

COMMUNITY CAR: ANECDOTAL REPORT AND INSIGHTS FOR PLANNING

Y. Amin-Selim

Mental Health, KENT and Medway NHS and Social Care Partnership Trust, West Malling, UK

Introduction: The specific content of community care is not clearly articulated and services are described as diffuse. Community psychiatric service is reported to be virtually invisible. This study describes the characteristics of a community care population with severe enduring mental illness who are subject to case management in a point of time (October 2009 to March 2010).

Objectives: The objectives are to screen the main services offered to them.

Aim: The aim to identify the main trends in relation gender differences in making use of the services.

Method: The screening is done using a specially designed instrument covering in addition to demographics clinical correlates and profiles of services offered.

Results: The patients are subject to two tiers of case management namely the out reach and the traditional care. The general profile of cases demonstrates high morbidity and social disability. Gender differences are identified in relation to diagnoses, level of engagement and profile of risk. Though male subjects are more morbid and more socially disabled they make less use of services compared to females. The highest frequency of risk was self neglect.

Conclusion: Special therapeutic strategies are needed to be tailored to the high morbidity of schizophrenia and high prevalence of comorbidity. Gender differences are to be considered in service designs. Regular access to guidance from tertiary services particularly in relation to addiction rehabilitation and forensic could assist to address the complex needs.