

THE NURSES' KNOWLEDGE ON PSYCHIATRIC PATIENT ADMISSION PROCEDURES AT THE NATIONAL TEACHING AND REFERRAL MENTAL HEALTH HOSPITAL IN KENYA

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Abstract:-*Mental illness is a global health crisis which results in significant morbidity and is a major factor that influences the social determinants of health of individuals, families and communities. To deal with this health crisis, mentally sick patients have to be admitted in psychiatric hospitals for management. In Kenya, the Mental Health Act cap 248 (Laws of Kenya) prescribes procedures that must be followed in the admission of patients to a mental health hospital. Nurses, among other health care workers have a great role in the provision of the initial care of the mentally ill patients presenting in various outpatient departments. This calls for the nurses to be skillful when handling the mentally ill patients at the OPD, during admission.*

Aim: *The aim of this study was to determine the knowledge on admission procedures among nurses working at the National Teaching and Referral hospital.*

Methods and material: *This was a descriptive cross-sectional, with national hospital being purposively selected since it admits mentally sick patients who have been referred from different parts of the country. Systematic sampling was used to select the sample size of 132 nurses for the purposes of documenting their knowledge and attitude on admission procedures while purposive sampling was used to observe nurses for the purposes of documenting their admission practices at the outpatient department. Semi-structured questionnaires were used to document the knowledge of the nurses whereas predetermined checklist was used to document observations made at the outpatient department in relation to patient admission process. The collected data was analyzed using SPSS version 20 and presented in form of charts, tables and narratives.*

Findings: *Results of the study revealed that majority of the respondents 69% were knowledgeable regarding admission of voluntary patients to psychiatric units, although most of the respondents, 79.7% displayed knowledge deficit in relation to discharge of voluntary admission patients from psychiatric units. About 31% of the respondents lacked knowledge on the admission procedures for voluntary patients. The results also demonstrated that some of the respondents were utilizing the prescribed patient admission procedures while others were not. Various challenges to the implementation of the prescribed admission procedures were also identified by the respondents.*

Recommendations: *The study recommended that the hospital management should ensure that most of the nurses who work in the institution have specialization in psychiatric nursing. In house education on patient admission and discharge procedures should be carried out to reach the nurses who lacked knowledge in this aspect.*

Key words: *psychiatric patient admission procedures, National Teaching and Referral mental health Hospital*

INTRODUCTION

Mental illness is a global health crisis which results in significant morbidity and is a major factor that influence the social determinants of health of individuals, families and communities (Shaban, 2006). The Mental Health Act cap 248 (Laws of Kenya) prescribes procedures that must be followed in the admission of patients to a mental health hospital. The Act prohibits admission or detention of persons in a mental health unit without applying the rules stipulated therein. Patients may be admitted to a mental health hospital as voluntary, involuntary, or emergency patients.

When a person seeks admission as a voluntary patient, he/she fill a form (med 613), while the admitting doctor will fill a form (med 615), to authorize the admission. In 72 hours, the patient can write a letter seeking discharge.

When a patient is admitted through involuntary admission, it means that the patient is incapable of making informed decision to his/her Mental Health status. Involuntary admission may also be used in mental health patients who refuse health interventions (National Council for Law Reporting, 2012). To authorize the admission of involuntary patients, the doctor will fill a form (med 615), while the accompanying person will fill another form (med 614). A court of law may also order for an involuntary admission of a person based on its (National Council for Law Reporting, 2012).

Globally, reform of mental health care systems advocate for increased participation of a wide range of health care workers in providing services to people with mental disorders. Health-care professionals across all disciplines require increased skills to better equip them to recognize and manage mental illness, along with improved coordination of consumer of mental health services, and increased community interest and involvement in mental health issues (Shaban, 2006). Nurses among other health care workers have a great role in the provision of the initial care of mentally ill patients, presenting in various outpatient departments (OPD). This calls for the nurses' to be skillful when handling the mentally ill patients at the OPD, during admission.

