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Application of Stepped-care Model on Psychosocial Services for Palliative Care Patients and Caregivers in Hong Kong

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Introduction

Patients suffering from terminal stage of cancer and their carers often experience decreased quality of life, reduced daily functioning and mental health problems. Prevalence of major depressive disorder among cancer patients is estimated to be approximately 11%, compared to 5-6% in the general population (Ng, C.G., et al., 2011; Massie, M.J., 2004). Among various gaps in psychosocial care, a 2007 report from the Institute of Medicine noted low rates of recognition and treatment for depression. In view of this, the Enhanced Psychosocial Services (EPS) program was developed for palliative care patients and their carers, based on the stepped-care model. It aimed to enhance access for psychosocial services as well as service appropriateness for patients/carers having different levels of need.

Objectives

To evaluate the EPS program ran in Caritas Medical Centre and Our Lady of Maryknoll Hospital on several aspects, including its alignment with the stepped-care model, appropriateness of services provided, service coverage, service outcome, and clients' satisfaction.

Methodology

Levels of service provided, service coverage, service outcome, and clients' satisfaction before the EPS program (i.e. April 2010 to August 2012) were compared with those after the application of the EPS program (i.e. September 2012 to June 2015). Patient admission data was drawn from Clinical Data Analysis and Reporting System (CDARS) to help estimate the service coverage rate. Treatment outcomes and client satisfaction were measured by Psychological Wellbeing Scale (PWS), Geriatric Depression Scale, Hospital Anxiety and Depression Scale, and Client Satisfaction Survey. Data analysis was done using Statistical Package for the Social Sciences (SPSS).

Result

The levels of service provided in the EPS program was found largely aligned with the stepped-care model, from 59% of the patients received step 1 service to 2% received step 4 services. Service coverage also increased from 19% to 65% after the EPS program. After the EPS program, patients indicated having significantly less distress ($p=.003$). While carers were found having increased sense of social support ($p=.005$), life meaning ($p=.011$), and reduced sense of carer inadequacy ($p=.000$) as measured by PWS. Besides, carers also indicated having significantly less anxiety ($p=.000$) and depression ($p=.000$) after the EPS program. The details of the data, the changes made after the EPS program, as well as the limitation of the current study would be discussed.