



The stepped care psychosocial services in Palliative Care

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Contents

- What is **palliative care** (PC) ?
- What are the characteristics of **psychosocial care** in PC?
- What is **stepped care model** ?
- **How** the stepped care model apply in psychosocial service in PC?
- Can this model improve **efficiency and effectiveness** ?
- Sharing of **integration** of Psychology Assistant in CMC
Multidisciplinary PC team

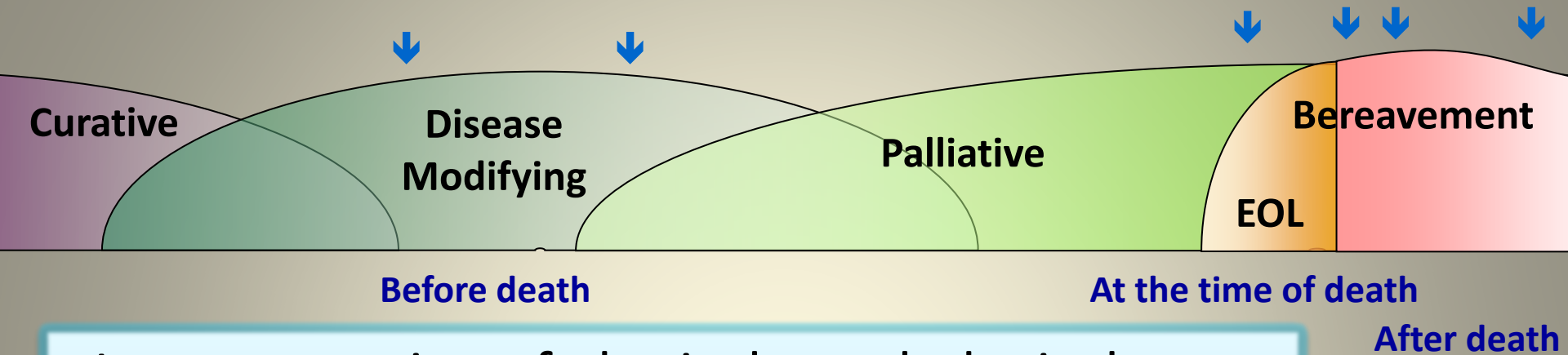
What is palliative care ?

adopt definition from WHO 2010

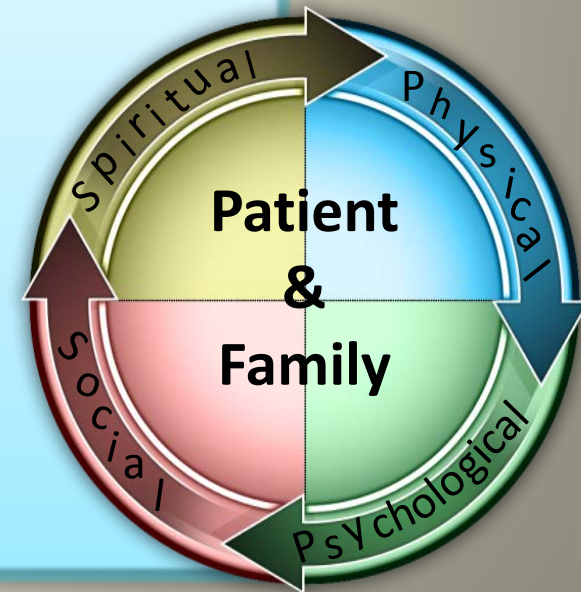
- Palliative care is an approach that improve the QOL of patients & their families facing the problems associated with life threatening illness,
- Through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual.



Characteristics of Psychosocial Care in PC



- Interconnection of physical, psychological, social & spiritual aspects
- Need-based
- Key time points of psychological stress
- Targeting patients and family caregivers
- Multidisciplinary involvement
- Collaboration with community service providers and volunteers



What is stepped-care model ?



- Based on Improving Access to Psychological Therapies Programme (IAPT) in UK
- Aim:
 - Define service to be provided across the Stepped Care spectrum, focus on **development of low and high-intensity** psychological therapy services
 - Improve **EFFECTIVENESS & EFFICIENCY** of decisions about allocation of resources in psychological therapy

What is stepped-care model ?