However, at the Mathari national teaching and referral mental hospital, there are no documented studies in relation to health care worker's abilities to follow the prescribed procedures when admitting mentally ill patients. This formed the basis for the researcher's motivation to carry out this study on knowledge, attitude and practice on admission procedures among nurses at the Mathari national teaching and referral hospital.

MATERIALS AND METHODS

Study design

This was a descriptive cross-sectional study on the Nurses knowledge, attitude and practice on admission procedures at Mathari National Teaching and Referral hospital. The study involved interviewing nurses in the hospital.

The Study Area

The study was carried out in Mathari National teaching and referral Hospital, which is situated off Thika super highway opposite Muthaiga police station, about six Kilometers north of Nairobi City Centre. It neighbours the Mathari valley (See appendix –VII). The hospital was established in 1910 by the colonial government. It has 200 nurses and a capacity of 700 beds, although the average occupancy is about 1500. The hospital has several wards which include five male wards, three female wards, an amenity ward and a drug rehabilitation center. MNTRH offers general outpatient services, dental services and outpatient psychiatric services to the general public. The institution also has physiotherapy and occupational therapy departments, which are part of treatment for admitted patients. Other clinics include Maternal and child health, comprehensive care, child psychiatry and methadone clinics. The hospital has a civil wing for civil patients and a maximum security unit for mentally ill offenders who have committed capital offenses. The institution serves as a national referral hospital for patients with mental health conditions. Mathari Hospital offers clinical experience to both undergraduate and postgraduate Medical students from various universities in Kenya. The hospital is also a clinical experience center for both basic and post basic students from Mid-level Medical training Colleges.

Study Participants

The study population was nurses at the Mathari National Teaching and Referral Hospital during the period of the study. The target population was 384 nurses in direct care of psychiatric patients who have worked at Mathari National Teaching and Referral Hospital for more than six months. The selection was done using systematic random sampling where every 2nd nurse was sampled from nurses' duty schedule.

Data Collection Tools and Methods

During data collection, the research assistants distributed questionnaires to the respondents and collected them back once they were filled.

Data Management

The research assistant cross checked the data collection tools to ensure that correct entries were performed. Data entry in to the computer data base was carried out by the data entry clerk and secured with a password. Raw data tools were put in a folder a stored in a lockable cabinet for reference purposes. Quantitative data from the respondents was entered into a computer and descriptive analysis computed using SPSS version 20. In respect to the qualitative data, themes arising from the analysis were recoded and analyzed accordingly with some of the reports being narrated. The outputs were presented in form of narratives, charts and tables.

Ethical Considerations

Ethical clearance to collect data was obtained from Mount Kenya University Ethical Review Committee (ERC). The researcher also obtained permission from the management of the MNTRH. The researcher also ensured that the questionnaires were coded and no respondent's name was entered during data collection. To collect data, all the

respondents were requested to sign an informed consent after getting full information in relation to the study being conducted. All information obtained during the study was treated with confidentiality, with the data being stored in a computer with a pass word. The latter was only accessible to the researcher and the data entry clerk. For security purposes, the raw data questionnaires were stored in a lockable cabinet. Once the researcher completes the project, the findings will be disseminated to the management of MNTRH for the appropriate utilization.

STUDY RESULTS

Demographic characteristics

Respondents' age: Most of the respondents, 50(34.1%) were aged between 25 to 29 years, while the least number of respondents, 10 (7.8%) were aged below 25 years. The respondents who belonged to age group 30 to 34 years were 16 (12.5%), while the ones aged between 35 and 39 years were 15 (11.7%). The respondents who were aged 40 years and above were 37(28.9%).

