

Diagnosis, management and discharge of suicidal man (04HDC00671, 30 March 2006)

Psychiatrist ~ Psychiatric nurse ~ Enrolled nurse ~ Hospital systems ~ Standard of care ~ Consultation with family ~ Social crisis ~ Home leave ~ Suicide ~ Right 4(2)

A man with a history of depressive disorder was admitted to hospital after attempting suicide. The man's family was not satisfied with an initial proposal to discharge him, as they considered he had a mental illness. The patient was admitted to the hospital psychiatric unit as a voluntary patient. An enrolled nurse appointed as the patient's key worker undertook an initial assessment and determined that the patient was at medium risk.

The following morning the patient was assessed by a psychiatrist, who concluded that the patient was not suffering from a mental illness. A referral to relationship and alcohol services for counselling was planned. The psychiatrist reviewed the patient the next morning, and planned to discharge him. The patient became anxious as the day progressed, and indicated to staff that he was not happy about being discharged. Members of his family also expressed concern to ward staff about his condition. As a result of these concerns, following a multidisciplinary team meeting, the decision was made to grant the patient leave from the ward, rather than discharge. A discharge meeting was to be held the following week.

The patient was released and committed suicide the following day. His family complained that he was not diagnosed with depression, and that home leave was granted despite clear concerns about the risk of self-harm.

It was held that the psychiatrist provided the patient with an apparently appropriate diagnosis but undertook inadequate consultation with the patient's family, who should have been specifically consulted about the decision to grant home leave. The psychiatrist was held to have breached Right 4(2).

The hospital was also held to be in breach of Right 4(2) for allowing an enrolled nurse to be appointed as the patient's key worker, as this was outside the scope of practice of an enrolled nurse. This practice has now been stopped. It was also recommended that the hospital review its systems of care, particularly in relation to consultation.