Principles & Evidences

Principles

1. Enhance capacity of mental health service/
↑**access** to evidence based psychological intervention
2. Least restrictive Tx available that will provide significant health gain should be offered first
3. The model should be “**self correcting**”. Had regular feedback mechanism allow intensity of intervention to be adjusted
4. A range of **Tx of differing intensity** is available

Evidences

- Evidences on favorable outcome of stepped-care model mainly in management of **mild to moderate depression and anxiety disorder**

A review and discussion of psychological therapies and interventions delivered within stepped care service models

Anne Joice, Laura Freeman, Laura Toplis, Geraldine Bienkowski

Full section 1 report with references and appendixes

How the stepped-care model apply
in psychosocial service in PC ?

Development of psychosocial framework

BASED on NICE Guideline on cancer service

Level 1

Recognition of psychosocial needs

Level 2

**Early identification of
psychosocial distress**

Level 3

Assess & intervention for distress

Level 4

Diagnosis of psychopathology

Psychology Assistant (PCAI)

- Adopt the stepped-cared model with **Psychology Assistant** to provide **low intensity service** & Clinical Psychologist to focus on high intensity service

Psychology Assistant MUST:

1. Obtained a related degree in psychology or counselling,
2. Complete Corporate PCA training program with satisfactory work & passed exam,
3. Receive continuous on job training,
4. Supervised closely by Clinical Psychologist, &
5. Review all handled case with Clinical Psychologist daily to at least weekly

Stepped-care CP Service

Level 1 Recognition of psychosocial needs

Level 2 Standardized measures for needs identification
(PWS-P; PWS-C; HADS/GDS)

Feedback to PC Team & CP

Level 3 Assess & intervention for distress

Level 4 Diagnosis & intervention of
psychopathology

For suitable
patients
/carers
(PCA)

Patients
/carers
in
need
(CP)

Roles of Psychology Assistant

Level 2: EARLY IDENTIFICATION

- Use standard screening tools for needs/ risk identification

Level 3 : LOW INTENSITY Psychological intervention

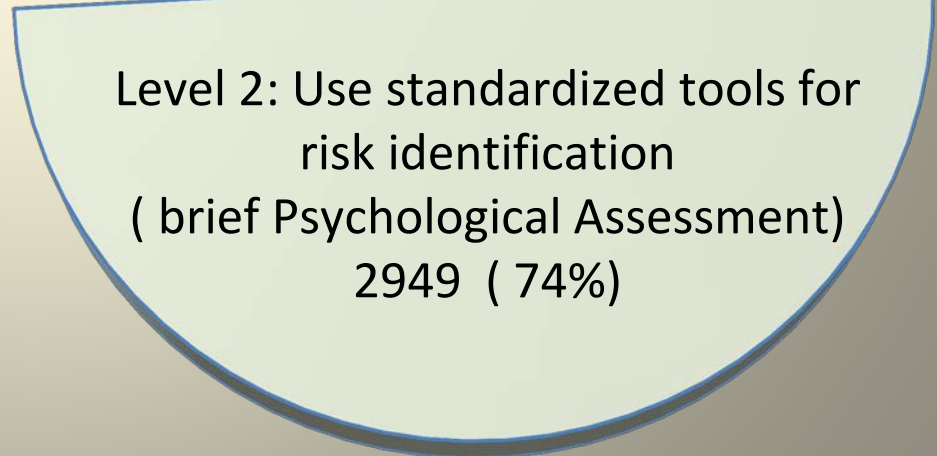
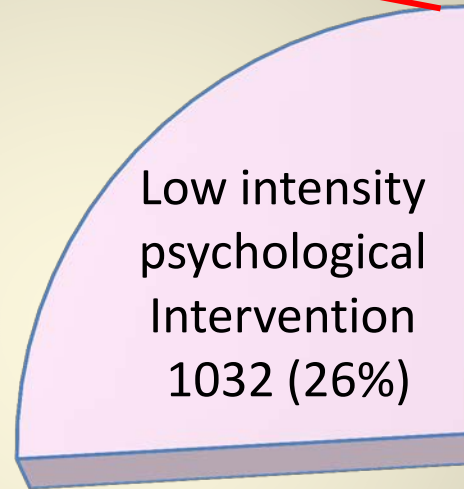
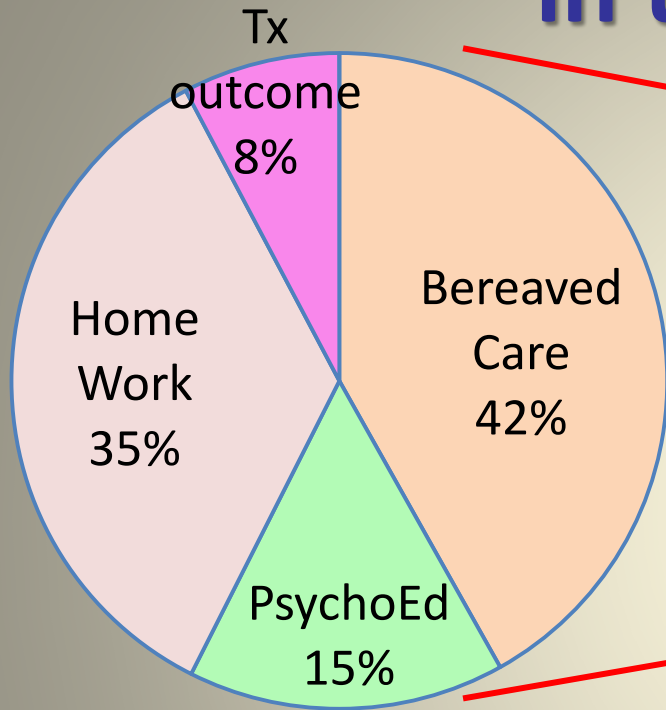
- Psycho-education e.g stress management
- Provide assistance & support for practice of psychological technique e.g relaxation technique
- Provide assistance for running groups
- Provide assistance in strengthening of services for the bereaved

