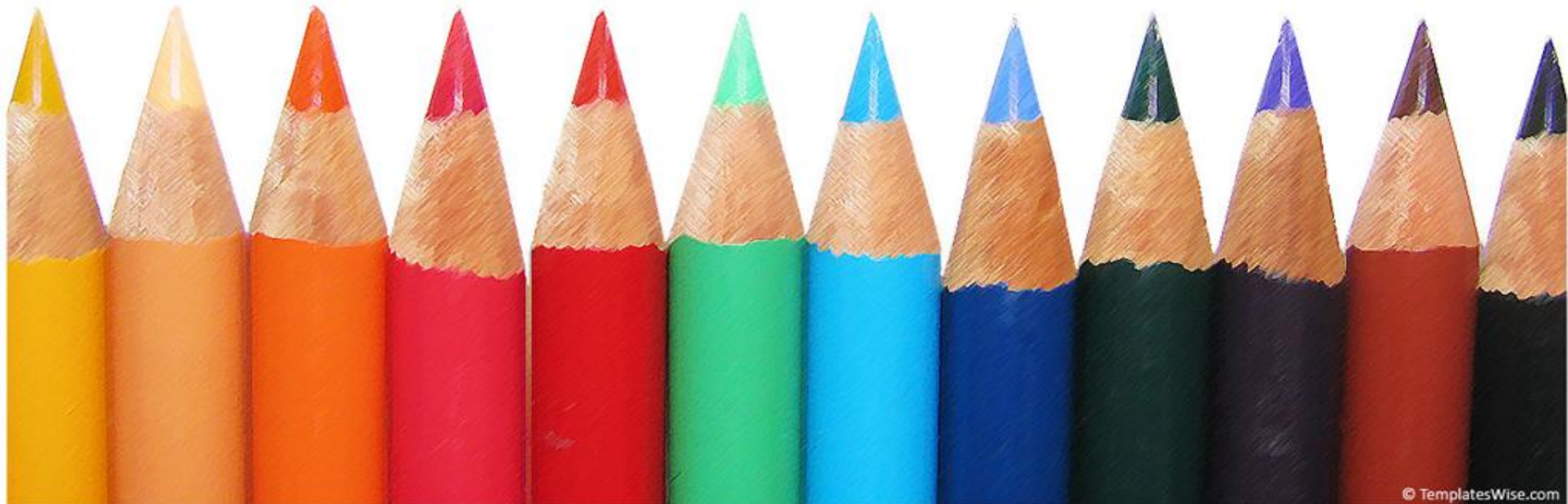


New Roles of Occupational Therapist in Mental Health Service

**– Enhancing Access to Psychological Interventions
for People with Common Mental Disorders**

Josephine Lee, COT



Traditional Roles in Mental Health Services

- Majority of workforce in In-patient care services & Psychiatric Day Hospitals
- Skills based training and habit formation in self-care, work and leisure





GAP ANALYSIS

- ↑ demand on chronic illness management and ambulatory care created pressing needs to more holistic care instead of episodic treatment.
- Role extension and multiskilling may help to address the changing health needs and improve patient care.

