

Publication: [‘Relieved to be seen’—patient and carer experiences of psychosocial assessment in the emergency department following self-harm: qualitative analysis of 102 free-text survey responses](#)

Publication details (Vancouver format)

Quinlivan L, Gorman L, Littlewood D, Monaghan E, Barlow S, Campbell S, Webb RT, Kapur, N. (2021). ‘Relieved to be seen’—patient and carer experiences of psychosocial assessment in the emergency department following self-harm: qualitative analysis of 102 free-text survey responses *BMJ Open* 2021;11:e044434.

What are the most important findings/conclusions in this paper? Why are they important?

The people who told us about their experiences of psychosocial assessments found them helpful on some occasions but harmful on others. Participants felt better, less suicidal, and less likely to repeat self-harm after good quality, compassionate and supportive assessments. However, negative experiences during the assessment were common and, in some cases, led to greater distress, less engagement, and further self-harm.

Some participants reported receiving negative and stigmatising comments about their injuries. Others reported that they were refused medical care or an anaesthetic. Stigmatising attitudes among some staff centred on ideas that self-harm is a ‘behavioural issue’, and attending the emergency department for self-harm, especially frequently is an inappropriate use of services, and for some psychiatric diagnoses, such as ‘personality disorder’. These findings are important because good quality psychosocial assessments can help people receive the best follow-up care for their individual needs.

What did you do?

Between March and November 2019, we invited people with lived experience of self-harm and attending the emergency department to share their views on psychosocial assessments in an online survey. The survey was co-designed with people who had lived experience in this area. Over 100 people shared their often painful experiences. We used qualitative methods (which focus on analysing words and opinions, rather than numbers) to analyse the surveys, looking for common experiences.

Why did you conduct this research?

We conducted this research because psychosocial assessments are an important part of care for people who have harmed themselves. We wanted to understand patient/carers experiences of psychosocial assessment in order to improve the quality of care for people who have harmed themselves. There are only a few studies in this area that involved patients and carers throughout the process. Our results can help to change clinical practice and make sure that patient/carers experiences are central to this process.

What was known before your paper was published?

We knew that some patients had poor experiences of psychosocial assessment from previous small, localised studies.

What is next? What is the potential impact of the work in this paper? What will change as a result of this paper (or the study it describes)?

We created infographics with our PPI members and shared these online. We will also share them on the study website and across our clinical networks.

The paper received quite a lot of attention and discussion online. It was Tweeted 78 times, and picked up by three news outlets.

The results will also be shared via our NHS England 'Improving community services for self-harm' programme of work.

The papers have been included in the '[Evidently Better, Suicide Prevention Bulletin](#)', which is sent to staff at Mersey Care NHS Trust, and other Trusts (e.g., Rotherham NHS FT), as well other research sites.

Some of the websites that cited the paper are below:

- <https://www.trftlibraryknowledge.com/emergency-care.html>
- <https://www.safetylit.org/week/2021/210530.pdf>
- <https://medicalxpress.com/news/2021-05-people-nice-self-harm.html>
- <https://www.nationaltribune.com.au/new-research-reveals-why-some-people-do-not-receive-nice-recommended-care-following-self-harm/>
- <https://www.trftlibraryknowledge.com/emergency-care-bulletins.html>
- <https://allmymedicine.com/health-news/why-some-people-do-not-receive-nice-recommended-care-following-self-harm/>

Does this paper link in to a particular study / project? If so, please summarise the study and explain how this paper has improved understanding, or will move the study forward.

This study is part of a programme of work which aims to improve services for people who have harmed themselves. This paper gives important insights about how to improve the quality and quantity of psychosocial assessments for people who have harmed themselves. We will build on this work by investigating what can make getting an assessment easier, or more difficult, and will also look at aftercare in a multi-site clinician study.