OTHERS

- Documentation & analysis of treatment outcomes

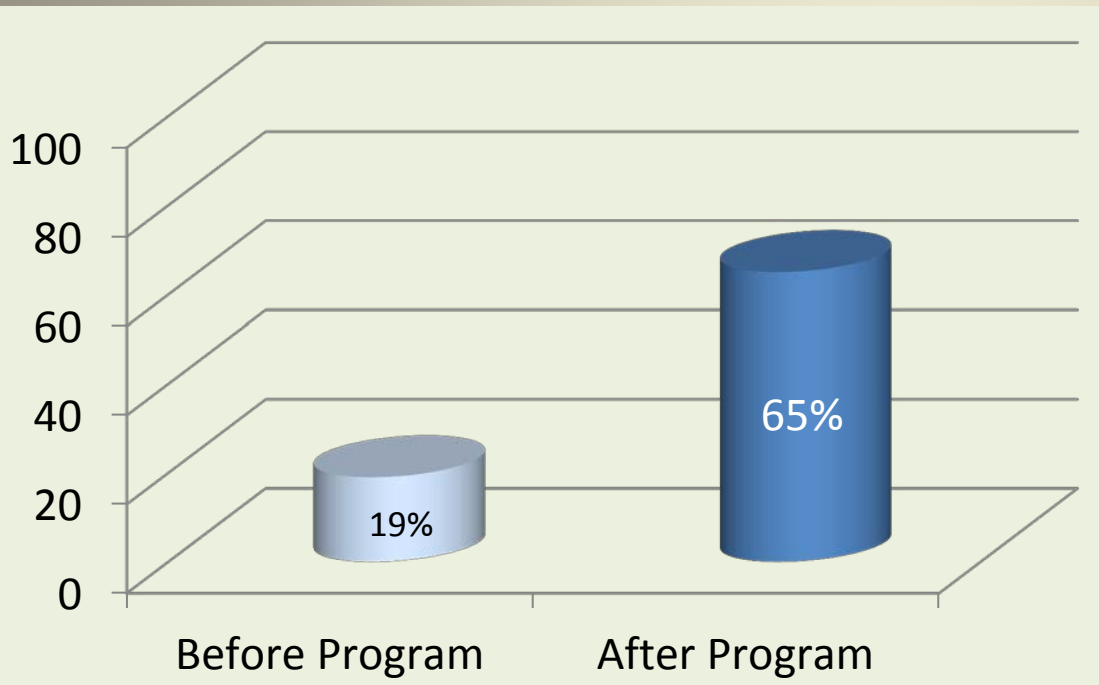
Can the stepped-care model improve
the efficiency & effectiveness of
providing psychosocial care ?

What has Psychology Assistant done in this program ?