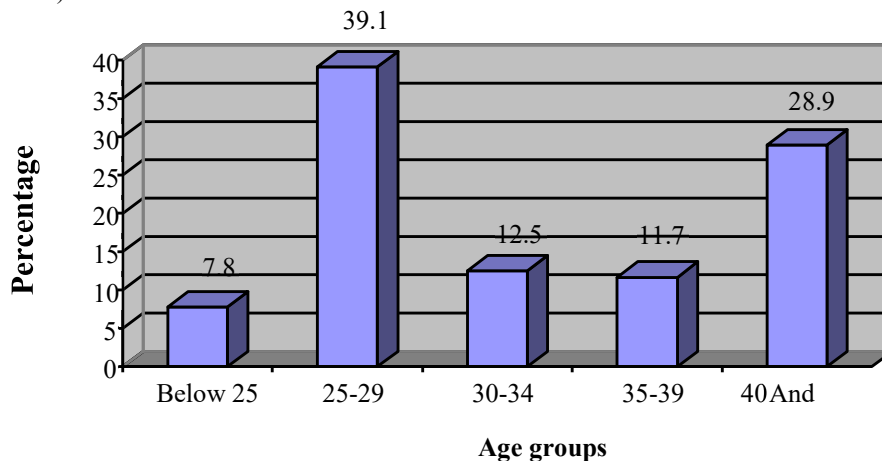


Figure 1: Respondents age in years

Respondents' professional qualifications: Figure 2 shows that most of the respondents, 67(52%) were diploma holders, with the least numbers of respondents, five (4%) being certificate holders. The respondents who had higher diplomas were 22(17%), while 34(27%) respondents had bachelors level of qualifications.

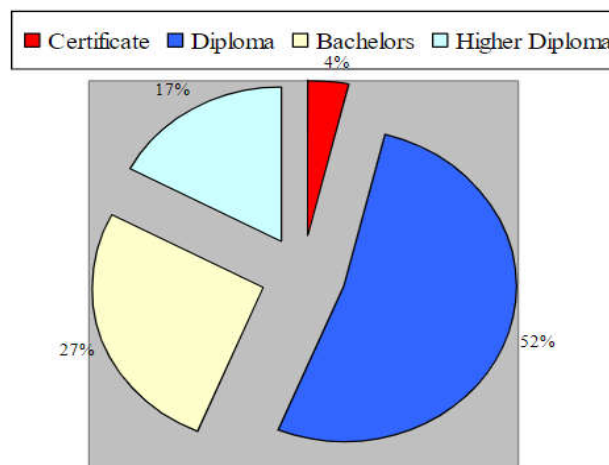


Fig 2 Respondents' professional qualifications

Respondents with post basic psychiatric nursing course

Most of the respondents, 102 (79.7%) had not undergone any post basic Psychiatry nursing course.

Post basic Psychiatry nursing course attended	No of respondents	Percentage
Yes	26	20.3
No	102	79.7
Total	128	100

Respondents working experience in years

Figure 3 shows that most of the respondents, 65(50.8%) had worked for at least six years. Forty eight (37.5%) respondents had worked for four to six years, with 15 (11.7%) having worked for four to six years.

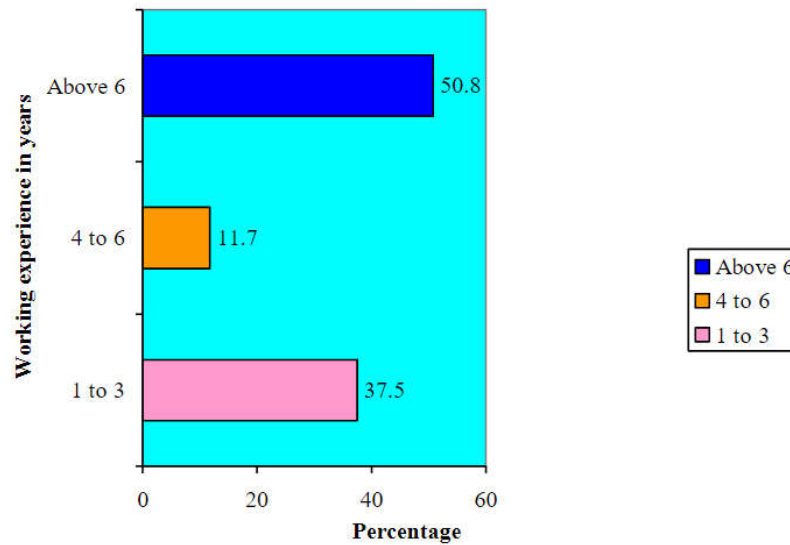


Fig 3- Respondents' years of experience

Respondents' Knowledge on Patients' Admission Procedures To Psychiatric Unit

Majority of the respondents 89 (69%) said that it was not a must for voluntary patients to be accompanied to the hospital while 39(31%) said that all voluntary admission patients must be accompanied to the hospital.

