

Community Psychogeriatric Services in Hong Kong East Cluster - Elderly Suicide Prevention Program (ESPP)

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Introduction

In October 2002, Psychogeriatric Team Outreaching Services developed a program on "Prevention of Elderly Suicide (ESPP)", the program design is focused on prevention, early detection and to provide timely professional assessments and interventions on a home basis that combines the assessment of risk factors, formulation and risk management.

Purpose of the Project

1. Fast assessment and management and crisis intervention.
2. Access enhancement to Mental Health Services from community gate-keeper.
3. Close monitoring of at risk cases in community by Suicide Prevention Nurse (SPN).
4. Providing educational program to help professionals in detection of depression in elderly clients.

Material & Methods

- This program can be delivered using a clinical case management approach through a multidisciplinary team of mental health professional.
- The SPN would phone follow-up those clients within two days after case acceptance and a home visit within 7 working days to provide comprehensive assessment of client on social and mental condition, physical health, activities of daily living and functional impairment.
- Refer and link clients to Fast Track Clinic (FTC).
- Peer review and the formulation of individual care plans will be conducted regularly.

Results (From Oct 2002 to Dec 2007)

- About 350 at risk client reach ESPP since 10/02.
- FTC served 205 clients.
- Community educational activities.
- Mean waiting time for nurse's initial assessment: 3 working days.
- Clients depressive symptoms and suicidal ideas could be improved in half-year follow-up.

Conclusions

The territory-wide and local educational activities / materials for staff of elderly services (of government or voluntary agencies) were enhanced knowledge on elderly and skills in relating with them, and to refer real at risk elderly for assessment.

However, on-site assessment and close liaison with other care providers can ensure maximal coverage to client and establishing a supportive network among the high-risk elderly in the period of ESPP.