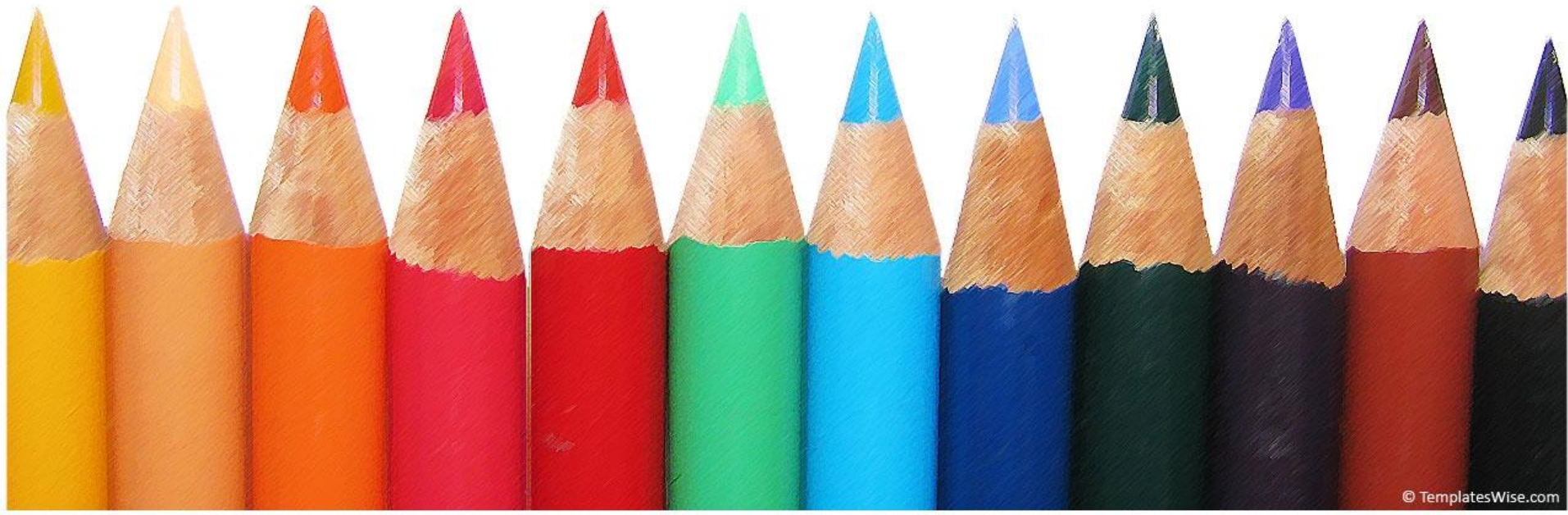


Need

- New Service Demand
- Pressure Areas
- Paradigm Shift in Service Model
- Capabilities and Readiness of Staff
- Workforce development
 - Work based Training



Career Progression



Career Progression Model in Allied Health Grades

- Consultant
- Advance Practitioner
- Practitioner

CPM is a competency based model supporting advanced practice and new role development of AH



Consultant Occupational Therapist (Mental Health)

Three Tiers:
HA : COC
Cluster
Services

- deliver specialized service to patients at high risk and/or with complex mental health conditions;
- provide consultancy advice in mental health specialty and subspecialties.
- lead evidence-based practice, clinical audits, and conduct research;
- deliver training for allied health professionals and other multidisciplinary team members in mental health specialty; and
- supervise staff.

Advanced Practice Occupational Therapist (Mental Health)

Two Tiers Cluster Services

- deliver specialized screening and triage service to patients with mental health conditions according to established protocol;
- deliver early symptom management programs and specialized interventions for patients with mental health problems;
- participate in evidence-based practice, clinical audits, and research;
- deliver training in mental health specialty; and
- Supervise staff

Role Enhancement

- New service model to meet the needs of the patients
- New service development in Mental Health.

Improved Patient Care

- Improved access to psychological interventions
- Coordinated care and better interface with primary care services.

CPM Competency Based Model

Workforce Development

- Advanced Specialty Training (9 modules in Mental Health in 2009 - 12)
- Enhanced / Basic Specialty Training (4 modules in Mental Health in 2009 - 12)

Quality of Service

- Clinical expertise through training and CQI
- Program development to meet new needs of patients (Mental Health Specialty Group of OTCOC)
- Evidence based practice