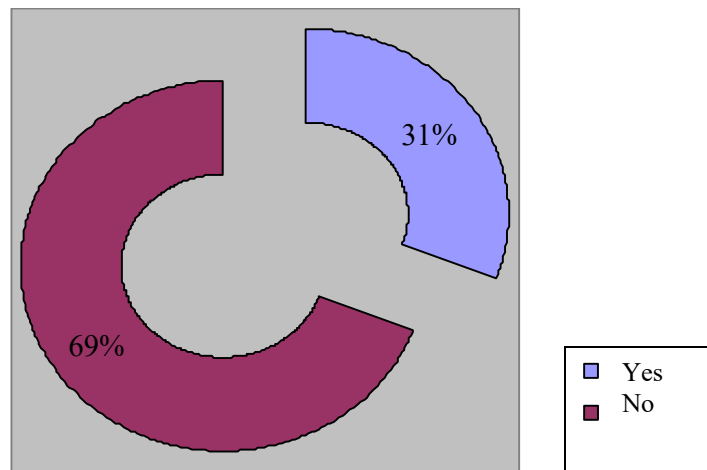


Figure 4 - Voluntary patients must be accompanied to hospital

Responses on whether it's a must for voluntary patients to be authorized by a doctor before admission

Forty eight (38%) of the respondents said that it is not a must for admission voluntary patients to be authorized by a doctor before admission, while 80(62%) disagreed with the statement.

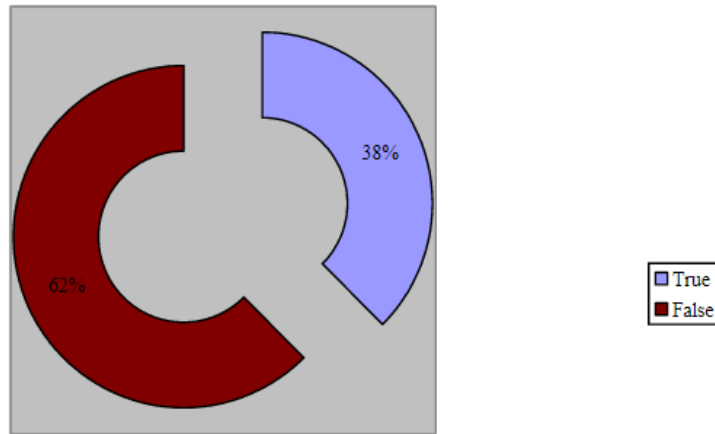


Figure 5- Its not a must for voluntary patients to be authorized by a doctor before admission

Nurses responses on the period for which voluntary admission patients must be retained in a psychiatric unit before requesting for discharge

In relation to how long a voluntary admission patients should remain in the hospital before requesting for discharge, most of the respondents, 55(43%) said that the patients should remain in hospital until they fully recover. Twenty eight (21.9%) of the respondents said that the patients should request for discharge after 48 hours, 26(20.3%) said that the patients should be discharged after 72 hours while 19 (14.8%) said that the patients should be discharged after 12 hours.

Table 2: Period for which voluntary admission patients should be retained in a psychiatry unit before requesting for discharge

Period (Hours)	Number	Percentage
12	19	14.8
48	28	21.9
72	26	20.3
Until recovery	55	43
Total	128	100

Nurses’ responses on whether voluntary patients may leave hospital without prior notice

When asked whether voluntary admission patients may leave the hospital without prior notice, 93 (73%) of the respondents said no while 35(27%) of the respondents said that the patients can leave without prior notice.

