Title: Multidisciplinary mental state examination teaching: towards a shared language

Holdcroft, J. & Long, L. (2020). Multidisciplinary mental state examination teaching: towards a shared language. RCPsych Faculty of Liaison Psychiatry: Annual Conference for Trainees, New Consultants, Nurses & Allied Health Professionals, 25 Nov 2020 Virtual. London.

Link to repository:
https://eastmid.openrepository.com/handle/20.500.12904/14583

Conference name: Faculty of Liaison Psychiatry: Annual Conference for Trainees, New Consultants, Nurses & Allied Health Professionals
Conference date: 25 November 2020
Conference location: Online

Additional information:
This is a conference poster that will be presented at virtual conference held by the Royal College of Psychiatrists.

Version note:
The version presented here may differ from the published version or from the version of record. If you wish to cite the following item, it is advised to consult the publisher version. Access to the publisher version can be found via the repository URL listed above.

For more information about this article, or the research repository, please contact libraryservice@nottshc.nhs.uk

Multidisciplinary mental state examination teaching: towards a shared language

Dr Jason Holdcroft MRCPsych, specialty doctor, Nottinghamshire Healthcare NHS Foundation Trust
Louisa Long MSc, Teaching Associate, School of Health Sciences, University of Nottingham

Abstract

Mental state examination (MSE) is taught in a structured and formal way in medical education, but often haphazardly and informally in nursing training (if at all). We produced formal MSE teaching for nursing students based on the medical model, and obtained detailed feedback. This indicated that nursing students found the teaching and structure helpful in their clinical placements.

Background

Medical students are taught MSE by psychiatrists and thus familiar with terms used to describe patients' presentations in MDT meetings, ward rounds and medical records. Mental health nursing students are confronted in their placements by a whole new metalanguage of mental state examination and psychopathology, and often have no teaching about the MSE method. Instead, they gain an understanding of the terms and concepts informally through their experiences of clinical work. Despite being the clinical staff who spend overwhelmingly the most time with inpatients, nurses may never be given the opportunity to learn a structured approach to mental state examination or its relevance to describing patients' presentations, making diagnoses and following progress. Nonetheless, nursing staff demonstrate great skill in observing and monitoring mental state and provide input to the MDT that is essential in directing management. They have a longitudinal impression of how 'kempt' the person is, hear their speech as it takes place outside of the formal ward round with peers and family members, and gain an impression of cognitive function based upon observation of activities of daily living. Moving beyond the limited terminology of 'responding' to and being 'distracted' by unseen stimuli could lead to a richer, shared approach to examining and documenting mental state which could improve long term care as a result, giving a clearer picture of a person's history and presentation for staff unfamiliar with them. Teaching MSE to nursing colleagues could also foster stronger interdisciplinary working relationships, helping to recognise and value what they contribute to the assessment of patients.

Having noted the different approaches to mental state assessment as a nursing student, Louisa Long gave a presentation to nurses in an Inreach Team of the medical MSE model and received positive feedback. Some staff had never encountered a structured approach to undertaking and recording MSE before. The feedback prompted Dr Jason Holdcroft to write an article considering the issue (ref. 1) and this project arose as a way of further testing our ideas.

Aims & Hypothesis

We wanted to assess whether teaching 'medical' mental state examination (MSE) to nursing students would improve their understanding of psychopathology nomenclature and their confidence in participating in MDT discussions. We hypothesised that such teaching would enable nursing students to recognise and understand terms used, and glean information from written records and team discussions.

Methodology

A slide presentation was written by a psychiatrist and a nursing lecturer, accompanied by a recorded lecture by the psychiatrist (due to Covid-19 it was not possible to offer face-to-face teaching). This formed part of the module teaching for Graduate Entry Nursing students at the University of Nottingham.

The structure of MSE taught was:
- Appearance and behaviour
- Speech
- Mood and affect
- Thoughts
- Perceptions
- Cognition
- Insight

Students were asked to give feedback on the questions shown below during their clinical placements where they were working directly with patients.

Responses

Did this teaching improve your understanding of how patients' mental states present, including signs and symptoms?

"The presentation gave a lot of suggestions about what to look for under the different categories of the MSE, which I might not otherwise have considered."
"I am now in a better position to interpret some signs and symptoms of mental illness."

Did this teaching help you to understand discussions about mental state in ward rounds and on the ward?

"It helps to [be] familiar with words and phrases that are likely to come up, and also the nuances of meaning that certain words take on in this specialised context . . . also important to be attuned to the hidden meanings and assumptions in words like 'insight'."

"I found the teaching about mental state examination . . . enhanced my understanding in discussions that take place in ward rounds. Before this teaching I struggled with the language and jargons used."

Did this teaching help you to describe mental state in your notes in patient records?

"Helps to be able to describe things in a concise and clear way without too much extraneous detail. Structure means other people can quickly read and understand the notes in a format they will already be familiar with."
"My notes writing has greatly improved because I regularly [use] some of the terms I learned."

Discussion

This small project demonstrated that joint production of teaching on mental state examination by nursing and medical teachers can improve new nurses' confidence in recognising, understanding and communicating aspects of mental state examination through a more 'shared language' between disciplines.

Presenting nursing students with a 'medical' model for mental state examination when they are in placements learning 'on the job' provides them with a structured way of observing and communicating their assessments which is accessible and understandable to nursing and medical colleagues. The feedback from students suggested also that they learned of new areas to consider and phenomena to look for, thus enriching their observations of patients. Given that nursing staff invariably spend much more time with patients than medical staff do, adopting a structured approach to mental state examination could improve the quality of information recorded about patients and potentially aid and improve care.

We recommend this initiative be adopted more widely and that 'bitesize' MSE teaching be made available to qualified nurses.

Acknowledgements

Contact

Dr Jason Holdcroft MRCPsych
Specialty doctor
Nottinghamshire Healthcare NHS Foundation Trust
jason.holdcroft@nhs.net

References

1. Holdcroft, J. (2016). The Multidisciplinary Mental State Examination (MSE): Should Psychiatrists be Teaching MSE to our Nursing Colleagues? RCPsych Trent e-Newsletter, Winter 2016, (https://www.rcpsych.ac.uk/docs/default-source/members/divisions/trent/trent-enewsletter---winter-2016.pdf?sfvrsn=6399628b_8)
2. Sims, A. (1988). Symptoms in the Mind: An Introduction to Descriptive Psychopathology.