

Service Priorities and Programmes

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The Impact of the Clubhouse Model on Service Enhancement of a Psychiatric Day Hospital

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Introduction

Psychiatric Day Hospital (PDH) was first established to provide transition between in-patient and out-patient care especially for those patients with severe mental illness and high relapse risk. The PDH in the 1990s has been challenged to be just targeted on shortening admission and symptom control but the functional improvement of the patients were not sustainable after discharge. In 1998, the HKWC adopted the Clubhouse Model to enhance the treatment effect especially on psychosocial rehabilitation. The cost effectiveness of this Clubhouse Model has been supported by international researches.

Objectives

To investigate the impact of the Clubhouse Model in terms of resources, service coverage, functions and employment outcomes in Hong Kong.

Methodology

Retrospective review on the 1. resource implication of the service, 2. PDH occupancy rate and follow up attendance, 3. employment outcomes, 4. and other add on service functions

Result

The Phoenix Clubhouse (PC) was established in HKWC since 1998 following the Clubhouse International Clubhouse Model. It has gone through 6 accreditations from the certifying organization. Compared to the traditional PDH, there was no implication in additional resources required. Moreover, there is 16% increase of the total attendance (from 10309 to 12023 per year) and 23.51% increase of the occupancy rate (from 64.49% to 88.0%) which reflected the popularity and acceptability of the new service. The PC also engaged the discharged day-patients to continue to be its members. Unlike traditional PDH, which only provides stabilization treatment but with no or very limited employment rehabilitation, the PC provided tremendous employment programs. In December, 2015, among 150 active members, there were

10 members in Group Placement (GP), 12 in Transitional Employment (TE), 27 in Supported Employment (TE) and 74 in Independent Employment (IE). These programs significantly helped patients to find and maintain jobs in the community. Their average hourly wages were TE (\$50), SE (\$46) and IE (\$41). Moreover, the PC has value added functions like education support; non-work hour social programs and tremendous advocacy work to reduce the stigma on people with mental illness. It also attracts passionate peers, carers, volunteers and employers to extend its resources and circle of influence in the community.