

Primary Health Care – Together we provide

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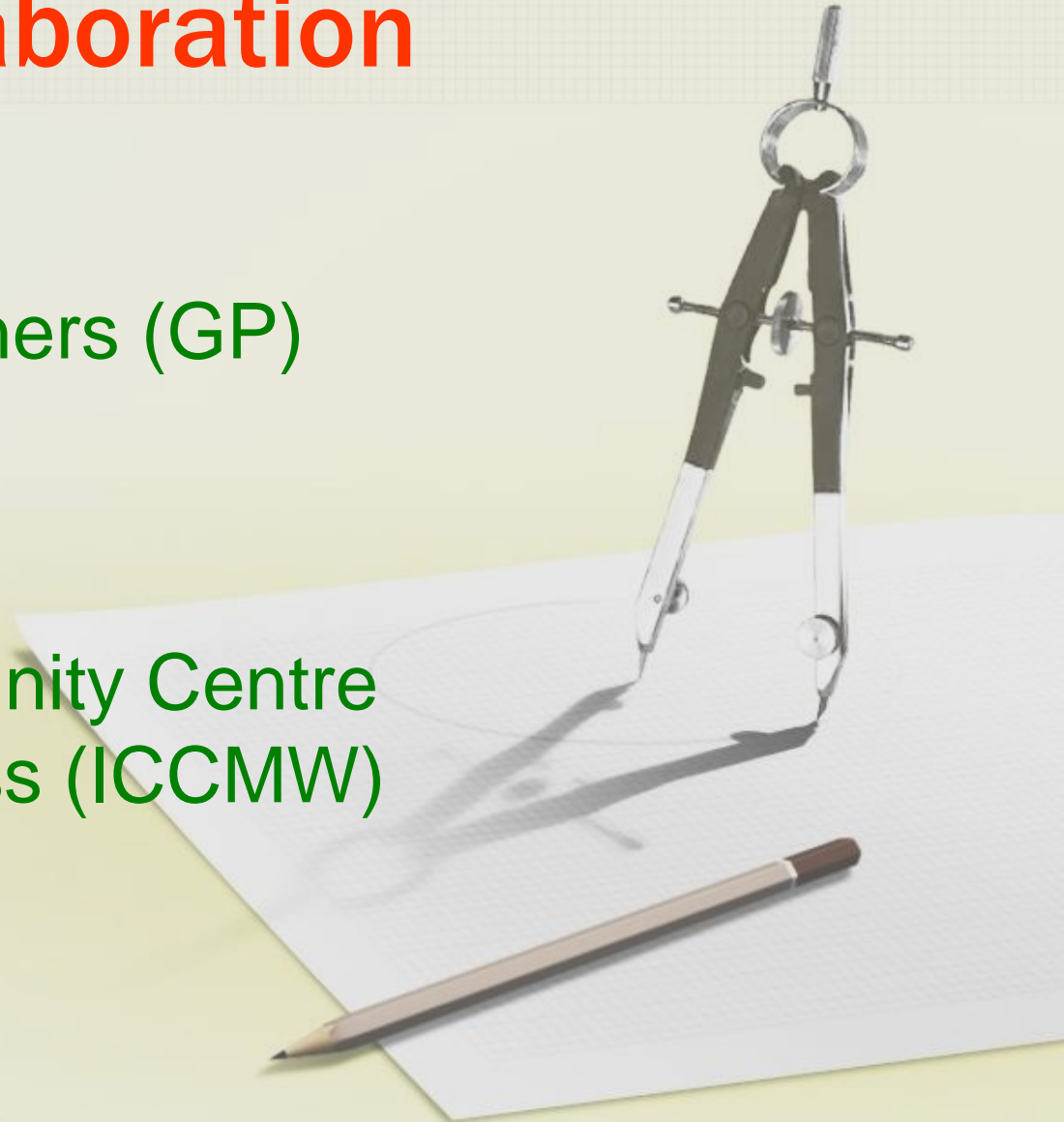


Collaboration

General Practitioners (GP)

and

Integrated Community Centre
for Mental Wellness (ICCMW)



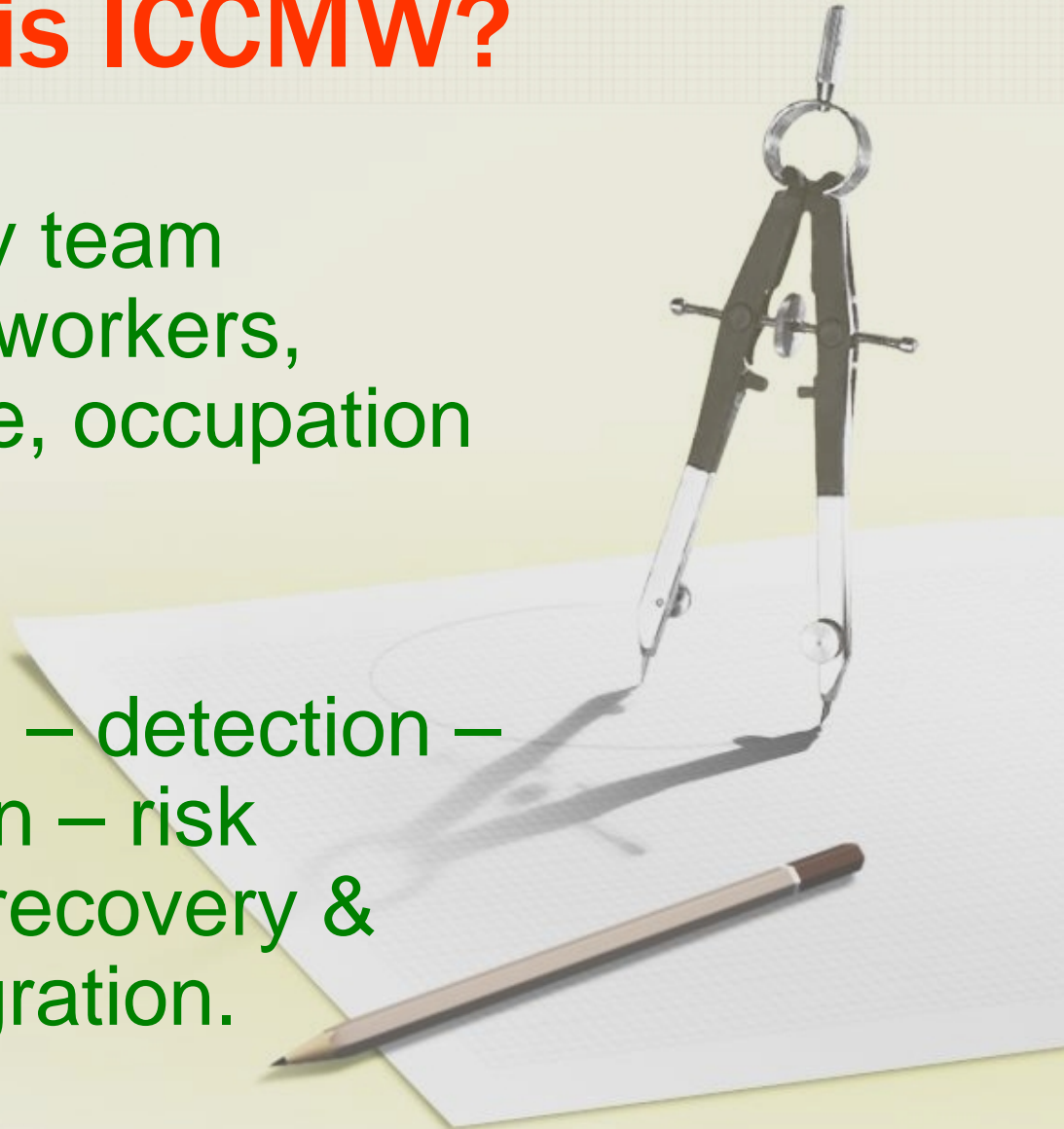
What is ICCMW?