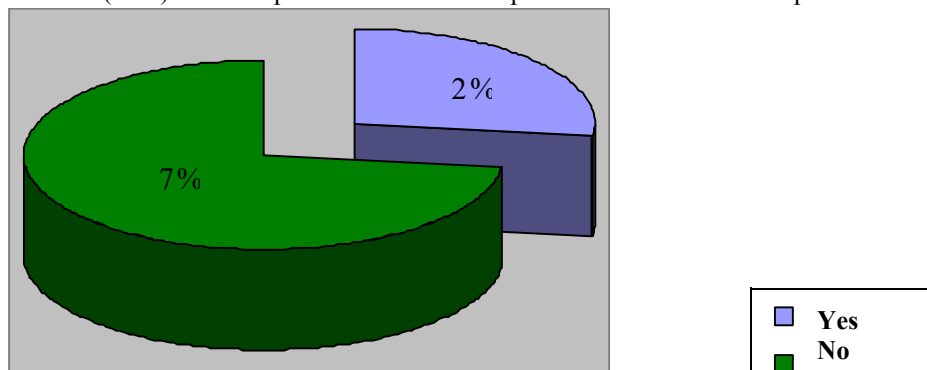


Figure 6- Whether voluntary patients should leave hospital without prior notice

Respondents’ opinion on the characteristics of patients admitted as emergency

Table 3 shows that most of the respondents, 90 (70.3%) described emergency admission patients as the ones who are dangerous to themselves, while 28(21.9%) of the respondents said that emergency patients are the ones who are a nuisance to the public because of their medical disorder. Ten (7.8%) of the respondents said that these are patients who may be mistreated by their relatives because of the mental disorder.

Table 3: Responses on characteristics of patients admitted as emergency

Characteristics	Number	Percentage
Patients who is dangerous to himself and others	90	70.3
Patient who, because of the mental disorder is a nuisance to the public	28	21.9
Patient who, because of the mental disorder may be mistreated by relatives	10	7.8
TOTAL	128	100

Nurses’ responses on whether officers from the armed forces must have authority from their MOH’s before admission to psychiatric unit

When asked whether armed forces officers must obtain authorization by their medical officers before admission to a psychiatric unit, 34 (27%) of the respondents agreed while 94 (73%) disagreed.

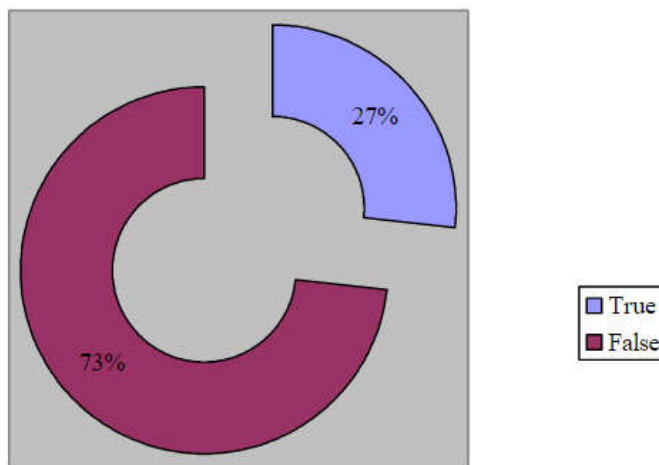


Figure 7-Whether armed force must be authorized by their MOH's before admission

DISCUSSION

The study showed that most of the respondents, 34.1% were aged between 25 to 29 years. This was contrary to a study by Kumar et al (2011) on the knowledge of staff nurses regarding legal and ethical responsibilities in psychiatric nursing in a selected psychiatric centre associated with Swift Medical College, Jaipur which established that most of the respondents were above 30 years of age. The study findings also showed that most of the respondents were females (66%), which contradicted the study by Kumar et al (2011), whereby most of the respondents were males. In this current study, most of the respondents were diploma holders but in the study by Kumar et al (2011) majority of the respondents had a bachelor of science in nursing. Among the 128 respondents interviewed, only 20.3% of them had a post basic diploma in psychiatric nursing, a situation which could adversely affect the provision of quality care to the mentally sick patients, especially in relation to the utilization of standard admission procedures in the OPD. The fact that most of the respondents, 50.8% had worked for at least six years explains why an equivalent number were either Nursing officers one or senior nursing officers. However, Kumar et al (2011) established that most of the respondents in their study had worked for less than five years.