Management of Common Mental Disorders Program in HA



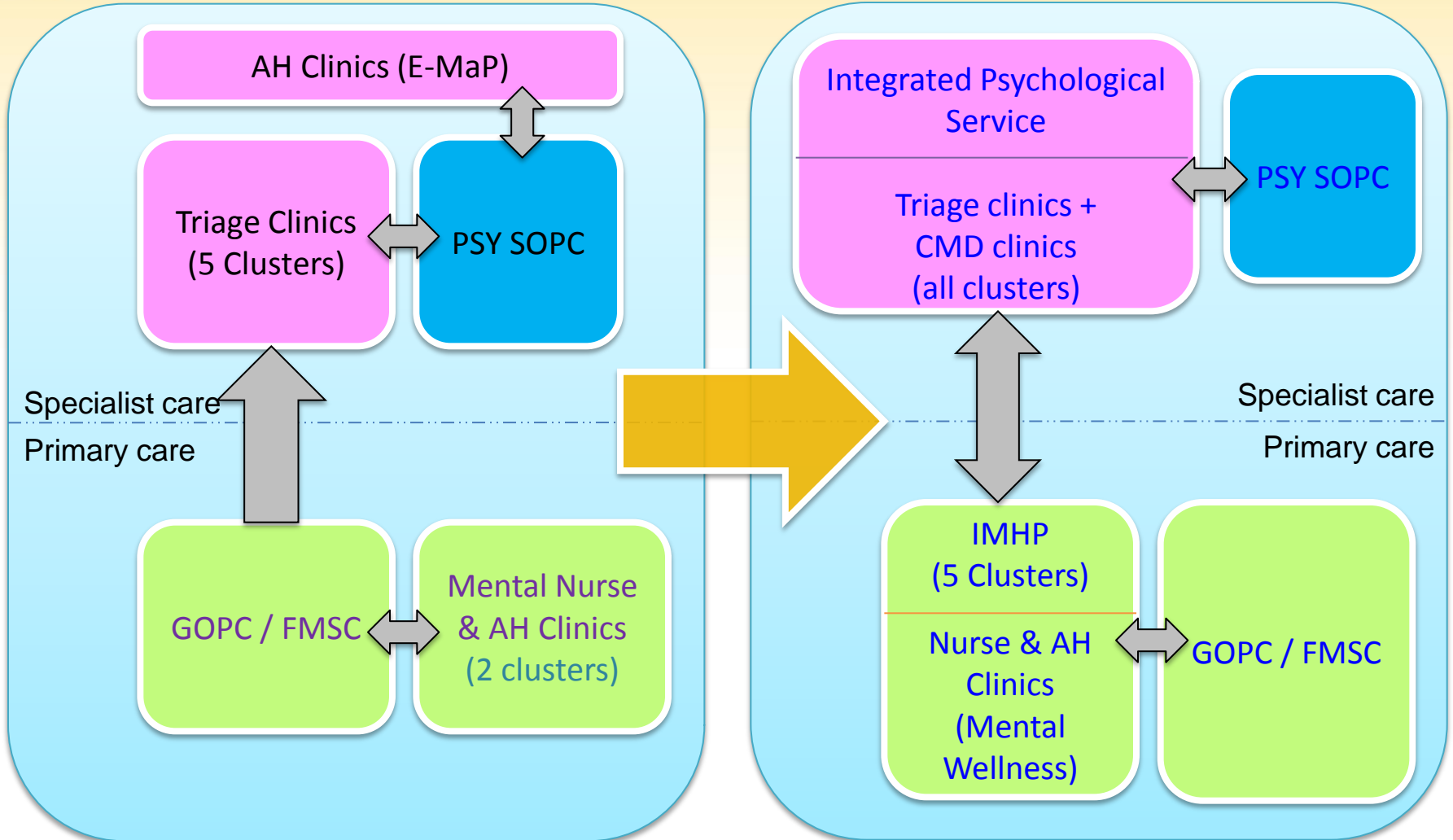
Pilot Programme for Occupational Therapist in Mental Health Service

