S21 *Basic aspects of quality assurance in mental health care*

The Role of Community Psychiatry in the Implementation of Quality Assurance

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Currently, two developments are endangering the quality of psychiatric care It is increasingly becoming more difficult to maintain high quality service delivery not to mention improving it.
On the other hand, health administrators are more and more defining quality assurance as a means of reducing costs. At the same time, restructuring service delivery systems results in shorter hospital stays and correspondingly in a reduction in psychiatric beds. Consequently, implementation of quality assurance is usually only based on quantitative data obtained over short periods of time. However, in psychiatric care quality standards and indicators including quality of life for the patient as well as satisfaction for other consumers certainly are more important that quantitative ones for the early detection of an imminent dismantling of services to identify a decline in effectiveness and efficiency of mental health care This means that community psychiatry must play a special role in the implementation of quality assurance. Mental health care providerts should assess a wide range of predictors of outcome and treatment costs including a nursing diagnosis and social diagnosis, since the clinical diagnosis only accounts for approximately 15% of treatment costs. To illustrate these tasks and procedures experience with comprehensive sectorization of the Department of Psychiatry at the University of Bern are taken as a typical example.

Refrences:

WHO Quality Assurance of Mental Health Services
Research Implications ACHR29/88,14 Geneva, World Health Organization (1990)

S21 *Basic aspects of quality assurance in mental health care*

Monitoring Systems as Tools for Quality Assurance

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One of the factors distinguishing Quality Assurance (QA) from evalution and from research is that QA must be a continuous process Hence the reporting of data for a QA programme must be continuous and, in addition, the output must be regular and standardized These factors, continuous input of data and regular and standardized statistical output, make up a monitoring system The concomitant professional evaluation of output and the subsequent correction of treatment efforts constitute a QA programme. Concerning the data, a monitoring system must meet the same demands as a register regarding for example reliability, validity, exhaustivity and exclusivity

The demands to monitoring systems, their construction and application will be analysed and examples from the work with the Danish schizophrenia database will be given.

References:

Munk-Jørgensen P., Kastrup M., Mortensen PB.: The Danish psychiatric case register as a tool in epidemiology. Acta Psychiatrica Scandinavica 87 (suppl 370): 27-32, 1993.

Munk-Jørgensen P.. Perspektives for psychiatric epidemiology: are we measuring the right things? Epidemilogia e Psychiatria Sociale 5, 3: 191-198, 1996.

S21 *Basic aspects of quality assurance in mental health care*

Cultural Modeling of Quality Assurance Standards in Mental Health Care

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One of the best known hindrances to appropriate epidemiological data on mental health problems and the consequent design of services is the lack of cultually fair data bases. Several attempts have been made to improve communication among mental health professionals and to properly evaluate needs in a quantitative sense. Cultural expectations shape basic demographic characteristics screened and reported by experts, type and nomonolature of neuropsychiatric diagnoses, manifestations of distress in primary care settings, impairment, disability and handicap associated with mordibity, and care-seeking and illness behaviours. A qualitative approach to dealing with these issues is needed in order to device appropriate intervention strategies and to design evaluative programs geared towards establishing quality of mental health care After reviewing these aspects, case-studies will be proposed and described

References:

Mattson, MR: Quality Assurance: A Literature Review of a changing Field. Hospital and Community Psychiatry 35: 605-616 (1984)

S21 *Basic aspects of quality assurance in mental health care*

Evaluative Research as a basic Condition for Quality Assurance in Mental Health Care

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The crucial issue when we want to evaluate a psychiatric service is to identify the sources of the adopted reference criteria.
The establishment of reference criteria involves several methodological issues. In order to deal with these issues, three different systems of values can be used as reference:
(1) a system of quality standards technically derived from reliable efficacy studies (randomized clinical trials)
(2) a system of quality standards formed from ethical values, e.g. respect for the patient's human civil rights. In this case we do not need experimentally generated standards, but those approved by the „consensum gentium" and health authorities.
(3) a mixed system of technical standards obtained from
quasi experimental designs (e g. prospective epidemiological studies), techicians'consensus conferences (not only formalized and organized by national and international entities, but also resulting from the agreement within a local defined service or network of service)
definition of the „admissible events" (or sentinel events, e g physicak restraints).
- and common sense

References:

WHO: Quality Assurance of Health Services Research Implications ACHR29/88 14 Geneva, World Health Organization (1988)

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