‘Auspicious liaisons’- Evaluating the impact of a liaison geriatrician initiative on older adults psychiatric wards

Background

There is an unmet need for providing physical healthcare to older adults who are psychiatric inpatients, despite high levels of comorbidity and mortality. Although liaison services in acute hospitals are now the norm, the reverse is not usually available for patients in mental health trusts. Following the introduction of support from geriatricians to older people’s mental health inpatient wards, we wanted to see if this intervention was effective and acceptable.

Methods

We performed a retrospective cohort evaluation on the impact of a liaison geriatrician, using routinely collected data, and assessed acceptability among medical staff by semi-structured interview.

Intervention

Our service introduced regular sessions from consultant community geriatricians across older adults psychiatric wards including a mixture of video conference and face to face input.

Results

There was no significant decrease in emergency transfers but there was a significant reduction in length of stay with the introduction of a liaison geriatrician. There was a significant increase in geriatrician consultations and a decrease in specialty consultations to other specialists, however, there was no change in discharge prescriptions or destination. Geriatricians gave confidence to psychiatrists of all grades to treat physical health care issues, particularly chronic issues.

Conclusions

A liaison geriatrician service leads to a reduction in length of stay and an improved continuity of care, although it confers no impact on emergency transfers. The intervention brings extensive benefits to clinicians including confidence in managing complex cases and increased training.