

MENTAL HEALTH SERVICE PROCEDURE COVER SHEET



Health
South Eastern Sydney
Local Health District

NAME OF DOCUMENT	Bariatric Patients in Inpatient Mental Health Services
TYPE OF DOCUMENT	Procedure
DOCUMENT NUMBER	SESLHDPR/486
DATE OF PUBLICATION	August 2025
RISK RATING	Low
LEVEL OF EVIDENCE	N/A
REVIEW DATE	August 2030
FORMER REFERENCE(S)	SESLIAHS Procedure PD234
EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR	General Manager Mental Health Service
AUTHOR	Director of Nursing, Mental Health Service
POSITION RESPONSIBLE FOR THE DOCUMENT	Policy and Document Development Officer, Mental Health Service SESLHD-MentalHealth- PoliciesandDocuments@health.nsw.gov.au
FUNCTIONAL GROUP(S)	Mental Health
KEY TERMS	Bariatric, obese, risk, assessment, management, physical health
SUMMARY	This procedure has been developed to standardise the system of bariatric patient identification, assessment and risk management across SESLHD Mental Health Service (MHS) inpatient facilities (acute and non-acute care) in accordance with NSW Health Policy Directives.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

**This Procedure is intellectual property of South Eastern Sydney Local Health District.
Procedure content cannot be duplicated.**

Feedback about this document can be sent to SESLHD-MentalHealth-PoliciesandDocuments@health.nsw.gov.au

MENTAL HEALTH SERVICE PROCEDURE

Bariatric Patients in Inpatient Mental Health Services

SESLHDPR/486

1 POLICY STATEMENT

Identifying the risks that are encountered during the identification and management of bariatric patients is vital in delivering quality care that ensures the health, safety and welfare of patients and staff members. Risks are identified through assessing the patient's physical integrity, mobility and by gaining a baseline weight.

2 BACKGROUND

Obesity has been recognised as a growing issue in the Australian population. This is reflected in the rising number of overweight and obese patients requiring the use of the Ambulance Service of NSW and other health services.

Bariatric patients often delay presenting to hospitals until their medical condition is urgent. Therefore, it is of the utmost importance that bariatric patients are afforded the highest level of dignity and respect that the circumstances allow when they are using the public health system. Providing a respectful and responsive service requires effective planning, a holistic and non-judgemental approach and a continuing mindfulness by those delivering care, of the special needs of – and significant challenges faced by – bariatric patients.

2.1 DEFINITIONS

Patient with Bariatric Needs: NSW Health [GL2024_001 Management of Patients with Bariatric Needs](#) defines a patient with bariatric needs as [...] *an in or outpatient (Child or Adult) with bariatric needs (over 120kg or BMI >30) receiving healthcare by NSW Health workers in transport, facility, at home or in the community. Bariatric is an internationally accepted term applied to patients with a Body Mass Index (BMI) exceeding a range where body size restricts mobility, health or access to available services and equipment.*

For the purpose of this procedure, the above definition will be adopted in respect of Mental Health Inpatients.

Individual Patient Bariatric Needs Management Plan: A document that outlines the inpatient facility's response to the planned or unplanned admission of a bariatric patient.

Body Mass Index (BMI): Weight (in kilograms) divided by height (in metres squared).

3. RESPONSIBILITIES

3.1 Employees will:

- Follow local procedures established for the management of bariatric patients within inpatient MH services.
- Adhere / Comply with manual handling and ergonomic safe work practices including using patient mobility / transfer equipment and assistive devices.

MENTAL HEALTH SERVICE PROCEDURE

Bariatric Patients in Inpatient Mental Health Services

SESLHDPR/486

- Attend manual handling training as required to achieve proficiency in performing high risk tasks involving manual handling of a bariatric patient.
- Report manual handling hazards to their managers and report incidents in ims+
- Flagging of patients with bariatric needs in the patient's electronic medical record (eMR).
- Communicate bariatric management requirements for patients during handovers and referrals as well as to relevant staff.

3.2 Clinical Operations Managers/Inpatient Service Managers will:

- Ensure that staff receive suitable and sufficient training to promote bariatric patient management within inpatient MH services.
- Ensure that local procedures for the implementation, governance and management of bariatric patients (including local processes for the provision of identified furniture and equipment) within inpatient MH services are implemented within their workplace.

3.3 Mental Health Service Directors will:

- Assign responsibility for ensuring bariatric patient management within inpatient MH services.
- Ensure that local procedures for the implementation, governance and management of bariatric patients within inpatient MH services are developed and communicated to all managers and staff.

4 PROCEDURE (see also APPENDIX A)

- 4.1** A physical examination of the patient must be completed prior to their admission to the mental health unit (MHU). This should include consideration of the person's weight and mobility. The Emergency Department (ED) Medical Officer must deem the person 'fit for discharge from ED' prior to being admitted to the MHU. If the patient is a direct admission to a MHU (not admitted via ED) ie from a Community Mental Health Service, a Forensic Service, a private mental health facility, another LHD etc, a Physical Health Examination must be completed by the treating Mental Health Team within 24 hours of admission to the MHU as per [SESLHDPR/735 Admission and Discharge/Transfer of Care Processes for Acute Mental Health Inpatient Units \(including Direct Admissions for Consumers linked with Community Mental Health\)](#).
- 4.2** Patients are to be flagged for a bariatric assessment if they have a weight exceeding 120kg and/or a Body Mass Index (BMI) exceeding 30. This is to be confirmed by the MH clinician (eg Clinical Nurse Consultant, Nurse Practitioner, Psychiatric Trainee, Consultant Psychiatrist) involved in the MH assessment.
- 4.3** The MH Clinician involved in the MH Assessment is to make direct contact with the Nurse Unit Manager (or delegate) of the accepting MHU, flagging the need for a [Individual Patient Bariatric Needs Management Plan](#) within 24 hours of admission.

