



EFFECTIVENESS OF PERSONALIZED CARE PROGRAMME (PCP) FOR PATIENTS WITH SEVERE MENTAL ILLNESS (SMI) IN KWUN TONG

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INTRODUCTION

Kwun Tong district is one of the pilot sites for Personalized Care Programme in Hong Kong. It involves multidisciplinary mental health professional input which (1) proactively assists patients in community, (2) provides them with tailor-made treatment to meet individuals' strengths and deficits, (3) delivers outreaching services to strengthen skill generalization, and (4) offers easy accessibility and availability of assertive clinical support. PCP has accomplished the above goals by equipping staff from various professional background to become case managers, who provide clinical care with extended accessibility.



OBJECTIVES

- (1) to evaluate the effectiveness of PCP over a 6-month period,
- (2) to investigate the clinical outcome of individuals with severe mental illness, and
- (3) to explore the view of service users and caregivers on PCP.

METHODOLOGY

From April 2010 to February 2011, one-hundred persons with schizophrenia diagnosed according to ICD-10 criteria were recruited. The six-month outcome of the individuals under care of PCP was compared to their own six-month outcome within the past year under community psychiatric nurse service (CPNS). Feedback of service users and caregivers on PCP was explored by means of a questionnaire.

RESULTS

- (1) PCP has enhanced community psychiatric service by significantly increasing the mean number of home visits within and outside office hours, the mean number of joint visits, the frequency of patients participating in community rehabilitation activities and the number of multidisciplinary case conferences held.
- (2) **Violence incident** in patients under care of PCP was **reduced from 18% to 9%**, whereas **psychiatric admission** in patients under care of PCP was **reduced from 34% to 25%** respectively.
- (3) Feedback from service users/caregivers revealed that readily accessible case managers, enhanced community rehabilitation activities, and extended duration and quality of patient contact during home visits are advantages of PCP.

CONCLUSIONS

PCP is effective in reducing violence rate and hospitalization rate in patients with SMI, with positive response from service users and caregivers. Roll out of the program to all districts of HKSAR is earnestly expected. More detailed and structured evaluation study of the pilot program is on the pipeline. Study on potential savings on health care cost after implementation of PCP is recommended.



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