Sep 2012- Jan 2014
KWC, HKW, KEC, KCC
Data presented in SMM (PC), 2014

Enhance overall coverage of psychological care in Palliative care

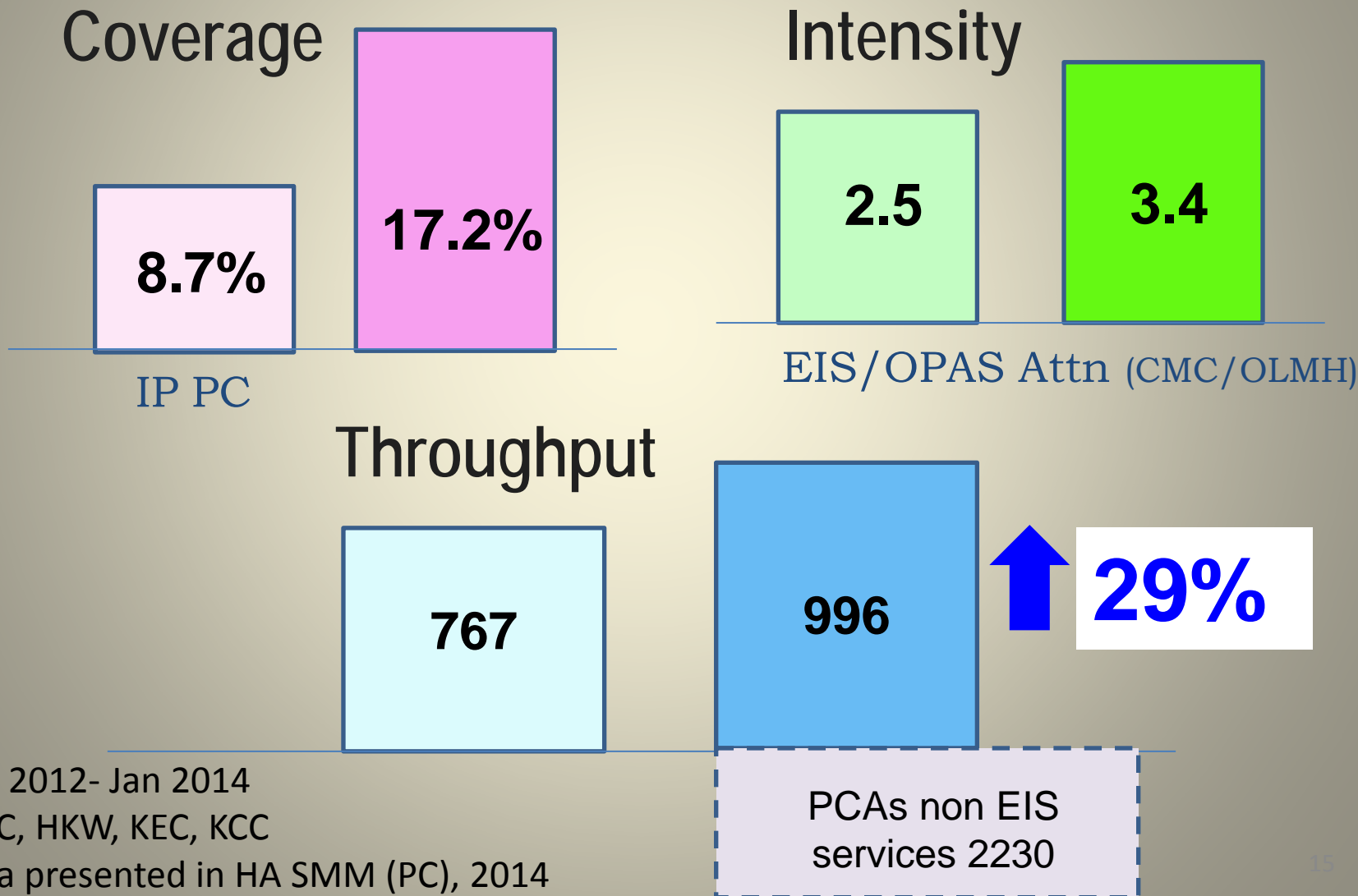


In CMC, OLMH PCUs
Overall Coverage of
psychological care **by**
Clinical Psychologist &
Psychology Assistant

