
CONFERENCE ABSTRACT

Exploring the gap between community mental health care and intermediate specialized psychiatric units in clinical care pathways

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Eva Walderhaug Sather

Norwegian University of Science and technology, Norway

An introduction: Patients with mental health problems experience numerous transitions into and out of hospital. Evidence shows that patients with mental health concerns often present to primary care, but that primary care providers have mixed success in identifying and managing these concerns on their own. Because patients have a variety of preferences and barriers associated with mental health treatment, this situation suggests the need for easy access to a range of treatments and providers.

Mental health services have patients with different needs and different (path) ways through the health services. There is no standard solution to fit everyone because every person has individual needs. However, many persons with mental problems will have need of services from different levels at the same time.

This study examines scope and limitations of clinical pathways to monitor patient-care management of a selected patient group during a specified time period.

There is a growing interest in extending care pathways to primary care and psychiatric services. However, evidence is sparse about the relationship between care pathways and coordination of service delivery. Some published research addresses pathways of care in psychiatry but hardly any studies have been carried out on clinical pathways between services.

A newer study explored the change before and after implementation of clinical pathways in patients with schizophrenia. Surprisingly they found that patients reported less treatment satisfaction after the implementation of care pathways compared with before implementation. They offered no explanation for their findings. A recent study in a Belgian acute care hospital on acute healthcare teams found that care pathways are effective interventions for enhancing teamwork, elevating the organizational level of care processes, and reducing the risk of burnout for healthcare teams in acute care hospital settings. From care pathways, high-performance teams can be built.

The Coordination Reform in Norway emphasized a new role for communities in the future and discussed tasks that communities should be responsible for carrying out. In the coordinated health and care policy, communities are tasked with fulfilling the aims of prevention and early intervention while addressing the needs of patients with chronic diseases. A main element of

the reform was the commitment to ensuring that patients receive the most effective healthcare services possible through cohesive, integrated patient pathways.

The goals of clinical pathways are to achieve optimal efficiency and improve the quality of care. The implementation of changes to how clinical pathways are organized in mental health care has received a great deal of attention in the past few years, but the effects of the various changes are in need of more investigation. At present, there is still a dearth of information on the effectiveness of implementing care pathways in mental health. Thus, this study endeavors to contribute to this area of research by exploring health personnel's understanding of and experience with the gaps in clinical pathways between district psychiatric hospital centers (DPHCs) and community mental health services

Objectives: a) Identify factors that may obstruct the intended clinical plan as devised by psychiatric hospital centres for implementation by community services and; b) Identify strategies which support effective delivery of quality care.

Methods: A qualitative design with a descriptive approach was chosen in an attempt to uncover factors deserving attention in clinical pathway among patients with mental problems. Three focus group interviews with a total of seven informants from five different communities were conducted.

Result and Conclusions: for the article will be published on the conference since it send into BMC Journal of Psychiatry for approval.

Keywords: psychiatry; community mental health care; district psychiatric hospital centre; clinical care pathways; patients
