

A mixed-methods study exploring the characteristics and needs of long-stay patients in high and medium secure settings in England: implications for service organisation

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Plain English summary

Exploring the characteristics and needs of long-stay patients

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Plain English summary

A small number of people are treated in secure psychiatric hospitals. This research inquired about the people who spend the longest periods of time in the most secure settings. We asked the hospitals for information from their databases and case files, and we interviewed patients, carers, clinicians and managers. We included all three high secure hospitals in England and 23 of the medium secure units. A total of 401 long-stay patients were resident there.

Secure settings are costly, and are restrictive for patients. One in five patients in high secure hospitals had been there for > 10 years, and a similar proportion had spent > 5 years in medium secure units. Our information showed little difference between the people in high and medium secure settings. The majority of the long-stay patients in our study had criminal convictions for violence, but one in six had no convictions linked to their detention. Ninety per cent took psychiatric medication, but only 50% received psychological treatment. Patients moved from one setting to another, but did not make much progress: they were moving around rather than moving forward. Future research might usefully focus on whether it is possible that a service focusing on quality of life rather than on formal therapies would be more beneficial for this group, although maintaining hope will be challenging for relatives, staff and long-stay patients themselves, some of whom may never leave secure settings.

Maintaining relationships was difficult for patients, particularly as they were often in a hospital far from home, which made it hard for visitors to see them. Relatives felt restricted in their interactions with their loved ones and felt sidelined in care planning. A more collaborative approach to carer involvement might be beneficial to future research in this area.

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