



Surveillance report (exceptional review) 2017 – Transition between inpatient mental health settings and community or care home settings (2016) NICE guideline NG53

Surveillance report

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Surveillance decision

We will not update the guideline at this time.

Reason for the decision

Assessing the evidence

NICE was contacted by the mental health charity Mind who had conducted a survey and published an [article](#) which had potential implications for NICE guideline NG53. The new information related to recommendations 1.6.7 and 1.6.8, which advise to follow-up all mental health inpatients within 7 days of discharge and to reduce this time to 48 hours if a risk of suicide was identified.

Mind analysed data on the numbers of people receiving follow-up contact after discharge from adult mental health inpatient services. Data was derived from freedom of information requests to mental health trusts in England and Wales and from data published by NHS England for 2015/16. However, not all trusts responded to the request and some provided incomplete information. The results found that in England 88% of people received follow-up contact within 7 days of discharge. Sufficient amounts of data were not available for the report to analyse follow-up within 48 hours. Mind also provided data from a survey investigating the experiences of discharge in people with a mental health problem. The survey found that suicide and self harm attempts were more likely to occur in people receiving discharge follow-up after 7 days or not at all compared to people followed-up within 7 days. Mind concluded that everyone discharged from mental health inpatient settings should be followed-up within 48 hours as a suicide prevention measure.

The Mind article also highlighted the publication of a [National Confidential Inquiry](#) on rates of suicide and priorities for safer services for people with a mental illness. Data was collected from UK countries between 2004 and 2014. The overall rate of suicide in 2014 was found to have risen from previous years in this population. The period after discharge from hospital was identified as a particularly high risk for suicide. The report found that in this period, the risk of suicide is highest within the first 2 weeks after discharge from an inpatient setting with the highest number of suicides occurring on day 3. However, a reduction in the rate of suicide was found to occur in the period between discharge and first service contact. The report concluded that a recognition of the need for early follow-

up is required.

The results from the 2 reports are largely consistent with recommendations 1.6.7 and 1.6.8 in NICE guideline NG53. The reports highlight the increased risk of suicide in the 7 days following discharge and a further increase in risk for those not receiving any follow-up contact.

Other clinical areas

This exceptional surveillance review did not search for new evidence relating to other clinical areas in the guideline.

Equalities

No equalities issues were identified during the surveillance process.

Overall decision

After considering all the evidence, we decided that no update is necessary for this guideline.

See [how we made the decision](#) for further information.

How we made the decision

Exceptionally, significant new evidence may mean an update of a guideline is agreed before the next scheduled check of the need for updating. The evidence might be a single piece of evidence, an accumulation of evidence or other published NICE guidance.

For details of the process and update decisions that are available, see [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual.

Evidence

This surveillance report provides an overview of 2 national reports published since the end of the search period for the guideline (March 2016).

See [appendix A](#): summary of evidence from surveillance for details of all evidence considered, and references.

Views of topic experts

We considered the views of topic experts, including those who helped to develop the guideline and other correspondence we have received since the publication of the guideline.

Comments on the exceptional review proposal were received from 3 topic experts. Of the responses, all 3 topic experts agreed with the decision to not update the guideline recommendations on follow-up after discharge from inpatient settings.

Views of stakeholders

Stakeholders are consulted only if we decide not to update the guideline following checks at 4 and 8 years after publication. Because this was an exceptional surveillance review, and the decision was not to update, we did not consult on the decision.

See [ensuring that published guidelines are current and accurate](#) in developing NICE guidelines: the manual for more details on our consultation processes.

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