- ▶ Started on 1 Oct, 2010
- ▶ One-stop, district-based, accessible community support
- ▶ Target :
 - Discharged mental patients,
 - Persons with suspected mental health problems
 - Their families
 - Residents living in the serving district



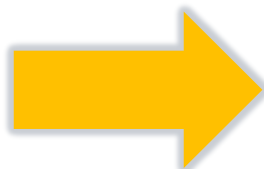
What is ICCMW?

- ▶ Multi-disciplinary team including social workers, psychiatric nurse, occupation therapist.
- ▶ Service range:
Early prevention – detection – early intervention – risk management – recovery & community integration.

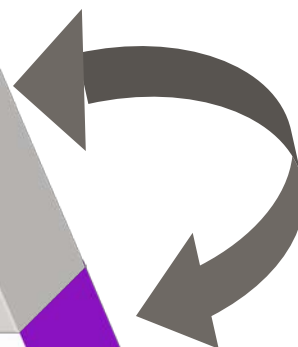


3-Tier service of ICCMW- BOKSS

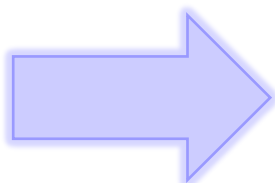
精神病疑似個案
剛離院病人
初次發病
多次病發
拒絕治療
缺乏社區支援(如獨居)



