









Towards Personalised Clinical Management of Self-Harm through Data-Driven Clinical Decision Support using Transnational Electronic Registry Data (PERMANENS)

Findings from User Advisory Groups

(Ireland, Spain & Sweden)

Improving Psychological and Emotional Support within Emergency Department

- A consistent observation across various settings is the recognition of a need for improved training among emergency department (ED) healthcare professionals in addressing patients' emotional and psychological needs. Furthermore, the deployment of nurses or medical personnel with specialized training in compassionate patient care within the ED environment is perceived as a significant enhancement to the overall patient experience.
- A need for personalised care was also a common theme emerging from all locations.
 For example, in one of the User Advisory Groups (UAG, Ireland) it was mentioned that
 the healthcare professional checking in or interacting personally, played a key role in
 making them feel better during their time in ED.
- Both Lived Experience (LE) and Mental Health Professionals (MHP) members across the locations also noted that there is often an ambition to do well. Highlighting that staff are positive to educational and training efforts.

Perspective regarding digital tools

- MHP members among the UAG groups advocated for the inclusion of a safety-plan
 feature within the digital tool, fostering ongoing development throughout the care period.
 It was highlighted that this feature would empower both patients and clinicians to
 collaboratively outline strategies for managing crises and mitigating risks in real-time.
- Recognising the importance of continuity of care beyond crisis intervention, the tool
 should incorporate a structured plan for post-discharge care. This ensures patients have
 access to tailored resources and support mechanisms to navigate the transition back to
 daily life after the immediate crisis has passed.
- Overall, both individuals with lived experience and mental health professionals had a
 positive outlook towards using and implementing digital tools.

Improved feedback and communication

 It was noted that both LE and MHP emphasised the importance of having more options regarding medication and advocated for a "personalised" approach to treatment.











Involving individuals in decision-making about their medication could significantly enhance patient satisfaction and treatment outcomes.

- Further upon discharge from ED, LE participants across all the locations suggested
 providing them with personalised qualitative feedback reports. These reports would
 offer insights into their ED experience, including details about their treatment, and
 recommend necessary steps for ongoing care. This approach aims to empower patients
 with valuable information to guide their post-ED healthcare journey effectively.
- Participants also highlighted challenges stemming from poor registration of previous records of visits in the EHR system, particularly in Ireland. This issue leads to individuals having to repeatedly explain their medical history, which becomes even more burdensome when receiving care across both public and private healthcare systems.



Figure 1 Wordcloud of key narratives originating from the UAGs across the locations