



Service Priorities and Programmes Electronic Presentations

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Submitting author: Dr W C AU

Post title: Senior Occupational Therapist, United Christian Hospital, KEC

A 3-year transformative experience of Recovery Oriented Practices in a psychiatric unit of a general hospital

Raymond AU(1), Helen SEZTO(1), Yuen-ting WAN(2), Pui-fai PANG(2), Ka-lok TAM(2), Hing-ling TSANG(2), Maurice WAN(1)

(1) Occupational Therapy Department, United Christian Hospital (2) Department of Psychiatry, United Christian Hospital

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Introduction

Although the recovery concept is of paramount importance in the mental health field, it is not easy to migrate from traditional service model to the new one. Experiences in the western countries told us that it takes many years to build.

Objectives

To progressively revamp the psychiatric services and set up the recovery oriented practices in a general hospital.

Methodology

The transformation into ROP in the United Christian Hospital is taken progressively, with one theme each year. Here we have the implementation and realization of the ROP in the past three years: (1) In 2013, the theme was recovering ordinary life (重拾自我) with the introduction of patients and relatives in clinical case conferences, users-lead activities, and joint programs between UCH and YFS day hospitals for normalizing living experience in the community; (2) In 2014, the theme became reclaiming hope in recovery (燃點希望), with the addition of users' recovery journal (underscoring the importance of setting recovery goals and taking own responsibilities in the recovery journey) and the in-patient enhancement program (emphasizing goals setting, stress and health management, and community resources); (3) In 2015, the theme was peer support in recovery (並肩同行), with the establishment of modular programs (highlighting the four domains of recovery namely clinical, functional, social, and personal), the recovery discharge support program, and the YoU Club (enhancing service users to participate in organizing their own activities and offering opinions to the service provider).

Result

We used two outcome measures, the Patients' Satisfaction Survey (PSS) and the Recovery Self Assessment (RSA), to evaluate the progress of the transformation. The

PSS has all items scores above 4 on a five-point Likert scale (with 1 meaning extremely dissatisfied and 5 meaning extremely satisfied). The RSA has all items scores above 3 on a five-point Likert scale (with 1 the lowest and 5 the highest scores). The results affirm the effort in the past three years. Nevertheless, there are still works ahead and the yearly thematic approach seems feasible to progressively build up the ROP in psychiatric services. An example in the 2016 is the recovery into community (醫社共翩復元路).