MENTAL HEALTH SERVICE PROCEDURE

Bariatric Patients in Inpatient Mental Health Services

SESLHDPR/486

- 4.4 [Individual Patient Bariatric Needs Management Plan](#) is to be completed by the site Mental Health Occupational Therapist in direct consultation with the site Nurse Unit Manager, Manual Handling Coordinator, Patient Flow Coordinator and site Workplace Health and Safety (WHS) Committee representative. Where an Occupational Therapist is not available to complete the plan within an appropriate timeframe, the NUM is to escalate to the Inpatient Service Manager for appropriate reallocation.

The primary objective of the plan should be ensure both the patient's comfort by providing the appropriate patient furniture and equipment (such as patient chair, over toilet aid etc) and the safety of staff and the patient by minimising the manual handling of the patient wherever practical.

- 4.5 A documented [Individual Patient Bariatric Needs Management Plan](#) and special needs identification is to be communicated to the treating team by the site Inpatient Services Manager.
- 4.6 The site Mental Health Occupational Therapist is to monitor and regularly review the documented [Individual Patient Bariatric Needs Management Plan](#), in consultation with an Occupational Therapist/Nursing Unit Manager/Physiotherapist/Clinical Treating Team/the site Manual Handling Coordinator/Community Mental Health Team and other stakeholders (including transport and Community Managed Organisations) as required.

5. DOCUMENTATION

NSW Health [Individual Patient Bariatric Needs Management Plan](#) (NH700434)

6. AUDIT

While there is no formal audit process to accompany this procedure, it is a requirement that all MH teams routinely assess the physical health of patients upon admission to a SESLHD MHS inpatient unit and at regular intervals during an inpatient stay.

The expected outcome of this procedure is a standardised system of bariatric patient identification that:

- Accurately identifies each bariatric patient at the point of admission, prior to any treatment or procedure and also on transfer of care;
- Improves the safety and welfare of patients and staff.

7. REFERENCES

- [NSW Health Guideline GL2024_001 Management of Patients with Bariatric Needs](#)
- [NSW Health Guideline GL2021_006 Physical Health Care for People Living with Mental Health Issues](#)
- [NSW Work Health and Safety Act 2011](#)

MENTAL HEALTH SERVICE PROCEDURE

Bariatric Patients in Inpatient Mental Health Services

SESLHDPR/486

- [Safe Work Australia Hazardous Manual Tasks Code of Practice \(October 2018\)](#)
- [Safe Work Australia National Standard for Manual Tasks \(August 2007\)](#)
- [National Safety and Quality Health Services \(NSQHS\) Second Edition: Standard 1 Clinical Governance Standard \(1.3\)](#)
- [National Standards for Mental Health Services 2010: Standard 2. Safety \(2.1\); Standard 4. Diversity responsiveness \(4.5, 4.6\); Standard 10. Delivery of care \(10.1.2\)](#)

8. VERSION AND APPROVAL HISTORY

Date	Revision No.	Author and approval notes
July 2009	1	Angela Karooz, SESIMHS Risk Manager. Document prepared for SESIMHS Core Risk Team, Network Mental Health Quality Managers. Approved by Chief Executive at Clinical Council on 22 July 2009.
Sept 2014	2	Reformatted in current template and references updated by Victoria Civils-Wood, SESLHD MHS Senior Executive Officer.
Nov 2014	2	Reviewed by Angela Karooz, SESLHD MHS Risk Manager.
Jan-Feb 2015	2	Forwarded to STG Workplace Safety Injury Management Coordinator, POWH Occupational Health & Safety Consultant and MHS Access and Service Integration Manager for review. Minor feedback received, with some incorporated.
Nov 2015	2	Sent for out of session endorsement to SESLHD MHS District Document Development and Control Committee (DDCC). Minor feedback received and incorporated. Endorsed by SESLHD MHS Clinical Council.
Jan 2016	3	Additional National Standard added
September 2020	v4.0	Routine review commenced.
November 2020	v4.1	Document reformatted into new template "Bariatric Patient" definition updated to align with GL2018_070 Reference table reviewed and updated.
February 2021	v4.1	Endorsed by SESLHD MHS Document Development and Control Committee. Endorsed by SESLHD MHS Clinical Council
March 2021	v4.1	Approved by Executive Sponsor
January 2025	v5.0	Routine review commenced.
July 2025	v5.0	Sent to DDCC for review and feedback
20 August 2025	v5.1	Endorsed DDCC with minor feedback. Escalation point added if OT unavailable to complete management plan. Pathway for procuring any required equipment included. Sent to MHS Clinical Council for review and out-of-session endorsement. Endorsed without change. Endorsed for publication by Executive Sponsor.

Bariatric Patients in Inpatient Mental Health Services

SESLHDPR/486

APPENDIX A:

Management of Bariatric Patients in Inpatient Mental Health Services

Work Health and Safety – Management of Patients with Bariatric Needs



Appendix 5: Patient Management Following Admission to Ward