- **Background:**
 - High prevalence of mood problems
 - Long waiting time to psychiatric service
 - Limited collaboration with primary care services
- **Early Symptom Management Program (E-MaP) (2008)**
 - Improve patients' accessibility to psychological interventions
 - Improve mental wellbeing, enhance self- management and prevent complications.
 - Facilitate interface and discharge to primary care services
- **Integration of the E-MaP program to Common Mental Disorders Clinic ⇨ Integrated Psychological Service (2010)**

Management of Common Mental Disorders in HA

2009/10

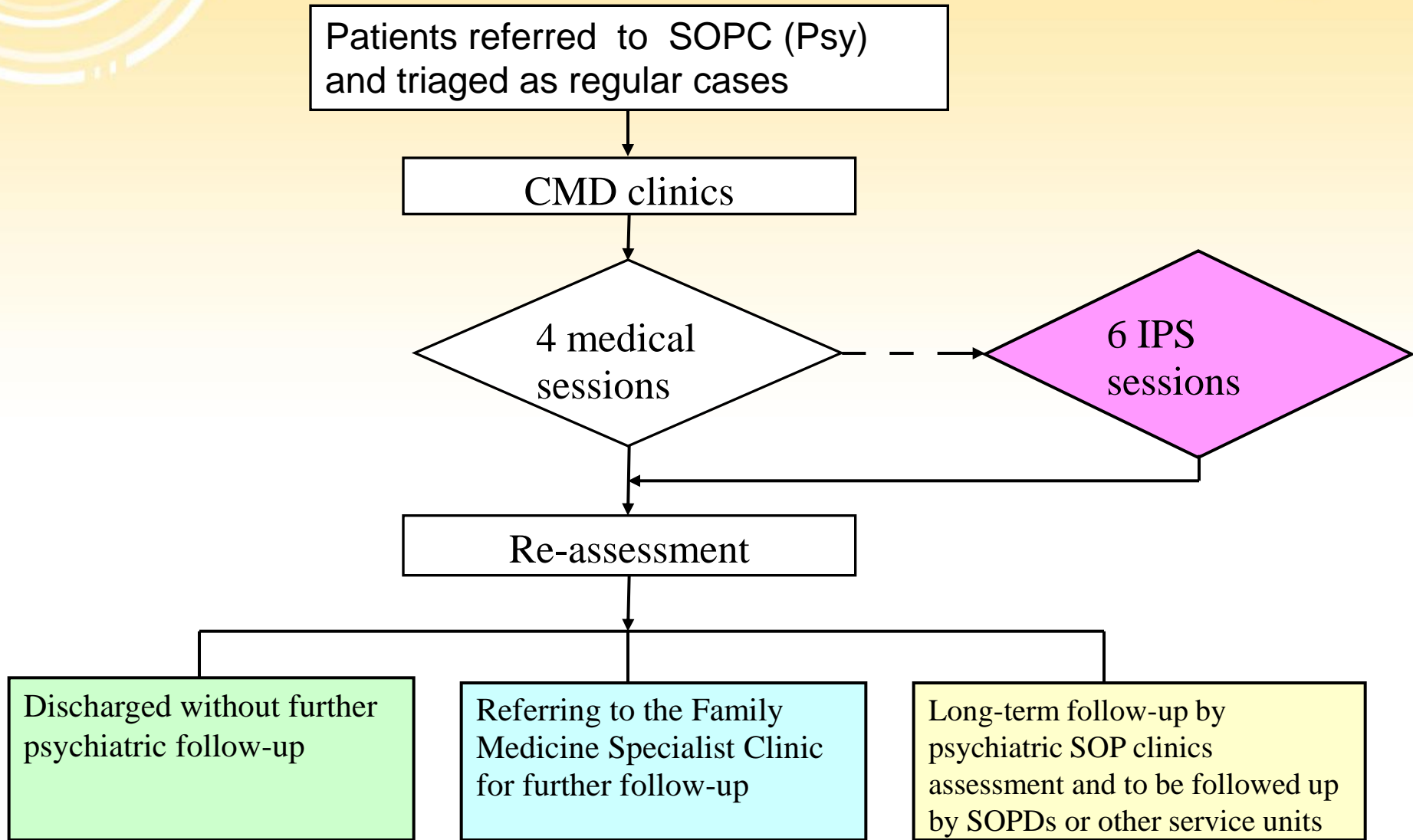
2010/11



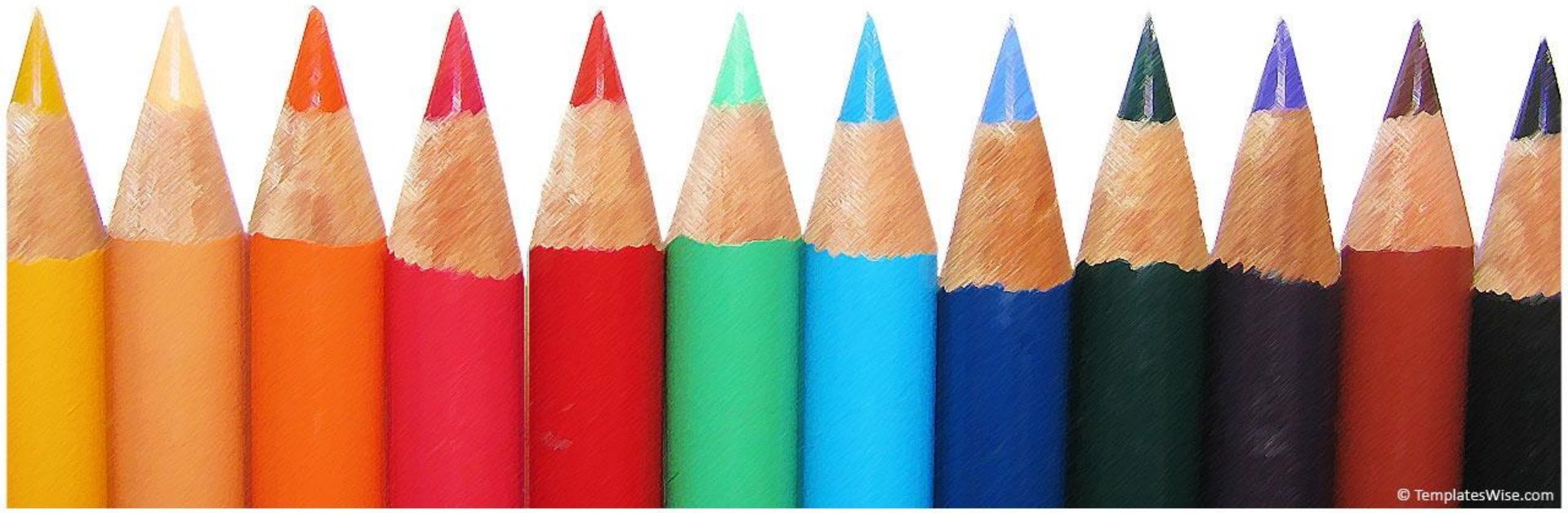
Common Mental Disorder Clinic

- Improve access to treatment and early intervention.
- Integrated Psychological Service by occupational therapists and clinical psychologists.
- Reduce risks of complication and deterioration of condition.
- Close collaboration with primary care service.

