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Scope: Trust Wide							Classification: Organisational			
Author/Originator and Title: Mental Health Liaison Team Clinical Governance Facilitator							Responsibility: Directorate of Clinical Governance			
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Name of Committee/Directorate/Working Group: Mental Health Liaison Team meeting Council of Governors Policy Group				Date of Meeting: 04/03/2008 16/04/2008		Risk Assessment: Not Applicable				
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Review Dates: Review dates may alter if any significant changes are made	2005 <input type="checkbox"/>	2006 <input type="checkbox"/>	2007 <input type="checkbox"/>	2008 <input type="checkbox"/>	2009 <input type="checkbox"/>	2010 <input checked="" type="checkbox"/>	2011 <input type="checkbox"/>	2012 <input type="checkbox"/>	2013 <input type="checkbox"/>	2014 <input type="checkbox"/>
Does this document meet with the Race Relation Amendment Act (2000) Religious Discrimination Act, Age Discrimination Act, Human Rights Act, Disability Discrimination Act and Gender Equality Regulations? Applicable										

1 PURPOSE.

To ensure that any adult patients within the Blackpool Fylde and Wyre Hospitals NHS Foundation Trust who have mental health problems are given equal access to health care and are afforded privacy and respect, maintaining their dignity, whilst recognising their individual needs. Within the National Care Standards Agency (Cultural and Sexual) wards and departments within the acute sector should be aware of the role of the Mental health Liaison Team in supporting patients with known or previous mental health issues. For patients within the community hospitals contact the older adults mental health liaison teams.

For children with mental health problems see care of children guideline.

2 SCOPE.

The guidelines apply to all staff including volunteers working with Blackpool Fylde and Wyre Hospitals NHS Foundation Trust where adult patients are receiving care either as inpatient or outpatient. Contractors should work in the same way as the Trust's staff and abide by this policy.

3 GUIDELINE

3.1. DEFINITION.

It is difficult to define what 'mental illness' is; it is sometimes described as part of a continuum of thoughts and feelings that an individual experiences.

As many as 1 in 4 people will suffer from mental health problems at some stage in their lives.

One of the furthest points of the continuum of severe and enduring mental illness is often regarded as schizophrenia.

As many as 1 in 100 people will suffer from schizophrenia and other severe mental illness at some time in their life.

3.2 BACKGROUND

Mental Health problems are far more common than many people think. At some stage many will experience thoughts or feelings of symptoms that they feel are difficult to manage. Many will ask for clinical care or help from other people.

There have been myths, and a stigma associated with mental illness.

Historically this was caused by ignorance, and views associated with old mental health institutions.

Much work has been undertaken to dispel this image and improve the quality of care for people with mental health problems.

3.3 CARING FOR PEOPLE WITH MENTAL HEALTH PROBLEMS

There is no single 'treatment' for people with mental health problems who will need a range of skills and approaches.

3.4 COURTESY HONESTY AND RESPECT FOR DIGNITY

- All patients will be addressed by the name and title of their choice
- All patients' privacy and dignity will be respected at all times.
- Ensure that privacy and dignity are respected and maintained within the ward environment.

3.5 COMMUNICATION

- All staff will demonstrate effective communication skills and ensure that communication takes place in an appropriate environment. (Trust Communication strategy 2003)
- All staff will ensure that all discussions will be relevant to patients' care. (Donaldson 2003)

3.6 CONFIDENTIALITY

- All staff should ensure that an appropriate area is used for discussion with the patient regarding diagnosis and /or treatment. Wards should allocate a room for interviews and assessments allowing privacy and dignity to be maintained. If a patient is unable to move from their bed, then consent from the patient must be obtained for an assessment to proceed within a ward area.
- All staff will provide service to all patients within the boundaries of the confidentiality code of conduct policy. See section 7

3.7 CARE AND TREATMENT

- All patients with mental health problems will have equal access to health services and treatments.
- All patients will have the opportunity for a chaperone or a friend/relative/mental health advocate/carer present during consultation and/or treatment.
- All patients will be placed on a same sex ward wherever possible.

3.8 RESPECT FOR THE INDIVIDUAL AND CULTURAL DIVERSITY

- All patients will be treated fairly on the basis of need, and not discriminated against on the basis of age, gender, race, religion, disability or sexual orientation.

