

# Emerging Issues and Challenges for Improving Patient Safety in Mental Health: A Qualitative Analysis of Key Informants' Perspectives

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## Introduction

This research builds on existing knowledge by soliciting the expertise and experience of Canadian and international leaders in the area of patient safety in mental health via telephone interview.

The interviews sought information on:

- Current initiatives and research.
- Strategies for improving patient safety.
- Emerging issues.
- Gaps in current knowledge and practice.
- Barriers to improving patient safety.

This research is part of a larger project which includes a literature review and an invitational roundtable event conducted to produce a background paper on patient safety in mental health.

## Method

Qualitative telephone interviews were conducted with 19 key informants in patient safety and/or mental health. Key informants were selected by the Pan-Canadian Mental Health and Patient Safety Advisory Committee, Ontario Hospital Association, and Canadian Patient Safety Institute.

Sample characteristics:

- 15 Canadian key informants (BC, Alberta, Ontario, Quebec, and Nova Scotia).
- 4 international key informants (UK, USA, and Australia).
- Key informants had experience/expertise in either mental health (36.8%) or patient safety (21.1%), or in both (42.1%).
- Key informants held a variety of professional positions including management, administrative, academic, clinical, advisory, consulting, patient safety institute affiliation, patient advocacy, forensic mental health judge, and risk assessment.

## Analysis

The analysis involved a two-step process:

1. Coding each interview.
2. Identifying larger themes.

## Results

### Defining Patient Safety in Mental Health and Setting Priorities

There is considerable variability in how patient safety in mental health is conceptualized. There is a recognized need to arrive at a clear definition and set priorities to guide future action.

Key informants identified the following safety concerns:

- Suicide and self harm.
- Medication safety.
- Aggression and violence.
- Sexual safety.
- Slips and falls.
- Patient elopement and absconding.
- Seclusion and restraint use.
- Substance use.
- Cigarette smoking (fires).

### The 'Newness' of the Patient Safety Issue and Corresponding Lack of Awareness

Patient safety in mental health is an up-and-coming area and there is a corresponding lack of awareness of the issues. This has resulted in a dearth of good information, research, and standards of practice or policies to prevent patient safety events. The information that is available is not widely distributed.

### Conceptualizing Patient Safety in the Community

There is little information on patient safety in mental health in the community, but there is a need to conceptualize the issue. This is a pressing need because many patients are treated in community-based mental health services or released into the community.

### Improving Quality of Care and Service Availability

Patient safety is not independent from other areas of mental health care and is impacted by service availability and quality of care. It is difficult to establish safe environments for patients when resources are scarce, services are overburdened, or quality of care is undermined by the stigma associated with mental illness.

## Results (continued)

### Improving Patient Safety is a Multi-level Undertaking

Improvements to patient safety need to be made at an individual and an organizational level and must be supported by provincial and national developments. International initiatives are also helpful.

### Strategies for Improving Patient Safety in Mental Health

- Improved education, awareness, and staff training.
- Improved information sharing and research.
- Improved communication and cooperation.
- Improved practical tools and actionable solutions.
- Improved facility design.
- Improved documentation and reporting practices.
- Improved monitoring, discharge planning, and hand-off strategies.
- Improved service availability and quality of care.
- Improved staff attitudes, institutional cultures, and silos.
- Improved patient advocate.

### Barriers to Improving Patient Safety in Mental Health

- Insufficient resources (funding and workforce).
- Staff attitudes and institutional culture.
- Ignorance and a lack of awareness.
- Patient safety considered as a low priority.
- Limited information sharing and service coordination.
- Mental illness stigma and marginalization of mental health patients.

## Conclusion

Patient safety in mental health is an emerging concern and there is a lack of awareness of the issues as well as a shortage of research and information on the topic. More work is required to establish a clear definition, set priorities, and develop strategies for responding to patient safety concerns.

Despite the 'newness' of the issue, preliminary steps have been taken to improve the safety of patients by individual organizations as well as by provincial, national, and international agencies.

The key informants interviewed recognize that there are many barriers to improving patient safety and that a link exists between patient safety and service availability, quality of care, and mental health stigma. There is also recognition that other health sectors can provide important information on how to address safety concerns.