, within PICU and low secure services, we continue to develop and improve to ensure that we produce the best possible outcomes for our patients. This conference, which was extremely well put together and organised, really gave us ideas and motivated us to carry on doing that. I look forward to seeing what the organising committee produces next year.

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