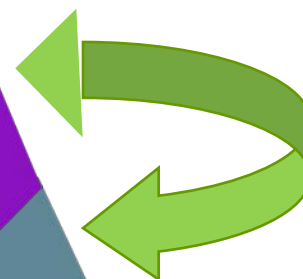
評估/
外展/家訪/輔導
協助求診/轉介



小組治療
職業治療
社區支援網絡
持續學習及發展



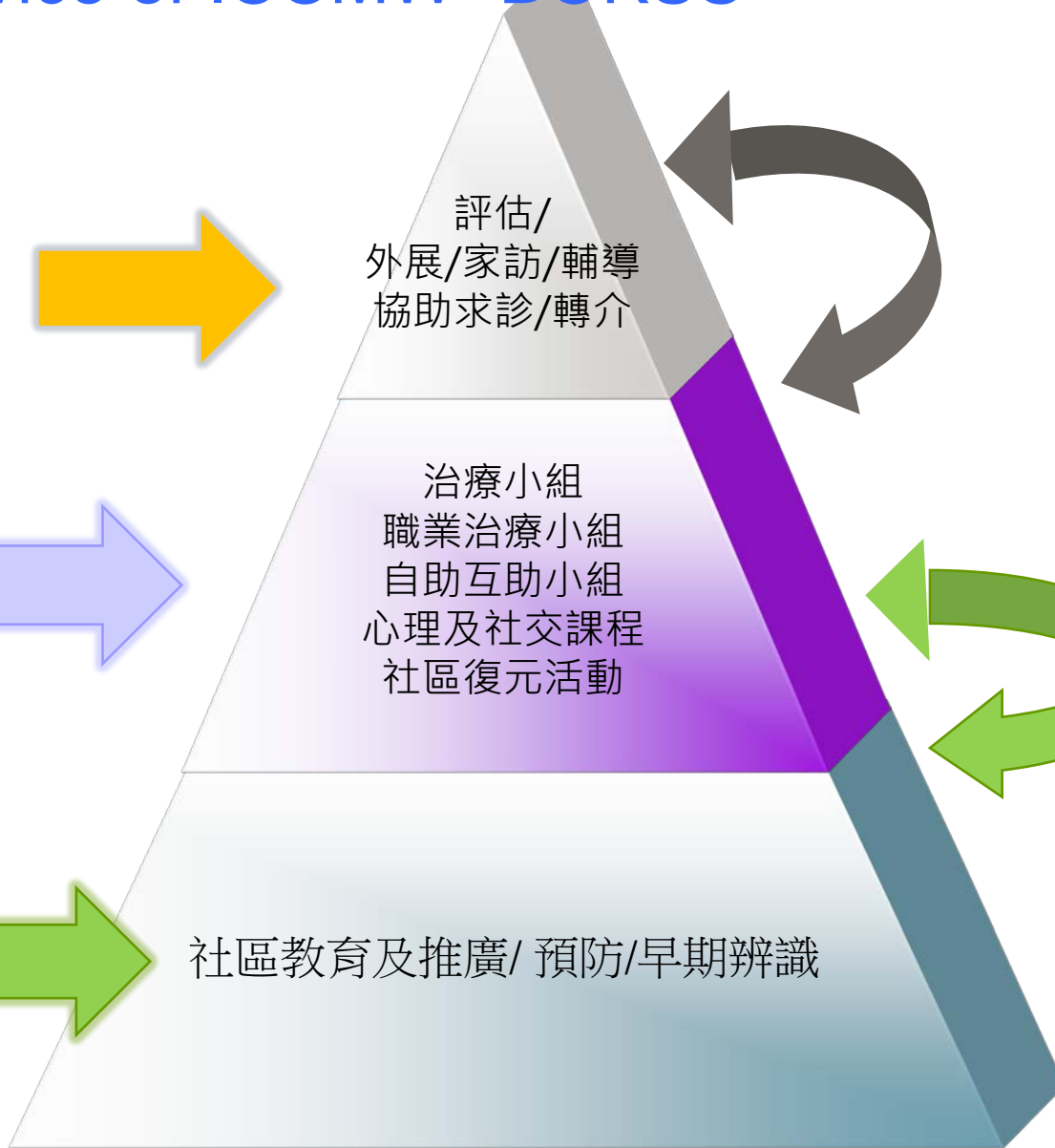
治療小組
職業治療小組
自助互助小組
心理及社交課程
社區復元活動



社區教育講座/展覽
精神健康資源中心
精神健康諮詢熱線
網頁/刊物
社區共融活動

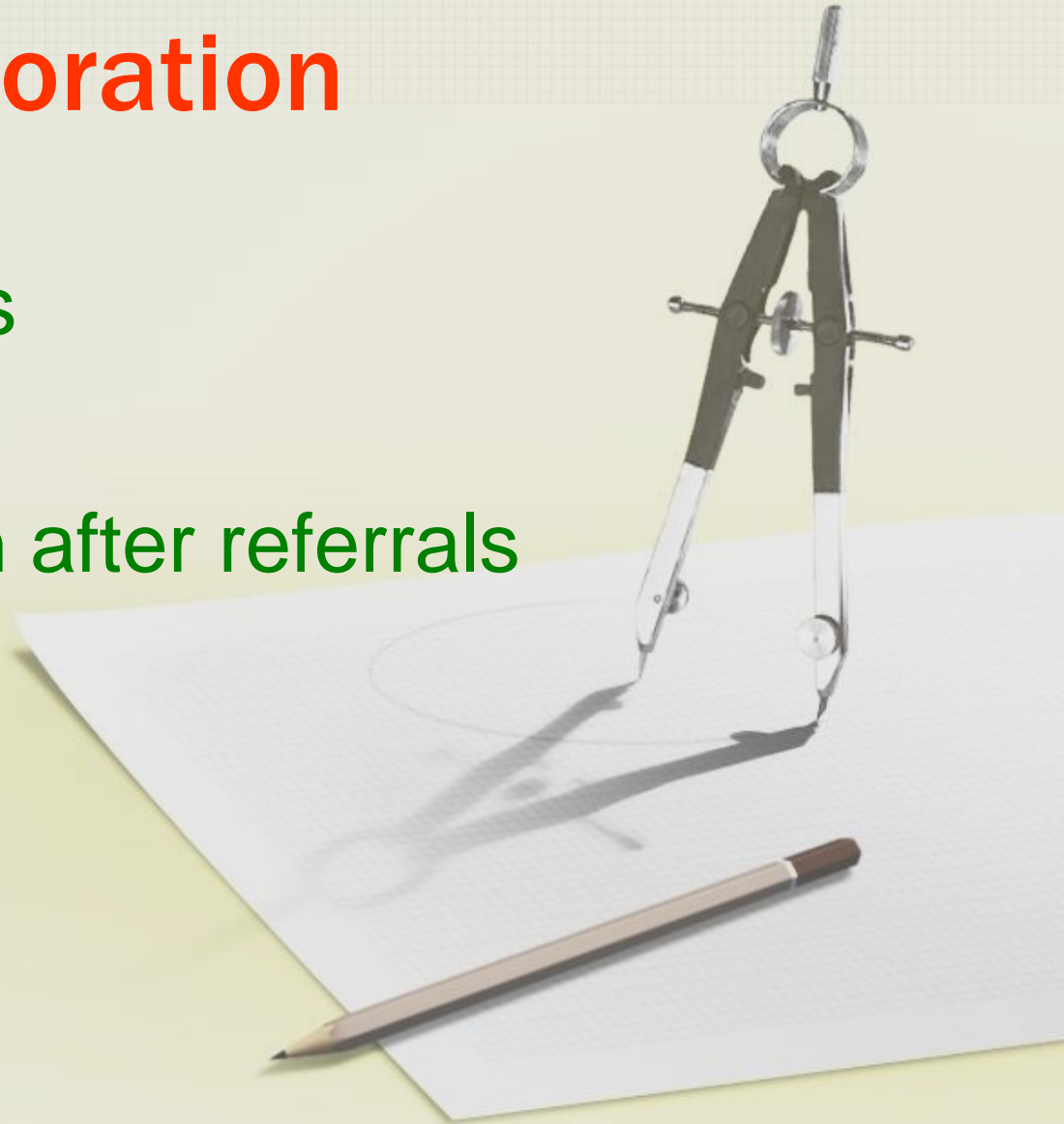


社區教育及推廣/ 預防/早期辨識



Current collaboration

1. Mutual referrals
2. Communication after referrals made



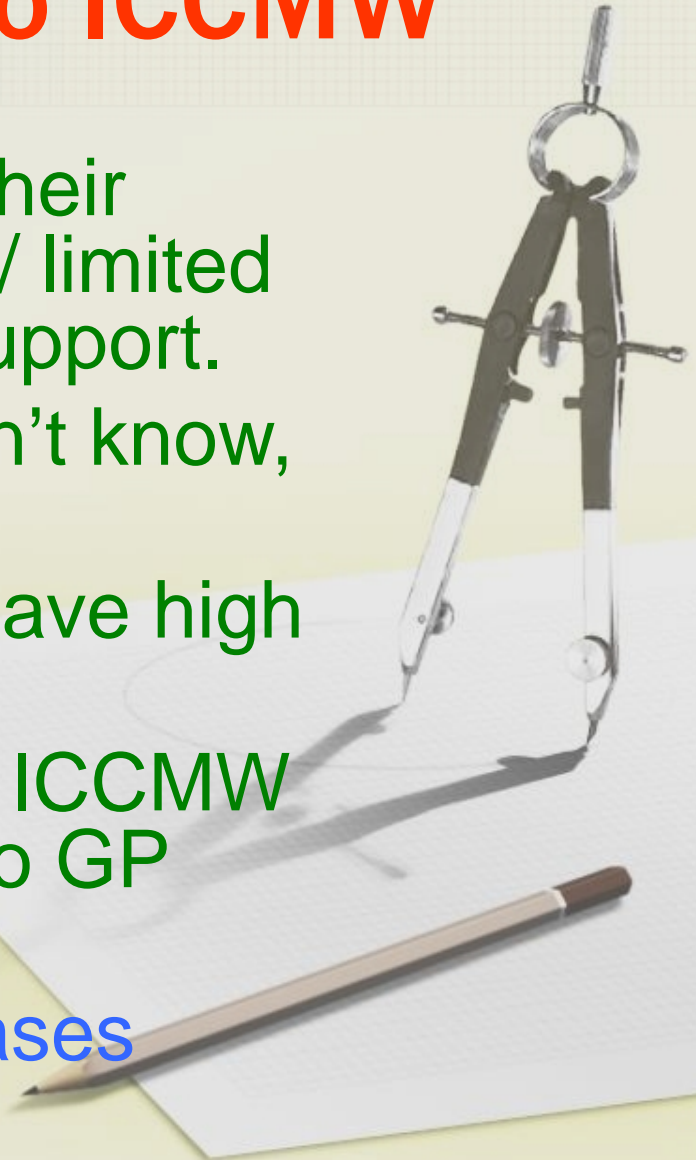
Role of General Practitioner

- ▶ 1st point of contact with client
- ▶ Easy assessable
- ▶ Physical, Psychological, Social and Family issues
- ▶ No Stigmatization
- ▶ Referral Hub (between Private, HA, NGO)
- ▶ Electronic Health Record
- ▶ Timely intervention



