

Our story

- Bankstown ED sees approximately 47,000 patients annually
- Approximately 8% of these patients present with a primary psychiatric disorder

Source: First Net.

- Bankstown ED is a 'Declared Mental Health Facility'
- Bankstown hospital has an on-site 30 bedded adult psychiatric unit 'Banks House'

The city of Bankstown is a multicultural area. In 2011 34.5% of our population were Non English Speaking, with 37% of the Bankstown City population being born overseas. 7.1% (12993 people) were born in Lebanon, followed by 6.8% (12394) born in Vietnam; 2.9% (5222) were born in China and 1.3% (2363) were born in the UK.

Census 2011.

Specific to Bankstown

- Psycho-Stimulant Intoxication/delirium
- +/- psychosis/mania

PTSD/Psychosis from Villawood Immigration Detention Centre People affected by serious mental illness face critical challenges to achieving and maintaining the same physical health as other people in the community.

'The medical clearance' added benefit

For some mental health patients who are not admitted it is a rare opportunity to offer primary healthcare.

Schizophrenia



Challenges

Medical assessment of mental health presentations offers a huge spectrum of acuity from life threatening conditions like serious suicide attempt to people with no mental health history in crisis following an acute stressor such as a relationship break up.

Challenges

- First Episode Psychosis
- How far to go?
- CT head now or later?
- UDS in house

why can it sometimes be so hard?

- the patient may not clearly have a delirium nor a psychosis but is acutely disturbed
 - the thought disorganisation and agitation of some patients with acute psychosis can make it hard to distinguish from a delirium
 - delirium patients may have auditory hallucinations instead of the more common visual hallucinations
 - psychosis patients may have visual hallucinations instead of the more common auditory hallucinations
 - up to 40% of patients with dementia have psychotic symptoms (delusions and hallucinations)
 - most of the causes of delirium can also cause an acute "toxic" psychosis

delirium is commonly caused by antipsychotic medications or drug overdoses

- patients are often uncooperative if not aggressive compromising history-taking and careful examination
- many patients with mental health issues also abuse substances which add to the complexity of the assessment (Dual diagnosis)
- a history of a drug overdose may not be forthcoming
 - have they been taking too much lithium and developed acute on chronic lithium toxicity?
 - have they taken a potentially lethal paracetamol overdose and not disclosed it?

Linguistically Diverse population/ NESB

'Frequent Flyers' risk of complacency?