↑ from 19% to 65%

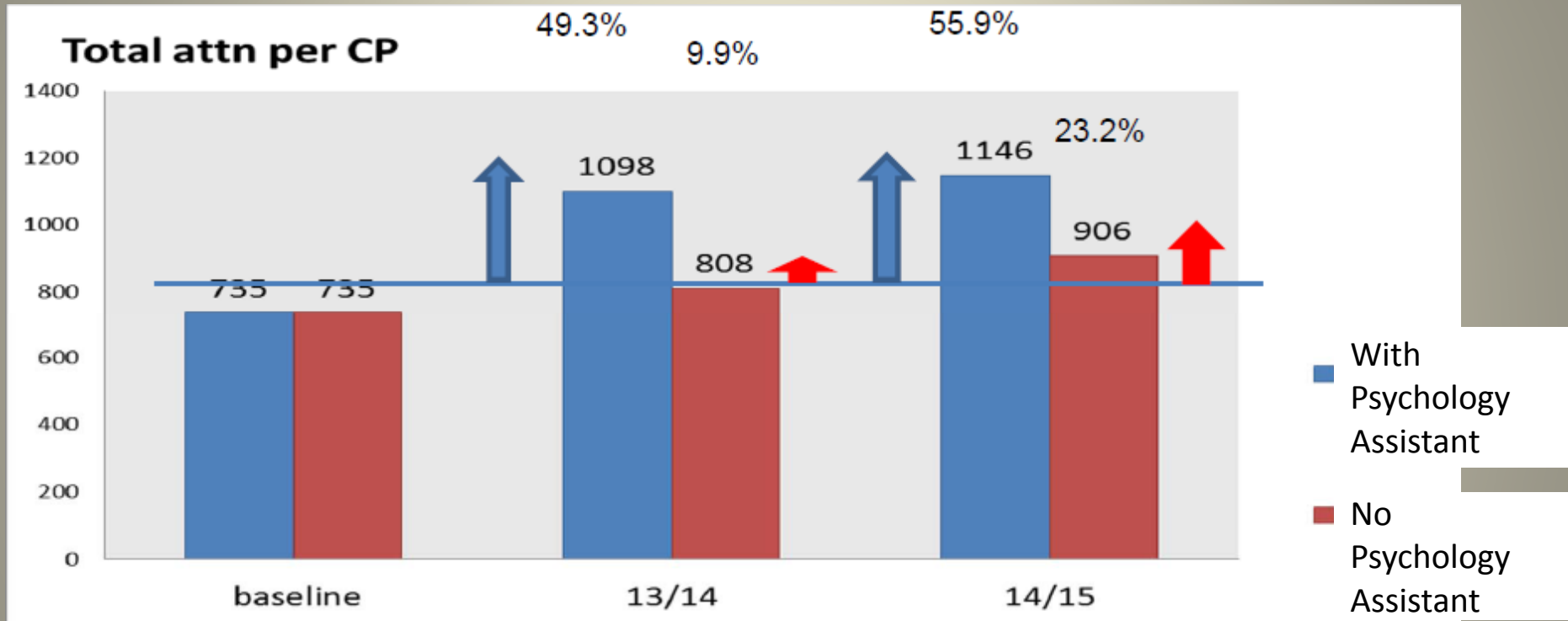
*Cho W C et al. Application of Stepped-care Model on Psychosocial Services for PC patients and caregivers in Hong Kong. Abstract submission to HA Convention 2016.
Data from CMC and OLMH PCUs*

Enhance Service Coverage and Intensity by Clinical Psychologist in PC (pre-post program)



