

Tell your story

NICE Shared Learning Awards 2008



The Self-injury Service

Aim

The Self-injury Service was set up to provide medical treatment, psychosocial assessment and information to people in the north Bradford area aged 16 and over who self-injure, presenting to primary care. The aim was to treat as many people who regularly self-injure as possible in their local primary care surgeries during office hours, and out of hours by the Community Intervention team (CIT).

Objectives

- To increase attendance for medical treatment following self-injury, to reduce the risk of illness and death from infected wounds, and to reduce the risk of future suicide attempts.
- For service users to demonstrate increased satisfaction with primary care services provided after self-injury, compared with A&E.
- For nursing staff to be trained to understand self-injury and to treat clients in a respectful and helpful way, following the NICE guidelines.

Context

This service was designed in collaboration with service users and following NICE guidelines for self-injury, and in response to national research demonstrating service users dissatisfaction with treatment for self-injury in A&E due to negative attitudes and long waits. Consequently, people who self-injure often do not seek medical treatment for their injuries, resulting in risk of infection and accidental death. Hence this service fulfils the Public Service Agreement priority of reducing risk of suicide and undeterminable death.

Results

- In the first year of the service, total numbers of people medically treated for self-injury by the new service and A&E combined had increased by 18%, with half being treated by the new service.
- 80% were fully satisfied with the service whereas only 17% were satisfied with A&E.
- All trained qualified nursing staff strongly agreed they had adequate training to provide the service and understood why people self-injured.

Monitoring and evaluation

This service was independently evaluated, following a design accepted by the Research Ethics Committee, comparing patient experiences of this service with A&E. All respondents who attended the new service said staff understood or wanted to understand why they had self-injured, and 90% felt staff were respectful and caring and sensitive. In contrast, 78% of respondents found A&E staff to be judgemental and hostile. No respondents said they experienced this with the new service.

Key learning points

Good preparation time to engage all relevant partners and deal with fears is important. The service took 18 months to plan before the pilot began, and this substantial planning period ensured collaboration and involvement with all key stakeholders and a robust and comprehensive system of evaluation. The proposal for this service went through consultation with service user groups, A&E and local GPs before its inauguration and concerns were responded to and incorporated into its design.

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SHARED LEARNING AWARD ENTRY SUBMITTED BY

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