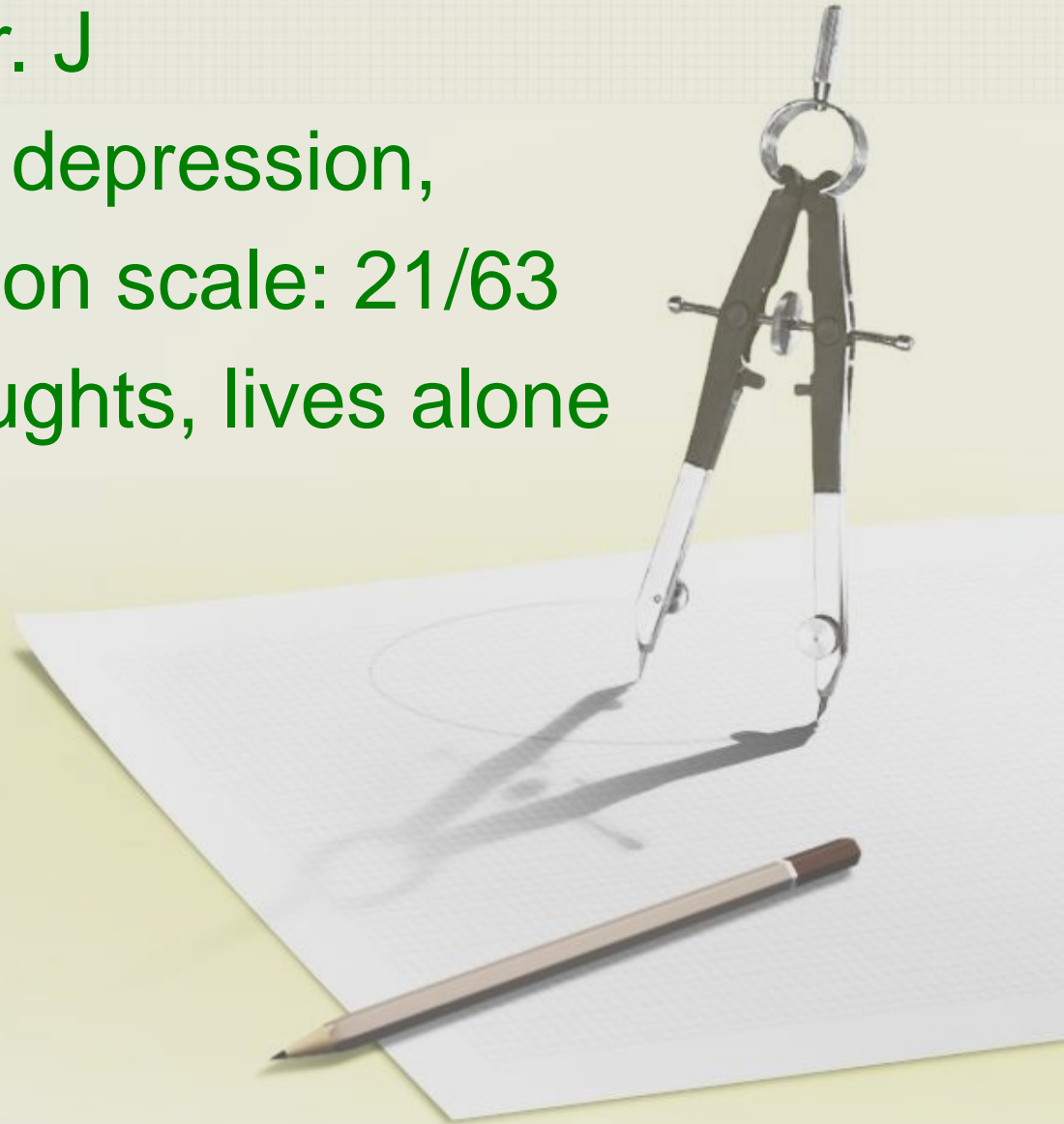
Referrals from GP to ICCMW

- Persons with MI (and their relatives) who have no/ limited community recovery support.
- Different reasons – don't know, refused, not familiar....
- Persons with MI who have high risk due to MH issues.
- Prompt & convenient - ICCMW worker may outreach to GP clinic for initial contact.
- Statistic : around 14 cases



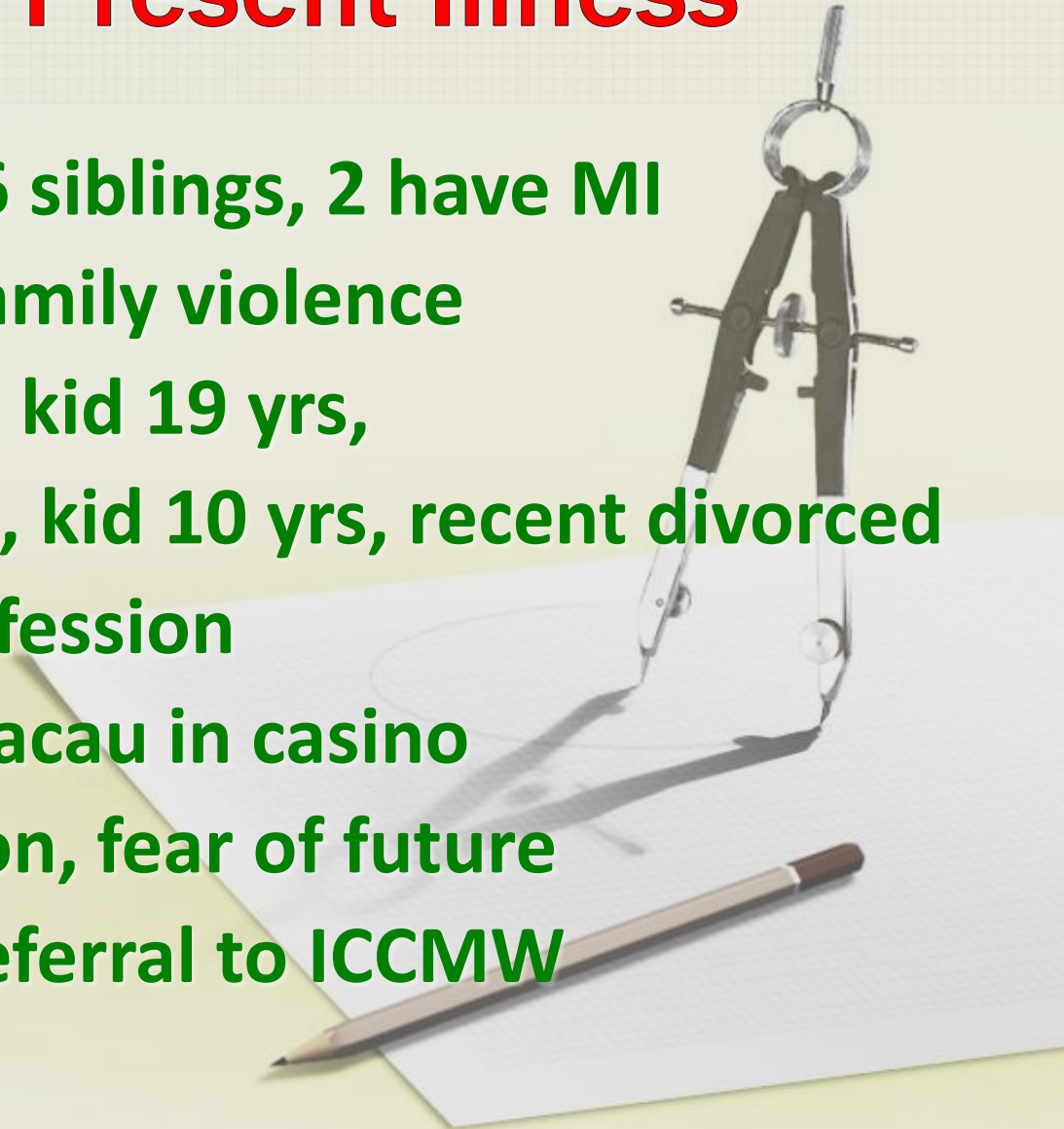
Case example: Mr. J

- M/49, divorced, depression,
- Beck's depression scale: 21/63
- Pessimistic thoughts, lives alone