Sep 2012- Jan 2014
KWC, HKW, KEC, KCC
Data presented in HA SMM (PC), 2014

Enhance EFFICIENCY of Clinical Psychologist in providing psychological service



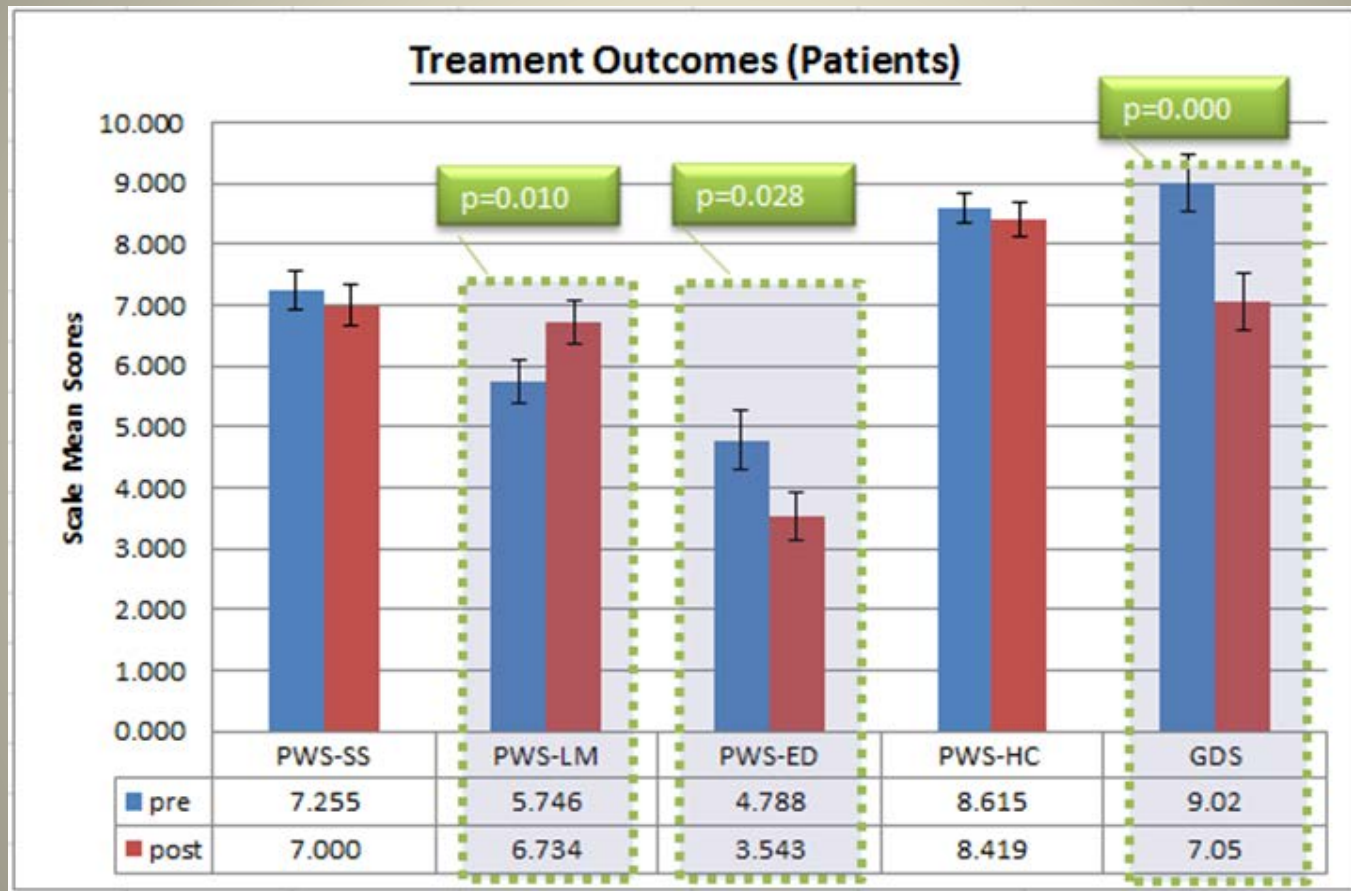
Data presented in HA SMM (AH) 2015

Total Attn per CP ↑ more markedly in setting with Psychology Assistants input

Effectiveness of service

PC Patients treatment outcome

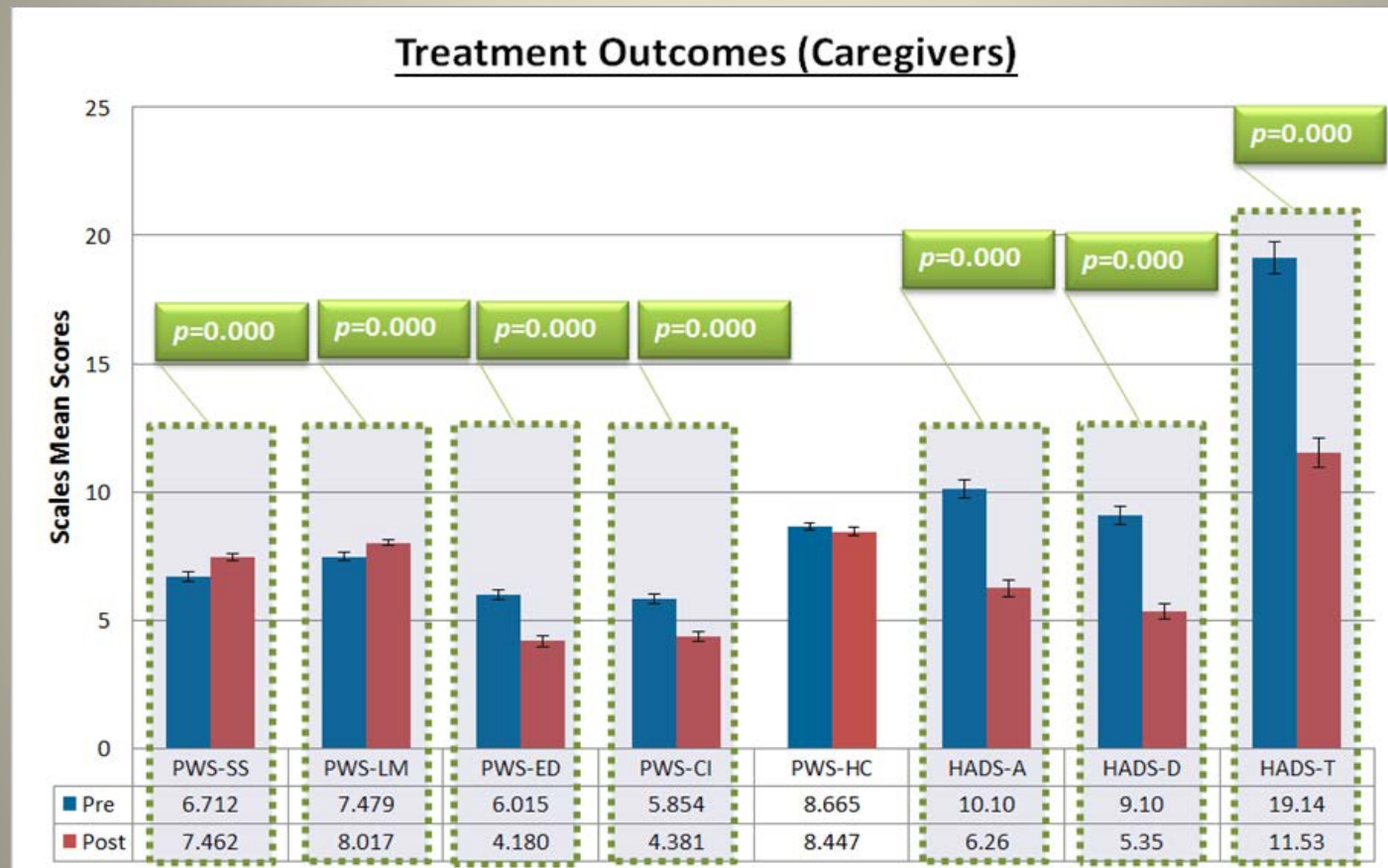
N=56



Cho W C et al. Application of Stepped-care Model on Psychosocial Services for PC patients and caregivers in Hong Kong. Abstract submission to HA Convention 2016.