Service Flow



SERVICE IMPACT



Evaluation of Discharge Outcome

By PsyCOC
(2011)

Selected diagnostic groups (F32-51 including depression, GAD, adjustment, Insomnia etc) were selected as a cohort for further analysis (n=1847)

Mapped with CMDC
appointment booking from
1/10/2010 to 31/12/2010

1169 head-count (62%)
Still FU at CMDC

678 mapped with Psy SOPC
appointment booking
from 1/10/2010 to 31/12/2010

257 (38%) head-count
FU at Psy SOPC

421 mapped with IMHP/FMSC
appointment booking from
1/10/2010 to 31/12/2010

33 head-count (5%) with
appointment in IMHP

388 without FU /
PRN FU >3M

21%



Evaluation of Effectiveness

- A single group pre-test post-test model.
- 1167 patients received integrated psychological service by occupational therapist at AHNH, EKPC, KH, NDH, PYNEH, QMH, UCH & WKPC from 2011 to 2012.
- Outcome measures:
 - Depression Anxiety Stress Scale (DASS-21)
 - WHO – 5 Well-being Index
- Patient satisfaction survey



Demographic Data

N = 1167	
Male	340 (29.1%)
Female	827 (70.9%)
Mean Age	48.70
Ed. Level :	(missing data : 99)
No Formal Education	30 (2.6%)
Primary	261 (22.4%)
Secondary	629 (53.9%)
Tertiary	148 (12.7%)



Pre- Clinical Conditions

N = 1158 [DASS results]		
	Mean (SD)	Severity Ratings
Anxiety	16.31(± 10.00)	Severe
Stress	20.22(± 10.62)	Moderate
Depression	14.63(± 10.80)	Moderate

N = 1137 [WHO-5 wellbeing index results]		
	Mean (SD)	Item score = 0 or 1
WI-1 (cheer)	1.92 (± 1.20)	41.3%
WI-2 (calm)	1.99 (± 1.20)	39%
WI-3 (active)	1.58 (± 1.30)	50.8%
WI-4 (energy)	1.65 (± 1.32)	50.1%
WI-5 (interest)	1.72 (± 1.26)	45.5%

Outcome Analysis

DASS: N=858

WHO-5: N=835

	Paired Differences				t	Sig
	Mean	SD	95% CI			
			lower	Upper		
DASS - anxiety	7.22	9.07	6.61	7.83	23.30	.000
DASS - Stress	8.56	10.00	7.89	9.23	25.08	.000
DASS - depression	7.45	9.81	6.79	8.11	22.42	.000
WHO-5	-5.27	5.85	-5.67	-4.87	26.05	.000

Perceived Quality of Care

- 840 questionnaires from Patient Satisfaction Survey collected.
- **>92% had better understanding of their mental health**
- **> 86% subjectively felt improved - reduction of symptoms & healthier lifestyle.**
- **> 93% satisfied with the service.**

	SD	D	N	A	SA	NC	Missing
This service allows a better understanding of your mental health	3 (0.4%)	2 (0.2%)	45 (5.4%)	370 (44.0%)	407 (48.5%)	13 (1.5%)	0
This service can relieve your stress and reduce the emotional distress	2 (0.2%)	7 (0.8%)	72 (8.6%)	364 (43.3%)	385 (45.8%)	9 (1.1%)	1 (0.1%)
This service can help you to start a healthy lifestyle	3 (0.4%)	4 (0.5%)	73 (8.7%)	404 (48.1%)	340 (40.5%)	15 (1.8%)	1 (0.1%)
Overall, this service can greatly improve your mental health condition	4 (0.5%)	7 (0.8%)	92 (11.0%)	360 (42.9%)	363 (43.2%)	13 (1.5%)	1 (0.1%)
	VD	D^	N	S	VS	NC	
Overall, your degree of satisfaction towards this service	3 (0.4%)	3 (0.4%)	37 (4.4%)	334 (39.7%)	452 (53.8%)	7 (0.8%)	4 (0.5%)

Key : SD - Strongly Disagree; D – Disagree; A – Agree; SA - Strongly Agree;
 VD - Very Dissatisfied; D^ - Dissatisfied; S – Satisfied; VS - Very Satisfied;
 N – Neutral; NC - No Comment

Benefits

To Patients:

