

PLEASE NOTE THIS IS AN ADAPTED VERSION OF THE LESTER TOOL _ WITH ADDITIONAL COLUMNS AND COMMENTS ADDED.

Recently a CQUIN was introduced for physical health checks on psychiatric inpatients, and trust audit done. It is likely this will be rolled out to community patients too. Location of recording information was very variable. The areas covered in the inpatient CQUIN are: Alcohol use, Substance Use, Glucose, Lipids, Smoking Status, Weight/BMI and BP. We will soon be auditing the extent of compliance to these checks, which will be beneficial to our patients.

We have also added in the following screening in order to comply with recommendations issued by NICE on physical health monitoring for patients with psychosis, modified from the Lester Tool "Positive Cardiometabolic Health Resource".

[www.rcpsych.ac.uk/quality/ NAS/resources](http://www.rcpsych.ac.uk/quality/NAS/resources)

Please use the above chart to assess for any physical health concerns within 4 weeks of first assessment, and again as the frequency indicates above. Once completed, this form could be uploaded to Rio as a record. Usually this is 3 months after initiation of an antipsychotic, and then at a minimum annually. We suggest that all parameters are addressed before each CPA. Outlined is where the results should be documented on Rio, and then we suggest a care plan be created to cover these points as below. **Diagnosis should also be recorded on Rio.**

Care Plan (please modify to include appropriate "problems". If problem identified, but patient refusing intervention, document this.)

Physical > Active Life Training:

Physical Health Monitoring Performed.

Smoking status:

Weight/BMI:

Blood Pressure:

Lifestyle: Exercise, diet

Lipids:

Glucose:

Other bloods:

ECG:

Substance Misuse > Problem Drug Taking:

Smoking status (detail number of cigarettes/ ex smoker/ non smoker)

Substance Misuse > Problem Drinking:

Alcohol use: (detail units/week)

This in turn will lead to the creation of a database of this data for each patient which will be very useful in ensuring the best care is provided to our patients, who are known to have an excess mortality rate, even when factoring in for suicide.