

PECC (Psychiatric Emergency Care Centre) – The Next Generation

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Case for change

20% of referrals to PECC are adolescents



Referral

Two different referral pathways to PECC

Long wait times for specialist CYMHS assessment



Admission

Confusion over what the unit does & how it operates

No activities or things to do "boredom"



Clinical Care

Office based equipment

Patients & carers don't feel involved in the treatment plan



Discharge

Adolescents make up to 18% of all 28 day readmission for PECC









Goal

To redesign the PECC unit within the NBMLHD Mental Health service to provide a more targeted specialised care by April 2019.

Objectives

- To increase the Your Experience of Service Questionnaire (YES) overall index score from 68% (not performing) 2017/18FY to higher than >75% (excellent or very good experience) 2019/20FY.
- To reduce the average wait time for specialised Child Youth Mental Health Service (CYMHS) assessment for adolescents admitted within the PECC from 4 hours in 2017/18FY to 2 hours by 2019/20FY.
- To reduce the 28 day readmission rate for consumers under the age of 18 from 18% 2017/18FY to >3% 2019/20FY.

Method

	Diagnostics		Solutions
	Surveys C (9) F (8) S (12)		Brain Storming
	Process Mapping (20)		Power of three
	Observation/Case Reviews		Blitz

Key Diagnostic Findings



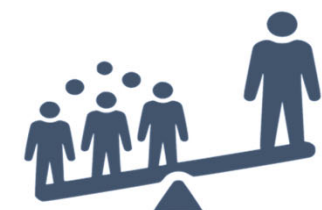
40% of staff felt they lack Skills in managing adolescents



90% of staff report they have no formal adolescent training



60% of consumers felt poor engagement with staff



50% of consumers & 50% family were not involved in decision making



60% of staff report they are unaware of the MoC



50% of staff & 80% of Consumers of reported poor therapeutic environment

Key Issues & Solutions



Inconsistent referral & assessment Process



Teleconference Assessments
Direct Admissions
Flexible office equipment (laptops & mobile phones)



No Clear Model of Care



Activity Program
Protected Time Strategy
Name change of unit



Lack of Expertise in adolescent mental health care

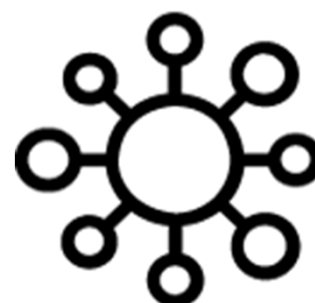


Child & Adolescent learning pathway
Patient Led Handover

The Effect of COVID-19

Before

- Patient Led handover was being designed and adapted to mental health environment
- Staff had been designing the what, how and when of the protected time strategy for consumer engagement
- Small funds secured for a minor redevelopment of environmental space in the unit



During

- The PECC unit was closed to mental health admissions and converted into Acute respiratory Clinic
- All the staff were redeployed to other mental health units
- The project was placed into hibernation
- Both project leads were seconded to other positions
- The unit changed NUMS 4 times in short period of time

What Now!



- Recruitment to a Temp FT PECC NUM
- Leadership stability within the unit
- Transition to a new project lead
- Revisit goals & objectives
- Review and adapt implementation plan & timeline
- Assess the climate and conduct a heat map with the staff

Lessons Learned



- The importance of strong sponsorship
- Stick with the problem, don't go for the band aid approach
- Be ready to pivot and adapt as challenges come your way
- Creating a strong desire for staff to be involved "What's in it for Me"
- Having a strong communication plan
- Site visits – Visually showing the staff what a solution could be
- Sometimes other things take priority over your project "Its not a failure if you need have to stop"
- Implementing some quick wins helps build the projects credibility
- Understand your frame of reference

Acknowledgements

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