



BNSSG
Training Hub

Severe Mental Illness (SMI) Checks for people from Black and ethnic minority groups

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Project Summary

- People living with severe mental illness (SMI) face one of the greatest health equality gaps in England. The life expectancy for people living with SMI is 15–20 years lower than the general population due to preventable physical illness.
- Higher death rates for liver disease/respiratory disease/cardiovascular disease/cancer.
- Bristol Inner City PCN has a population of over 88,000. As of November 2023 53.6%, live in the 20% most deprived areas of the BNSSG locality. Main ethnic groups are White (47%) followed by Black / African / Caribbean / Black British (15.8%) and Asian/Asian British (13.9%).

Project Summary

To invite people from black and ethnic minority groups who are on the Severe Mental Illness (SMI) register for:

- ❧ Firstly, a SMI physical health check with an HCA at the practice.
- ❧ Follow up appointment to discuss results of the physical health assessment with myself alongside other areas (using a personally created SMI template).

Project Summary

- Telephone consultation- 30 minutes (some face-to- face appointments/double appointments if need interpreter)
- Complete SMI Arden Template on EMIS.
- Review results of the physical health check and appropriate interventions.
- Discuss their mental health and medications. Check if under AWP. Risk assessment
- Ask about physical activity levels and diet. (This is common one which gets missed!)
- Discuss cancer screening programmes/immunisations/vaccinations/any medical issues.
- *Oral health/sexual health/liver function tests/blood borne virus testing. (Need to get better at asking/screening for this)*

Lessons Learnt

- › VERY IMPORTANT PATIENTS ARE CODED WITH CORRECT DIAGNOSIS SO THAT THEY ARE INVITED FOR CHECKS.
- › Patients were not aware of why they were invited for the checks.
- › These patients are at high risk of developing cardiovascular disease as per review of their physical health assessments and need early prevention strategies. Increased number of referrals to the Diabetes Prevention Programme/NHS Weight Management service/Bristol city council exercise referral scheme. Patients were not aware of these programmes.
- › Optimising medication. Some patients are under secondary care mental health teams but are having issues with medications they have not alerted them too.
- › Managing mental and physical health issues/concerns. Some patients were not on any medications and had not seen a health professional for years so this was a good time to ask them if they had any physical health as well as mental health concerns.
- › Language barrier is hugely problematic to engagement with medication, mental health and other physical health services as well as cancer screening programmes.
- › A lot of the patients experienced loneliness as a result of their mental health and other issues. Referrals were made to social prescribing service and care co-ordinators who reached out to these patients.
- › Promoting cancer screening programmes. If they do not engage re-direct to community services for support in patient education.

Highlights

- Creation of a SMI template used during consultations. Shared my template with clinicians at the practice.
- Presented my work to Bristol ICE PCN Health Inequalities Network and to Health inequalities GP trainee fellows.
- Working on an blog for the University of Bristol Centre for Academic Primary Care
- Hope to present my work at the BNSSG REN Network.

How this can be implemented?

- ❧ Proper coding of diagnosis so eligible patients invited for SMI physical health check.
- ❧ SMI follow up consultation template for clinicians to use.
- ❧ Allocate additional consultation time for SMI follow up appointments for clinicians for maximum benefit.
- ❧ Role for allied health care professionals to get involved and conduct follow up appointments.



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Thank You for Listening

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