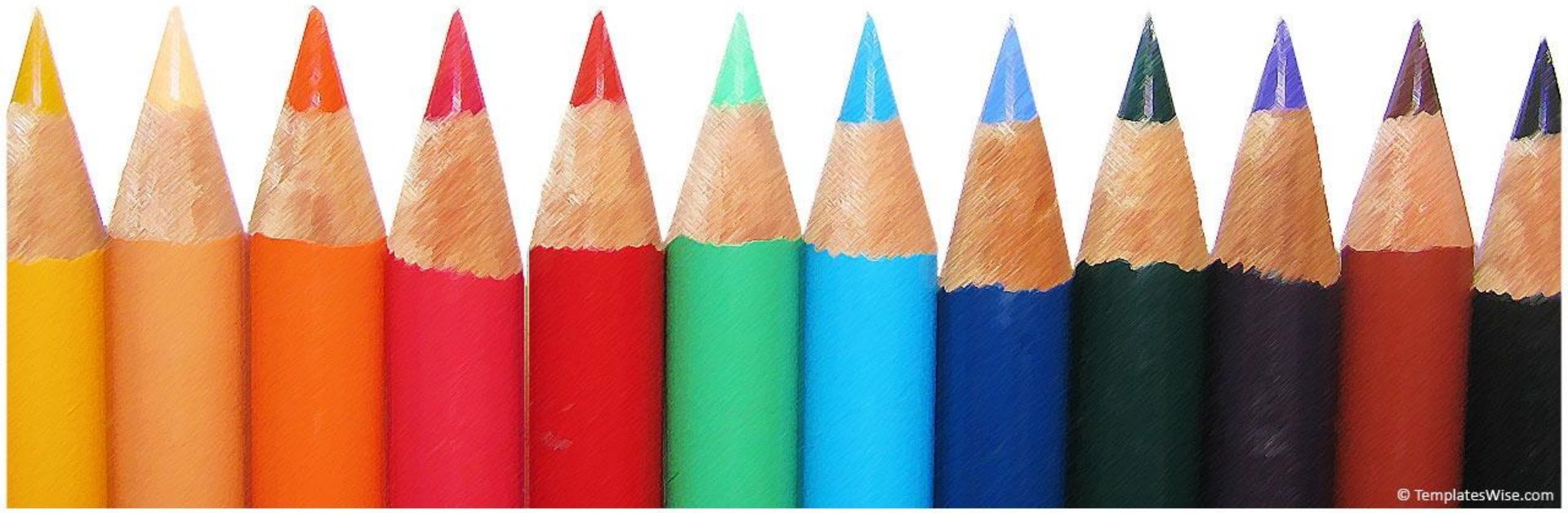
- Early intervention and reduce risk of complications and deterioration
- Healthier lifestyle and improved quality of life.

To Organisation:

- Coordinated care to meet needs of patients through collaboration with primary care services
- Improved access to psychological interventions.



Further Enhancement





Development in OT Mental Health Programs

- Recovery Support Program, Personalised Care Program, Early Assessment Service for Youth and Dementia Care.

Developing Programs

- Wellbeing Enhancement programs, Consumer Participation Projects
- Cognitive Rehabilitation for SMI

New Focus in Programs

- Management of Psychosomatic Pain and Chronic Pain
- Community collaboration program for patients with substance abuse

Challenges

- Improved access to psychological interventions largely limited to new patients with appointment at CMDC. Equity for patients at SOPC and primary care services is indicated.
- Further workforce development for clinical expertise and quality care.
- Organizational support and facilitation to establish **Specialized OTs in subspecialty areas:**
 - advanced skills and new models were put into practice to cater for the increasing needs and new demand of HA service





Way Forward

- Paradigm shift in service delivery model new needs of patients.
- Role extension and multiskilling to address the changing health needs and improve patient care.
- With organizational support and facilitation, role enhancement of OT in broader ways to meet the growing service needs with the aging population and chronic diseases.

Thank you for the contribution of
the APOTs working in the 7 CMDCs'
Integrated Psychological Services

