Quality of care for difficult to engage patients with SMI in Europe

- Comments

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Comparisons across Europe

- Language
- Societal values
- National health and social care systems
- Psychiatric traditions
- Different practice and ways of thinking
Different approaches

- Target group of AO
- Political interest
- Interest of commissioners
- Interest in risk and culture of litigation
- Funding level
Terminology, models and principles

- Difficult to engage patients or failing services?
- How assertive is assertive, and the issue of coercion?
- Effect on overall approach of psychiatry
- Identifying relevant elements
- Service configuration, content of treatment, processes and outcomes
Services and patient outcomes

Service configuration

Why? How?

Patient outcomes

Probability?
Services and patient outcomes

- Service configuration
- Mediating factors
- Patient outcomes

Probability?
Services and patient outcomes

**Step 4: Patient outcomes**

- **Service configuration**
  - Probability?
  - Treatment components
    - Processes
      - Patient experiences
        - ?
Why do patients disengage?

- Desire to be an independent and able person
- Lack of active participation and poor therapeutic relationship
- Loss of control due to medication and its effects

Priebe et al., Br J Psychiatr, 2005
Social support and engagement without focus on medication

“They talk about day to day stuff with me you know. It’s interesting really, they take an interest in my life.”

“You don’t talk to them purely about how I have taken my tablets and this. I mean it is broader than that.”

Priebe et al., Br J Psychiatr, 2005
Time and commitment (I)

“Well, the main thing is they listen.... When you need someone to talk to, you can phone them and someone will come and she will sit down and you say whatever you got to say and she listens”

“They have more people around...I just pick up the phone and they come down. I don’t have to make an appointment or anything which is good.”
“The team and I have been through a lot. They have seen me in a good position and the team have seen me in bad conditions, so they have an idea, a much better idea and understanding of my moods and how to react to things. So we have a good working relationship.”
Partnership model of therapeutic relationship

“He seems more concerned about me..when I suggested that I wanted to stop Depixol for a while, he actually let me and he did actually come across as if he was concerned about me hallucinating again. And he wasn’t too pushy...He wanted me to be more involved in my own health, in looking after my own health rather than him.”
Future research

• Focus on actual treatment, processes and experiences

• Influenced by values:
  - patient as potential source of danger
  - patient as subject of treatment
  - patient as partner in therapeutic process