The study revealed that majority of the respondents 69% were knowledgeable regarding admission of voluntary patients to psychiatric units since they said that it was not a must for them to be accompanied to the hospital. This could also be the reason why almost the same number, 62% of the respondents said that voluntary patients should not seek authority before admission to a psychiatric unit. This was true because the only requirement for admission of voluntary patients is to make a written request and fill the prescribed form (med 613). These findings were almost similar to those of a study by Gakinya et al (2014) on the Knowledge and practice in the management of mental patients at Mathari Hospital which established that 75.9% of the nurses interviewed knew the admission procedures in details. However, with 31% saying that all voluntary admission patients must be accompanied to the hospital shows that still there is a large number of nurses in the institution who lack knowledge on the admission procedures for voluntary patients. This could be probably because of the fact that most nurses in the hospital had not undergone any post basic course in psychiatric nursing, meaning that they utilize the knowledge they acquired in their basic training to manage patients in the hospital.

Most of the respondents, 79.7% displayed knowledge deficit in relation to discharge of voluntary admission patients from psychiatric units. This showed that a large group of the respondents were aware of some of the legal requirements

for patients in psychiatric units. This was similar to the findings of a study by Kumar (2011) on knowledge of staff nurses regarding legal and ethical responsibilities in psychiatric nursing in a selected psychiatric centre associated with Swift Medical College, Jaipur which established that most of the respondents (90%) had moderate level of knowledge in the legal and ethical responsibilities in the field of psychiatric nursing.

Only 20.3% were able to state that voluntary admission patients may request for discharge after 72 hours of admission according to the mental health Act cap 248 (National Council for Law Reporting, 2012). However, most of the respondents, 73% displayed good knowledge in some aspects of voluntary patients admission processes since they said that voluntary admission patients should give a prior notice before discharge, which is true according to the mental health Act cap 248. Most of the respondents, 70.3% were knowledgeable in terms of defining emergency admission patients since they said that these were the ones who are dangerous to themselves, hence require immediate admission without any delays. These findings were similar to those of a study by on Psychiatrists' attitudes toward the procedure of involuntary admission to mental hospitals in China which showed that 98.1% of the respondents said that the patients were admitted because they were dangerous to themselves (Shao et al, 2012). When asked whether armed forces officers must obtain authorization by their medical officers before admission to a psychiatric unit, 73% disagreed. This showed that they lacked knowledge in relation to the admission of armed forces officers, since according to the mental health Act cap 248, armed forces medical officer must authorize their admission to a psychiatric unit (National Council for Law Reporting, 2012).

CONCLUSIONS

In terms of the respondents' knowledge on the admission procedures to psychiatric unit, it was evident that they lacked knowledge in some of the processes, like admission of armed forces officers. However, majority of them still demonstrated good knowledge in relation to admission of voluntary patients. Despite this, most of the respondents could at least explain what entails emergency admission of patients to psychiatric units.

RECOMMENDATIONS

The hospital management should ensure that most of the nurses who work in the institution have specialization in psychiatric nursing ii. In house education on patient admission and discharge procedures should be carried out to reach the nurses who lacked knowledge in this aspect.

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APPENDIX II – LETTER OF ETHICAL CLEARANCE



OCTOBER 28, 2015

Ref. No. MKU/ERC/0065

CERTIFICATE OF ETHICAL CLEARANCE

This is to certify that the proposal titled "KNOWLEDGE, ATTITUDE AND PRACTICE ON ADMISSION PROCEDURES AMONG NURSES AT MATHARI NATIONAL TEACHING AND REFERRAL HOSPITAL, NAIROBI COUNTY-KENYA", whose Principal Investigator is Ms. Alice Wairhira Kangethe (BSCN/000835/1131/21103) has been reviewed by Mount Kenya University Ethics Review Committee (ERC), and found to adequately address all ethical concerns.

Prof. Mbaruk Suleiman
Chairman, Mount Kenya University ERC

Sign:  Date: 28.10.2015

Dr. Francis W. Muregi
Secretary, Mount Kenya University ERC

Sign:  Date: 28.10.2015

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