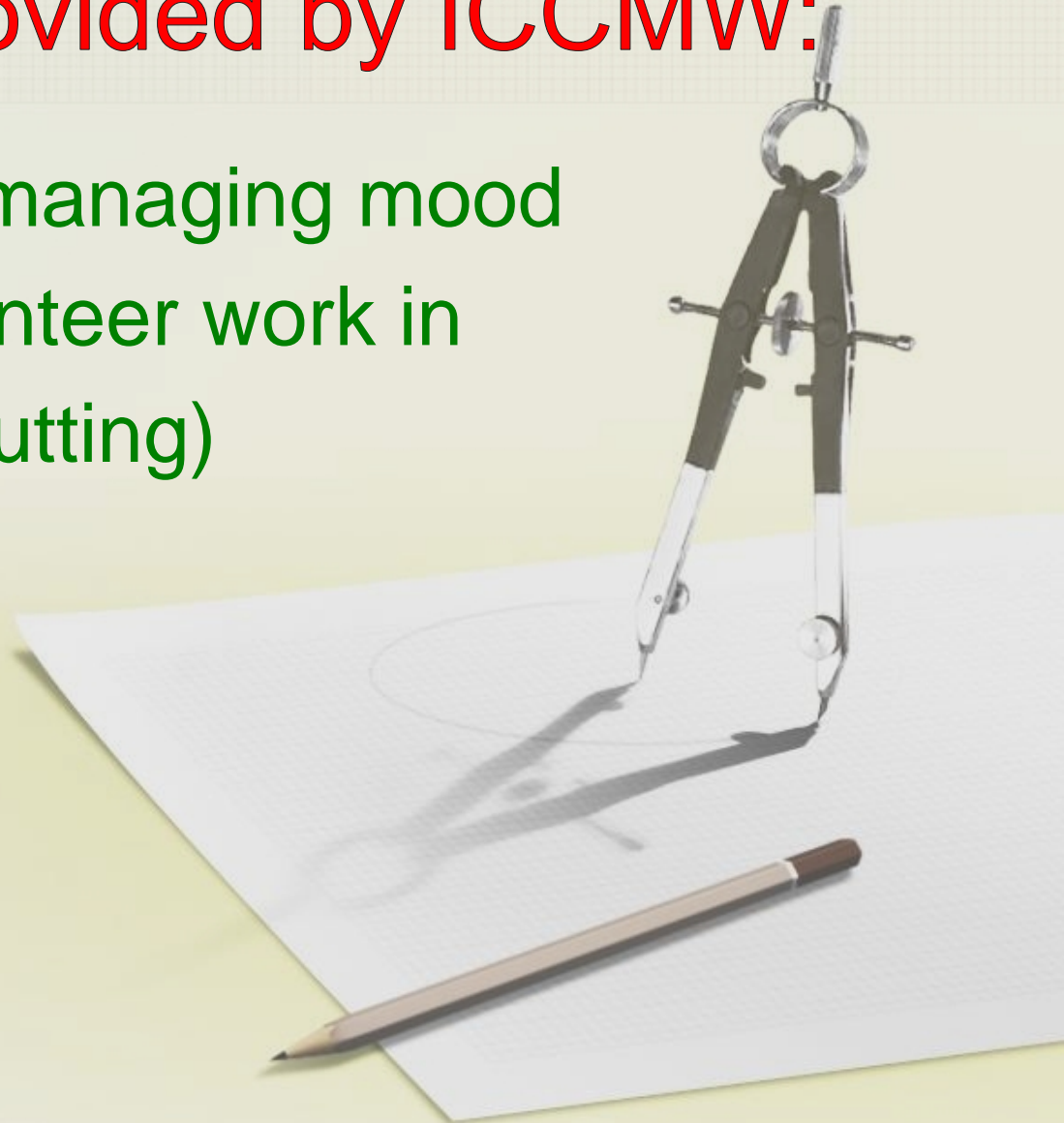
History of Present Illness

- ▶ Youngest among 6 siblings, 2 have MI
- ▶ Childhood hx of family violence
- ▶ 1st marriage 1998, kid 19 yrs,
- ▶ 2nd marriage 2002, kid 10 yrs, recent divorced
- ▶ Hair Stylist by profession
- ▶ Recent work in Macau in casino
- ▶ Anxiety, depression, fear of future
- ▶ Medication and referral to ICCMW



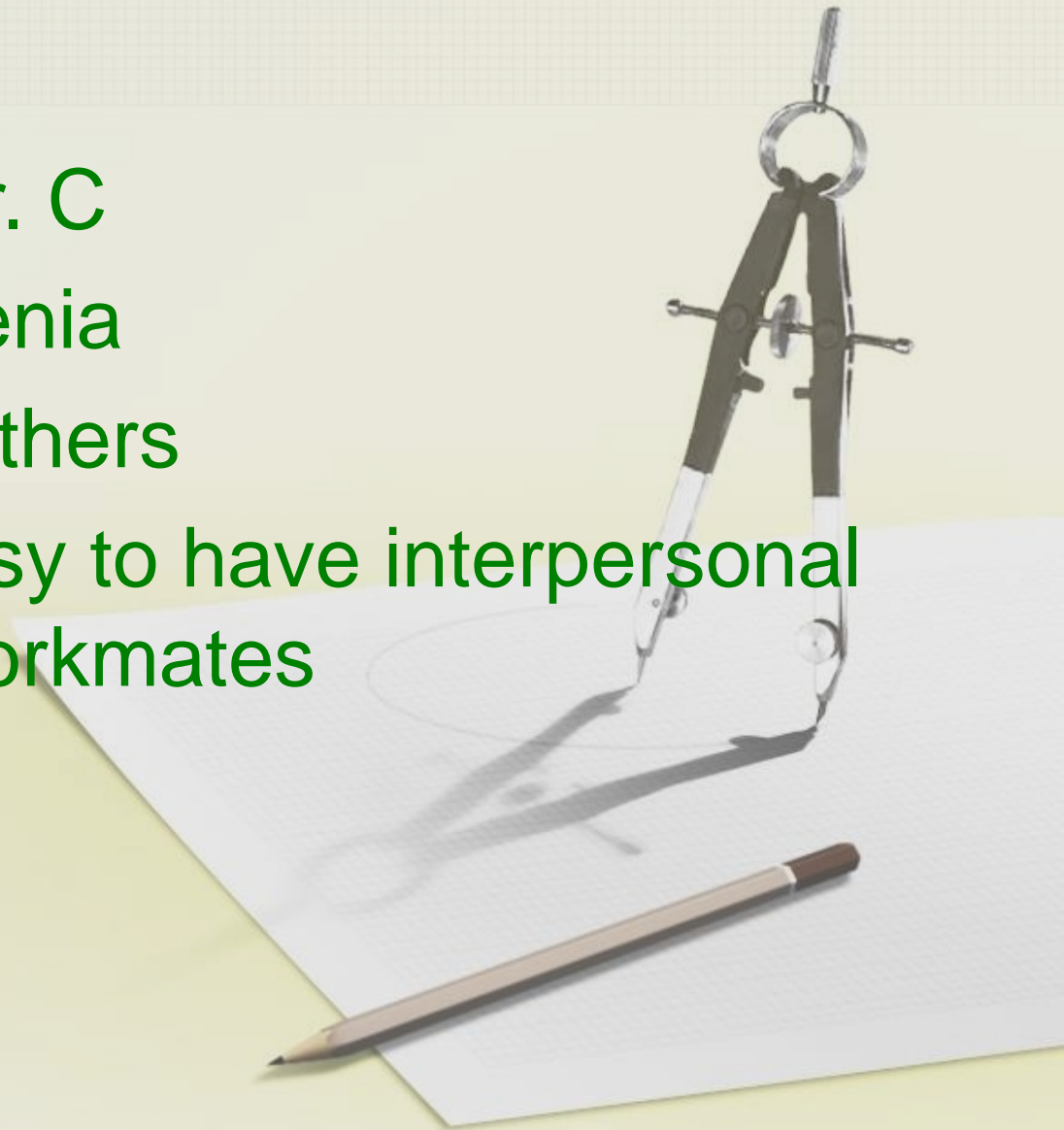
Services provided by ICCMW:

- Counseling on managing mood
- Involved in volunteer work in ICCMW (Hair cutting)



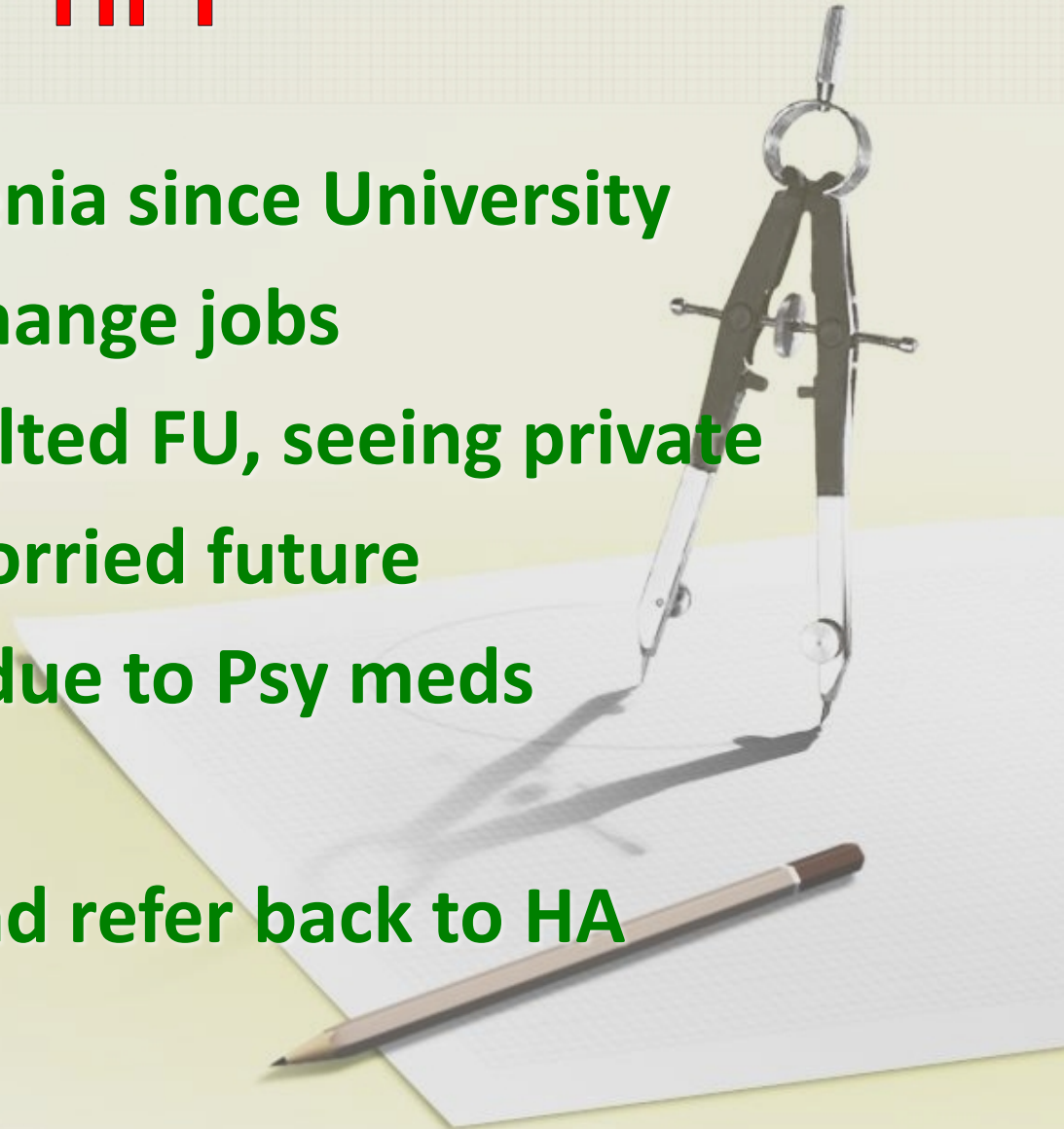
Case example: Mr. C

- M/41, schizophrenia
- Difficult to trust others
- Unemployed, easy to have interpersonal problems with workmates



HPI

- ▶ Single, Schizophrenia since University
- ▶ IT job, frequent change jobs
- ▶ Seen at HA, defaulted FU, seeing private
- ▶ Recent laid off, worried future
- ▶ Financial burden due to Psy meds
- ▶ Refer ICCMW
- ▶ Continue meds and refer back to HA