There are services available for advice and support on site at Blackpool Victoria Hospital, and available for advice to the Community Hospitals.

For further advice/information contact the appropriate team: -

The Mental Health Liaison Team 01253 306841 Bleep 460

Older Adult Mental Health Services 01523 306699 Bleep 946

Duty Senior Nurse (Parkwood) 01253 3000000 and ask to speak the Senior Nurse

4 ATTACHMENTS.

Appendix 1 Equality Impact Assessment Tool

5 ELECTRONIC AND MANUAL RECORDING OF INFORMATION.

Database for Policies, Procedures, Protocols and Guidelines
 Archive/Policy Co-ordinators office
 Held By: Clinical Governance Directorate
 Held in format: Electronic and hard copy

6 LOCATIONS THIS DOCUMENT ISSUED TO.

Copy No	Location	Date Issued
1	Intranet	16/10/2008
2	Wards and Departments	

7 OTHER RELEVANT /ASSOCIATED DOCUMENTS.

Procedure No.	Title
	Essence of Care Benchmarks for Safety of Clients with Mental Health Needs in Acute Mental Health or General Hospital Settings
CORP/STRAT/001	Equality, Diversity & Human Rights Strategy
	Trust Communication Strategy 2003
CORP/POL/002	Providing & Maintaining Privacy & Dignity Policy
Corp/Pol/107	Confidentiality code of conduct

8 AUTHOR/DIRECTORATE MANAGER APPROVAL.

Issued By	John Kryzyanowski	Checked By	M Aubrey
Job Title	Mental Health Liason Nurse	Directorate	Associate Director of Governance
Signature		Signature	
Date	October 2008	Date	October 2008

Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Would the relevant Equality groups be affected by the document? (If Yes please explain why you believe this to be discriminatory in Comment box)

Title & Identification Number of the Document

Adults With Mental Health Problems In A General Hospital Setting
 CORP/GUILD/0010.....

	Questionnaire	Yes/No Double click and select answer	Comments
1	Grounds of race, ethnicity, colour, nationality or national origins e.g. people of different ethnic backgrounds including minorities: gypsy travellers and refugees / asylum seekers.	No	
2	Grounds of Gender including Transsexual, Transgender people	No	
3	Grounds of Religion or belief e.g. religious /faith or other groups with recognised belief systems	No	
4	Grounds of Sexual orientation including lesbian, gay and bisexual people	No	
5	Grounds of Age older people, children and young people	No	
6	Grounds of Disability: Disabled people, groups of physical or sensory impairment or mental disability	No	
7	Is there any evidence that some	No	

	groups are affected differently?		
8	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	No	
9	Is the impact of the document/guidance likely to be having an adverse/negative affect on the person (s)?	No	
10	If so can the negative impact be avoided?	N/A	
11	What alternatives are there to avoid the adverse/negative impact?	Please Comment	
12	Can we reduce the adverse/negative impact by taking different action?	N/A	Please Identify How
13Q1 (a) Is the document directly discriminatory? No (under any discrimination legislation) <ul style="list-style-type: none"> • Racial Discrimination • Age Discrimination • Disability Discrimination • Gender Equality • Sexual Discrimination 		Q2 (b) (i) Is the document indirectly discriminatory? No b (ii) If you said yes , is this justifiable in meeting a legitimate aim No	
		Q3 (c) Is the document intended to increase equality of opportunity by positive action or action to redress disadvantage No Please give details	

14 If you have answered **no** to all the above questions **1-13** and the document does not discriminate any Equality Groups please go to **section 15**

If you answered **yes** to Q1 (a) and **no** to Q3 (b) this is unlawful discrimination.

If you answered **yes** to Q2 (b) (i) **no** to Q2 (b) (ii) and **no** to Q3 (c), this is unlawful discrimination

If the content of the document is not directly or indirectly discriminatory, does it still have an adverse impact?

No

Please give details

This document does not discriminate to any specific gender, race, religion, age, or disability, but is specific to those that are homeless no matter what their ethnic origin.

If the content document is unlawfully discriminatory, you must decide how to ensure the organisation acts lawfully and amend the document accordingly to avoid or reduce this impact

15 Name of the Author completing the Equality Impact Assessment Tool.

Name.....John ... Kryzyanowski

Signature.....

Designation...Mental Health Liaison Nurse

Date.....October 2008.....