Data from CMC and OLMH PCUs

Effectiveness of service Caregivers' treatment outcome

N= 166

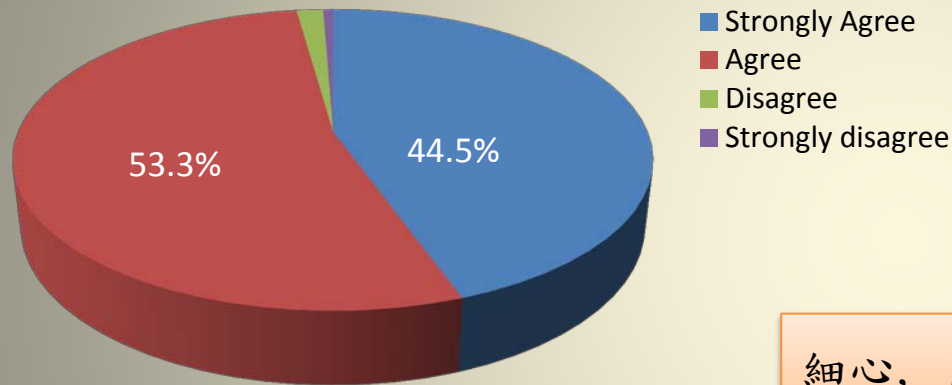


Cho W C et al. Application of Stepped-care Model on Psychosocial Services for PC patients and caregivers in Hong Kong. Abstract submission to HA Convention 2016.
Data from CMC and OLMH PCUs

Effectiveness of service

Words from patient and caregivers

Are you satisfied with Psychology Assistant's service
e.g screening, sleep hygiene education, relaxation
exercise training ?