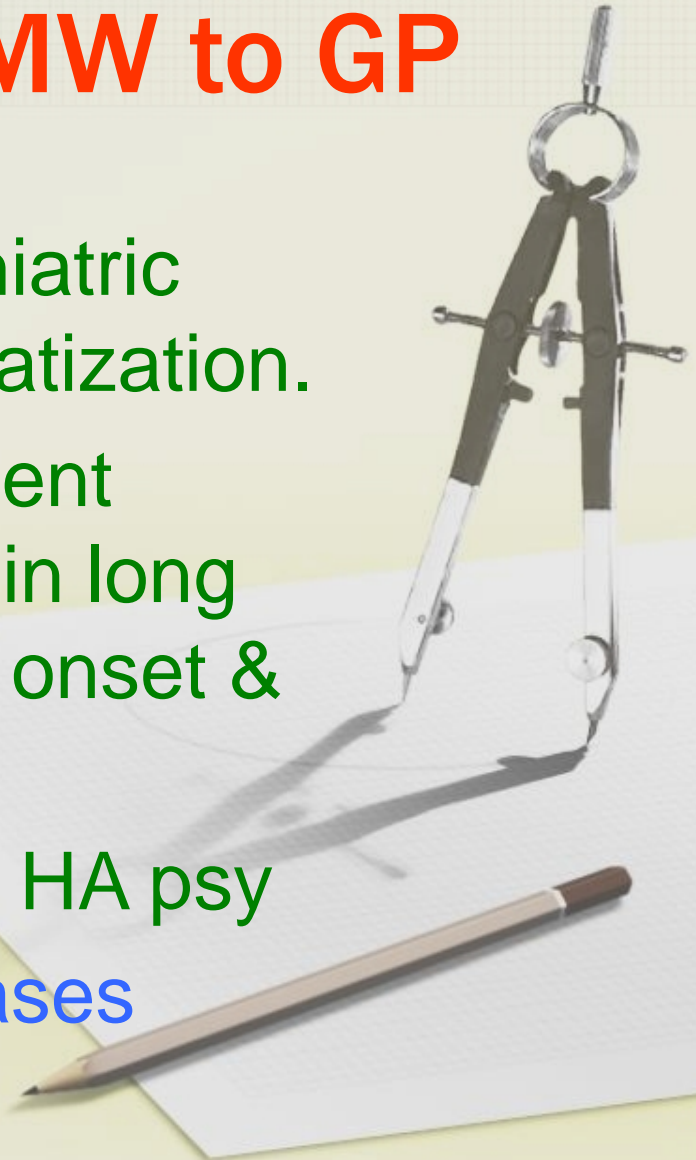
Service provided by ICCMW:

- Counseling to enhance self-understanding, & interpersonal issues
- Support of job seeking



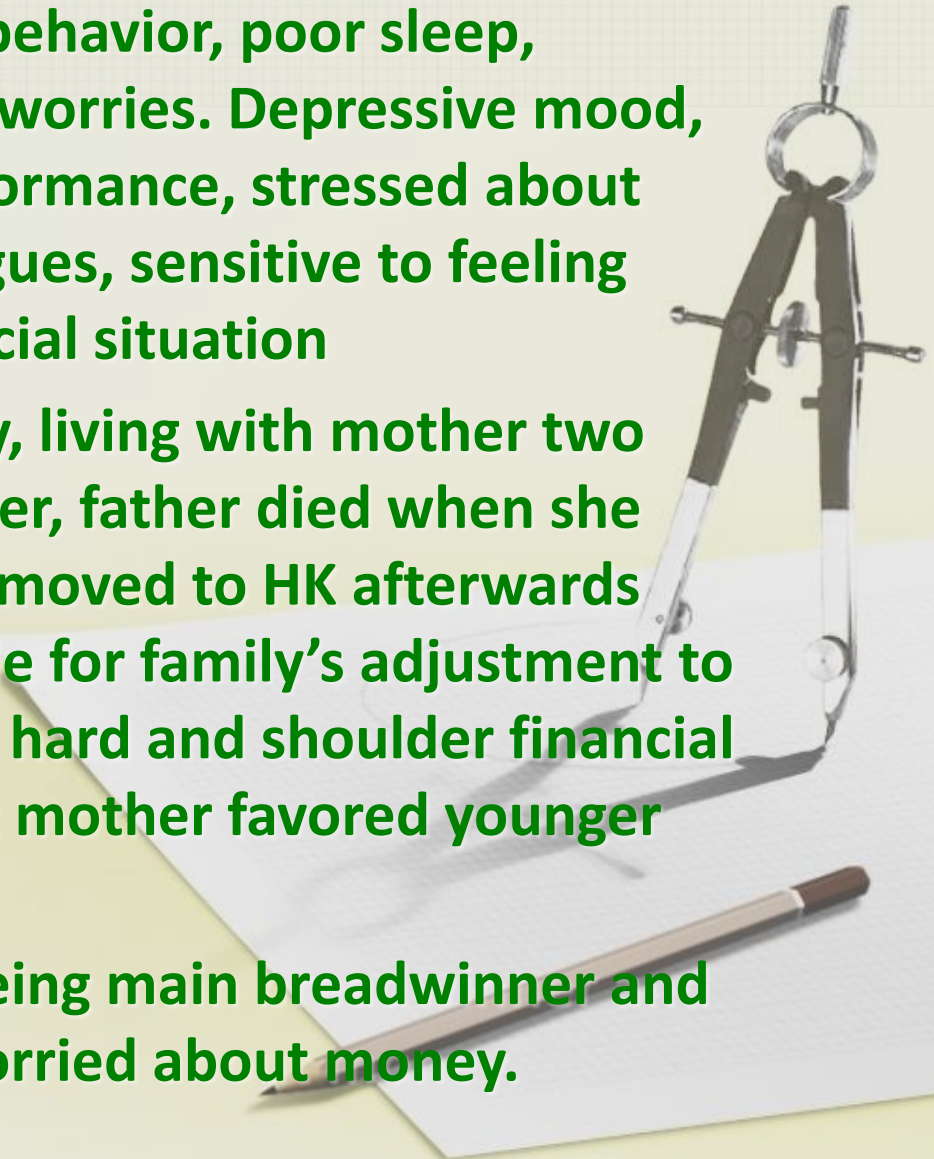
Referrals from ICCMW to GP

- Persons refused psychiatric treatment due to stigmatization.
- Persons in need of urgent psychiatric treatment / in long waiting list of HA. (first onset & defaulted treatment)
- Obtain referral letter to HA psy
- Statistic : around 20 cases

