

Institution: Kingston University

Unit of Assessment: 3, Allied Health Professions, Dentistry, Nursing and Pharmacy

Title of case study: Change in policy and practice in psychiatric hospitals in Finland

1. Summary of the impact (indicative maximum 100 words)

Research into service user involvement in mental health care resulted in the development of an educational intervention for registered mental health nurses to deliver effective, ethically appropriate therapeutic interventions for highly distressed and disturbed patients.

The research outputs were taken up and implemented by Halikko hospital in Finland, leading to a significant change in policy and practice, including a substantial reduction in the use of coercive techniques. Following the success of this change, other psychiatric hospitals in Finland have adopted the system.

2. Underpinning research (indicative maximum 500 words)

In 2006, Professor Mary Chambers began a 26 month project entitled 'Understanding the Lived Experience of Detained Patients'. This three-phase action research study was undertaken in a London Mental Health NHS Trust, and explored patients' experiences of their hospital stay whilst detained under the 1983 Mental Health Act. Mental health patients/service users were employed as researchers on the project. The project established that patients/service users wanted to be:-treated with higher levels of dignity and respect by staff members; more involved in the decision-making process regarding their care; given more information about their treatment plans (particularly medication); offered access to more talking therapies and therapeutic engagement; given access to more daily activities (to alleviate boredom); 'heard' by staff members. These findings were integrated into an education intervention consisting of communication and clinical skills training, which was subsequently evaluated. Funding was obtained from the Mental Health Trust Executive Board (peer reviewed internally).

This work formed the foundation for ePsychNurse.Net, a project funded by the European Commission Leonardo da Vinci Lifelong Learning Programme (competitive funding source, with funds awarded on the basis of expert assessment) and carried out in 2006-2008. This project developed an educational intervention for registered mental health nurses to deliver effective, ethically appropriate therapeutic interventions for highly distressed and disturbed patients. The research included a survey across 6 EU countries (n=806) and focus groups with 130 nurses in the same countries. The outputs included an e-learning course that was pilot tested in Finland and in England and has been running several times per year in Finland since. The key results were a decrease in the number of critical incidents on the wards, decreased use of coercive interventions (used as last resort), increased confidence in working with distressed patients/service users, increased uptake of nurses doing further training and a change of policy about the use of coercive interventions.

A second study in 2010-2012, funded separately by the same funding body, developed a quality assurance system for the e-learning course to enable its application across Europe. This phase enabled the course to be further developed and tested in 10 EU countries. The research methods used included a Delphi study and a postal survey. The key outcomes were an updated and quality assured course that was taught and evaluated in 10 EU countries together with an eQuality Assurance system for use across a range of e-learning professional development courses for registered nurses across Europe.

Mary Chambers is Professor of Mental Health Nursing at Kingston University / St George's, University of London Joint Faculty of Health, Social Care and Education, and has been employed on a Kingston University contract from 2004 to present.

3. References to the research (indicative maximum of six references)

[1] Gillard S, Borschmann R, Turner K, Goodrich-Purnell N, Lovell K and Chambers M (2010) The impact of mental health service user researchers on research into the experiences of detained



psychiatric patients. Health Expectations, 13, pp185-194 (Cited 10 times; Impact Factor 2.315).

[2] Chambers M, Guise V, Valimaki M, Antonia Rebelo Botelho M, Scott A, Staniuliene V, Zanotti R (2010) Nurses' attitudes to mental illness: A comparison of a sample of nurses from five European countries. International Journal of Nursing Studies 47, 3, 350-362 (Cited 21 times including India, China and Sweden; Impact Factor 2.178)

[3] Camuccio, C A, Chambers, M, Välimäki, M, Farro, D and Zanotti, R (2012) Managing distressed and disturbed patients: the thoughts and feelings experienced by Italian nurses. Journal of Psychiatric and Mental Health Nursing, 6, 19 807-815 (Cited once in unpublished thesis; available on line; Impact Factor 0.799)

4. Details of the impact (indicative maximum 750 words)

The success of the ePsychNurse project has led to a catalysing effect in Finland, with substantial reform in psychiatric nursing practice and facilities being rolled out nationwide.

Prior to the ePsychNurse project, psychiatric hospitals made routine use of mechanical restraints and seclusion. The seclusion conditions were extremely basic, having remained essentially unchanged for a century: the seclusion room was a bare cell with no furniture and primitive toilet facilities, and the secluded person had no opportunity for activity or conversation during seclusion periods that lasted from several hours up to a week. There was no involvement of service users in issues relating to clinical care, policy development, research or education.

In 2008, following the successful pilot study in Finland, and other nurses completing the course, Halikko hospital changed its policy on the use of coercive interventions. The use of mechanical restraints was entirely stopped, and the seclusion rate was reduced by approximately 50-60%. In addition, the physical environment of seclusion rooms was entirely redesigned, with the introduction of furniture, a radio, a clock, proper toilet facilities and a buzzer to press to communicate with nurses. These changes were made with the involvement of service users, and drew substantially on their wishes for reform of seclusion.

The benefits of these changes are that patients are more satisfied with their treatment, and trauma to patients has been reduced. The new treatment regimes are not only less harsh, as detailed above, but also more individualised. Where restrictions are employed, they are based on the specific needs of individuals, rather than being generalised restrictions as in the past.

These changes have proved to be successful, and have been disseminated to over 18 other hospitals and hospital districts in Finland. Over 1000 registered nurses in Finland have now completed the ePsychNurse.net course. The use of mechanical restraints and seclusion in psychiatric care has decreased throughout Finland, as a consequence of this project.

These changes in nursing practice have been driven by a significant change in mindset within the Finnish psychiatric care system. Before the ePsychNurse project, this was a strongly professionalled system, with little or no room for service user involvement. This has now changed, as a result of ePsychNurse, and service users now have a strong voice within the system. Furthermore, doctors and nurses would not previously have shared a public platform with patients/service users addressing multi-professional audiences: this is now commonplace.

The Finnish Social Affairs and Health Ministry issued a new national guidance document on mental health and substance abuse work in 2009. This set the core national principles for mental health care in Finland from 2009 to 2015. As a result of the work described above, this guidance states that service users must be included in the development of mental hospital services.

5. Sources to corroborate the impact (indicative maximum of 10 references)

[1] Mental Health Service Manager, City of Vantaa, Finland (Corroborating Contact Identifier: 1)

[2] Testimonial from Service User, Halikko Hospital, Finland (Corroborating Contact Identifier: 2)

[3] MIELI - National plan for mental health and substance abuse work, National Institute for Health and Welfare (Finland): <u>http://www.thl.fi/en_US/web/en/research/programmes/mieliplan</u>