非常有意義的工作，
可幫助人，令病人減少煩惱，情緒穩定

細心，關心病人

以前不知道甚麼是心理治療，現在知道後會介紹給有需要的人。多謝心理學家及助理X姑娘，將我由黑暗帶回現在識笑，會主動與人說話，會打電話俾人傾計，思想由負面變得正面。今次的事只是一個不幸，但我仲有很多個幸運。多謝X姑娘教導練習可以自己幫自己

Sharing of Integration of Psychology Assistant in CMC PC multidisciplinary team



CMC Palliative Care Multidisciplinary Team

Medical

- PC consultant
- PC Associate Consultant
- PC resident specialist
- PC trainee

Nursing

- PC Nurse consultant
- PC ward manager
- PC Advance practice Nurse
- RN and EN with PC training

Allied Health

- Medical Social Worker
- Clinical psychologist, PCA
- Occupational therapist
- Physiotherapist
- Dietitian
- Pastoral care worker

Supporting

- Clerical staff
- Health care assistant

Volunteer

- Health Resource Centre
- Comfort Care Concern
- Dr. Pet
- Arts in hospital



Palliative Care

Multidisciplinary Team (MDT) Activities

Clinical Services

1. Weekly MDT Case Conference

- All inpatient cases
- Selected home care cases
- All bereaved cases

2. 4-monthly PC MDT Operational Meeting

Educational Services

1. Monthly Local MDT Journal Club

- Presented by different disciplines
- Skill transfer

2. 4 monthly Multidisciplinary meeting for all HA PCUs

Research Projects

- Collaboration with different disciplines

Staff wellbeing

- Monthly Oasis with multidiscipline staff sharing

Recreational Activities

- e.g. Spring dinner

Integration of Psychology Assistant (PCA) in multidisciplinary team

Clinical Services

1. Weekly Case Conference

- All inpatient cases
- Selected home care cases
- All bereaved cases

2. 4-monthly PC multidiscipline Operational meeting

1. Use of standardized tools for risk identification done by PCA

- ALL Results documented in records and discuss in case conference

2. Triage to PCA or CP directly

- Patient/Caregivers identified by PC team to have psychological risk will discuss in case conference and triage for PCA or CP

3. Report on interventions by PCA in case conference

- All interventions by PCA will report by CP ± step up intervention

4. Information transfer from PCA directly to related disciplines and vice versa

Integration of Psychology Assistant (PCA) in multidisciplinary team

- ❑ On top of Educational Activities provided by Clinical Psychologist
- ❑ PCA join all monthly local MDT journal club presented by different discipline
- ❑ Acquire knowledge from different disciplines

Educational Activities

- 1. Monthly Local Multidiscipline Journal club**
 - ❑ Presented by different disciplines
 - ❑ Skill transfer
- 2. 4 monthly Multidisciplinary meeting for all HA PCUs**

Integration of Psychology Assistant (PCA) in multidisciplinary team

On top of treatment outcome data entry & analysis from clinical psychology research project

PCA

- ❑ great experience on use of standardized screening tools for risk assessment
- ❑ Involve PCA on research project with the same screening tools

Research Projects

- ❑ Collaboration with different disciplines

Integration of Psychology Assistant (PCA) in multidisciplinary team



Staff wellbeing

- ❑ Monthly Oasis with multidiscipline staff sharing

Recreational Activities

- ❑ e.g. Spring dinner

Conclusions

Local data support that adopt the stepped care model with Psychology Assistant to screen patients/carers at risk and provide low intensity psychological interventions with close supervision can improve the effectiveness and efficiency of providing psychosocial care in PC

End & Questions



Supplementary slide

WHO Definition of Palliative Care



- Provides relief from pain and other distressing symptoms
- Affirms life and regards dying as a normal process
- Intends neither to hasten or postpone death
- Integrates the psychological and spiritual aspects of patient care
- Offers a support system to **help the family cope** during the patient illness and in their **own bereavement**
- Use a **team approach** to address the **needs of patients and their families**, including bereavement counseling,
- Enhance quality of life, may also positively influence the course of illness
- Applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiotherapy, and includes those investigations to manage distressing clinical complications