
CONFERENCE ABSTRACT

Person centred care: good practises in an ambulatory mental healthcare setting

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Introduction: BW IPSO is an organisation that started out as a variety of small organisations in the late 1970. By offering people with a mental illness the possibility to live in sheltered housing, with the guidance of mental healthcare workers, the organisation intended to improve the quality of life for this population. Over the years the organisation grew, merged and became BW IPSO. We now offer 118 places of supported living, going from group homes, to small appartements provided by the organisation, as well as guiding people in their own (social) home.

Description: Throughout the years, apart from housing and mental health, other life domains became more and more important. The mental healthcare worker became a case manager. In our multiprofessional team we follow the principles of FACT and SRH. If the resident wishes so, the case manager can also become a care coordinator. The principles of SRH comprise of three key aspects: presence-oriented, recovery-oriented and strength-oriented. So together, the resident and mental healthcare worker, will explore every life domain and investigate if the resident wishes to ameliorate or change something on a particular domain. Self-direction in the process is crucial. The life domains are physical health, mental health, administration, living and general daily life activities, religion and meaning, meaningful daily activities/work, social network, learning. The mental healthcare worker walks next to the resident throughout his/her path. A path that may lead to all different kinds of settings, f.e. specialized residential (mental) healthcare, community health centres, ambulatory psychologist/psychiatrist but also a workplace, regular welfare organisations, family, friends... When a resident decides to leave our organisation, (s)he can also choose to stay in 'follow-up'. This means that the mental healthcare worker will still see this person but less frequent. It is a way to prevent fractions in the care continuum and gives the very important opportunity to shift to a more intensive form of care when needed. Providing continuity in care is essential in our line of work. To make this possible, BW IPSO invests maximum efforts to form partnerships with other organisations or initiatives. Building relations in health systems is vital. Innovations in such systems are affected by collaboration. In making these investments, we aim to give our residents the possibilities to try new things, make connections and improve overall quality of life.

Conclusion: Over time, many healthcare services have become fragmented, people who are less empowered miss out on proper care. This also applies for a majority of people who suffer of a (severe) mental illness. As an organisation we strive for continuity of care, collaborative partnerships, patient centred care with maximum ownership. We achieve this with a

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multidisciplinary team of experienced mental health workers in partnership with other organisations and the network of de person in need.