PW01-206 - PEOPLE'S PERCEPTION OF THEIR INVOLUNTARY ADMISSION AT ONE YEAR FOLLOW-UP AND READMISSION RATES TO HOSPITAL

B. O'Donoghue¹, J. Lyne¹, M. Hill², L. O'Rourke³, S. Daly², C. Larkin³, L. Feeney², E. O'Callaghan¹

¹DETECT - Early Intervention for Psychosis, ²Cluain Mhuire Mental Health Services, ³St John of God Hospital, Dublin, Ireland

Background: There is limited knowledge of how individuals reflect on their involuntary admission.

Objectives: To investigate, at one year after an involuntary admission,

- (i) peoples perception of the necessity of their involuntary admission
- (ii) the enduring impact on the relationship with their family, consultant psychiatrist and employment prospects
- (iii) readmission rates to hospital and risk factors for readmission.

Methods: People that were admitted involuntarily over a 15 month period were re-interviewed at one year following discharge.

Results: Sixty eight people were re-interviewed at one year and this resulted in a follow-up rate of 84%. Prior to discharge, 72% of people reported that their involuntary admission had been necessary however this reduced to 60% after one year. Over one third of people changed their views and the majority of these patients reflected negatively towards their involuntary admission.

One quarter of people continued to experience a negative impact on the relationship with a family member and their consultant psychiatrist one year after an involuntary admission, while 13% reported a positive impact. A similar proportion perceived that it had negative consequences in their employment.

Within one year, 43% of all patients involuntarily admitted in the study period were readmitted to hospital and half of these admissions were involuntary. Involuntary readmission was associated with a sealing over recovery style.

Conclusions: Peoples' perception of the necessity of their involuntary admissions changes significantly over time. Involuntary admissions can have a lasting negative impact on the relationship with family members and treating consultant psychiatrist.