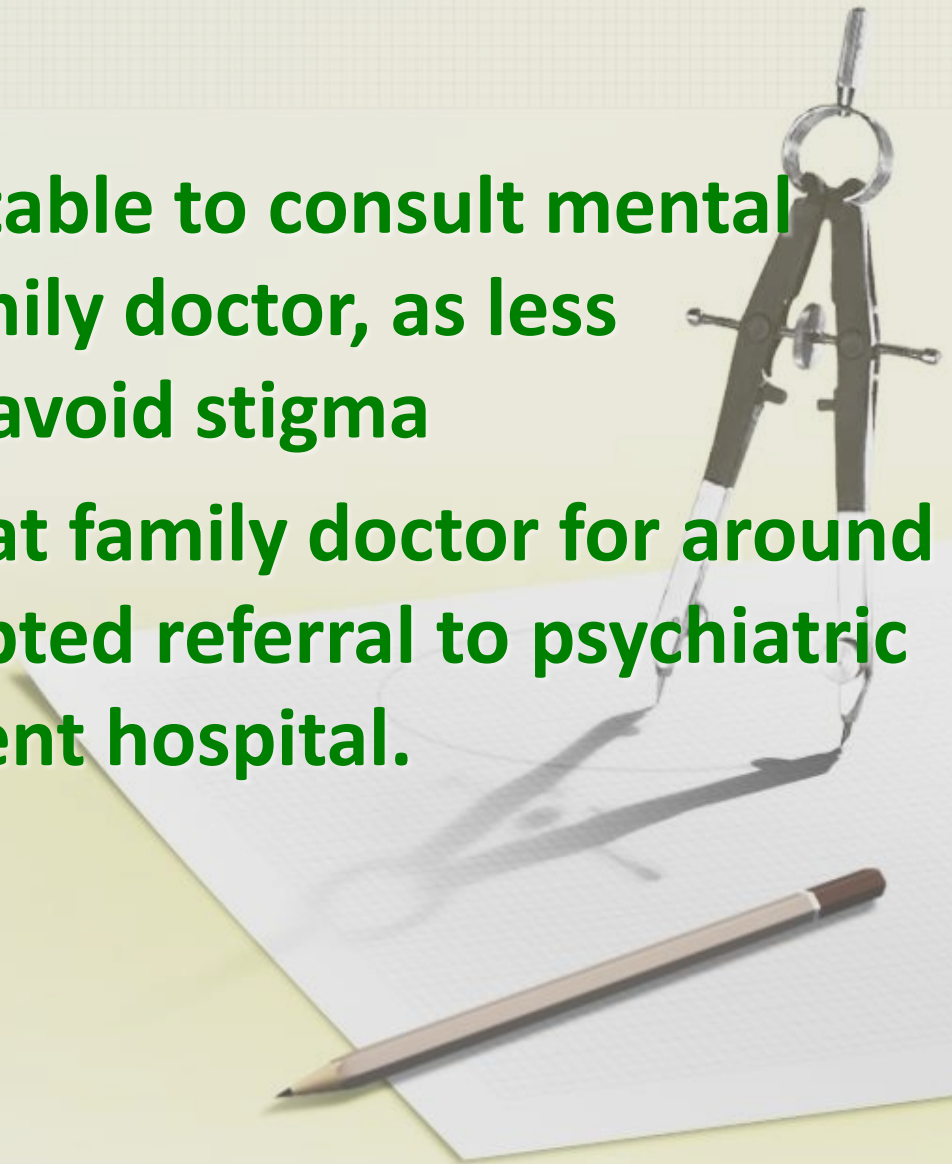


Case example: 26/F

- Crying spells, self-harm behavior, poor sleep, ruminating over various worries. Depressive mood, anxiety about work performance, stressed about competition with colleagues, sensitive to feeling redundant at work or social situation
- Eldest daughter of family, living with mother two younger sister and brother, father died when she was 10 years old, family moved to HK afterwards and had to be responsible for family's adjustment to HK, felt she had to study hard and shoulder financial burden of family. Yet felt mother favored younger siblings more.
- Had financial strain as being main breadwinner and having a mother over worried about money.

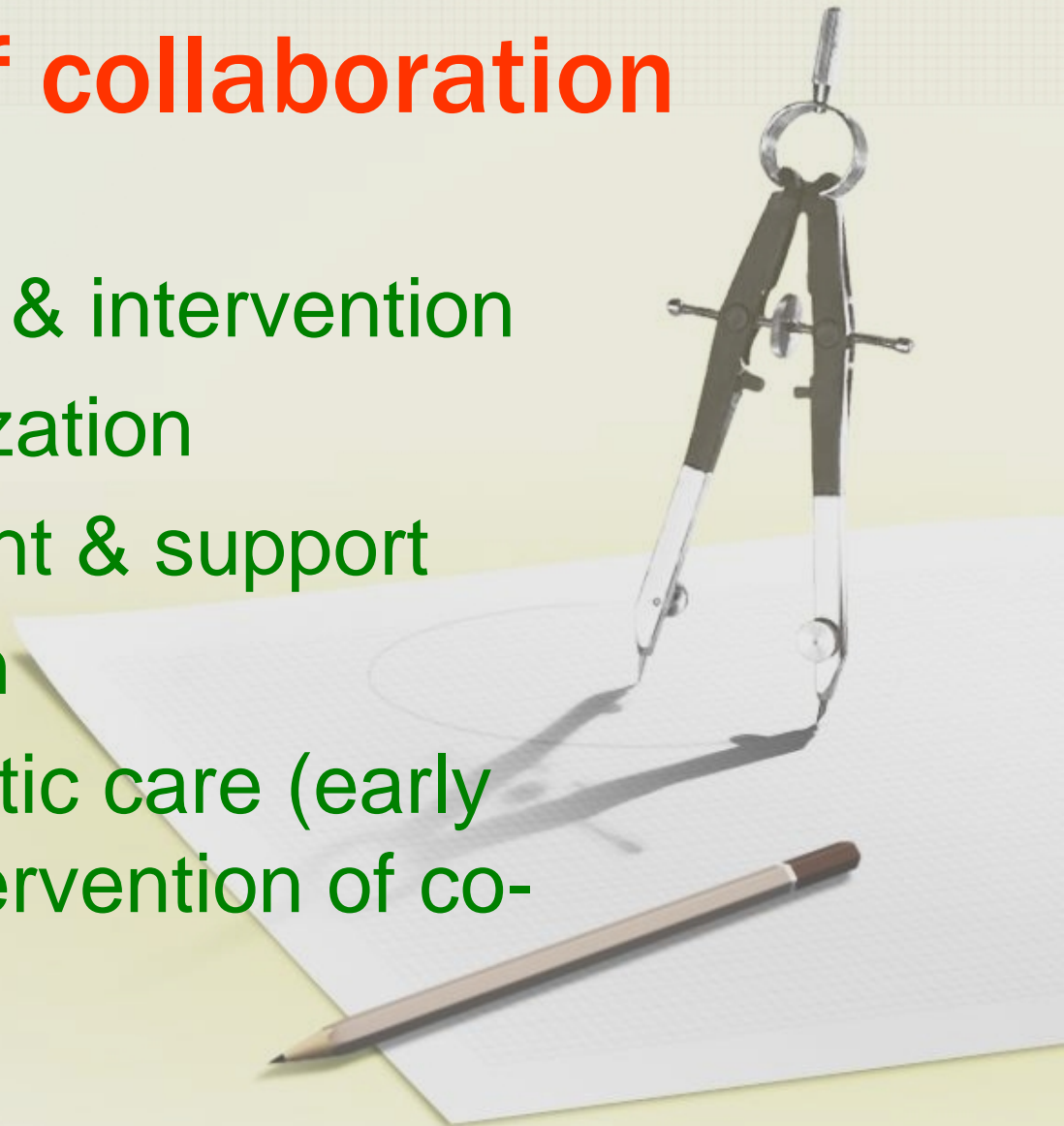


- Felt more comfortable to consult mental health trained family doctor, as less expensive and to avoid stigma
- Having follow up at family doctor for around 3 years then accepted referral to psychiatric clinic of government hospital.



Advantages of collaboration

1. Early detection & intervention
2. Lower stigmatization
3. Timely treatment & support
4. Risk prevention
5. One-stop, holistic care (early detection & intervention of co-morbidities)



Further collaboration

- ▶ Regular liaison meeting as a communication channel about collaboration.
- ▶ Others.....



Thank you

