






**Crisis Accommodation for
Hidden Young Ketamine Abusers**
: A Bridge between Treatment and Rehabilitation
BDF110011
Project implementation period
: 10 October 2012 – 9 October 2014



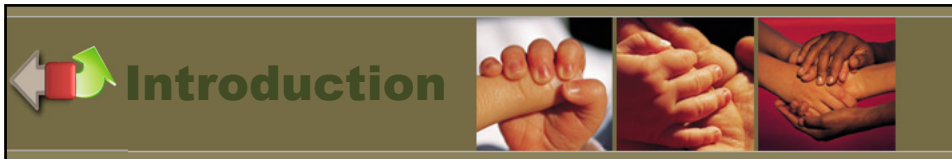
Grantee:
North District Hospital



Introduction



- A territory-wide crisis accommodation service for hidden young ketamine abusers and their families
 - To bridge the gap between treatment and rehabilitation for abstinence from ketamine use



The header of the slide features a dark green background. On the left, there is a logo consisting of a grey arrow pointing left, a red square, and a green arrow pointing right. To the right of the logo, the word "Introduction" is written in a bold, dark green font. Further to the right, there are three small, square images showing hands of different skin tones clasped together in a supportive grip.

- Nature
 - A five days' in-patient program
 - A collaboration service between hospital and non-government organizations (NGOs)



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- Focus
 - Personal awareness
 - health, functional, daily life and life role performance crises
 - Personal preparedness
 - abstinence from ketamine use
 - relapse prevention

Introduction



- Objectives
 1. Assessment and treatment for the health and functional problems associated with ketamine use
 2. Coaching for enhancement of engagement and building of preparedness for longer term rehabilitation
 - motivation and readiness
 - relapse prevention
 3. Establishment of a collaboration service model for the treatment and rehabilitation of ketamine abusers
 - between hospital and NGOs
 - for effective communication, service collaboration, interfacing, co-ordination and continuity of ketamine abusers' engagement in rehabilitation

Project Content



1. Assessment and treatment for the health and functional problems associated with ketamine use
 - Crisis Accommodation Program

Crisis of health



Crisis of functional performance, daily living and work



 **Project Content**

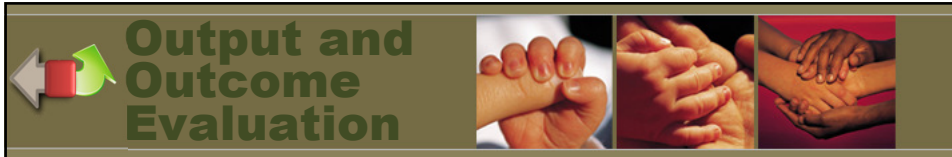
2. Coaching for enhancement of engagement and building of preparedness for longer term rehabilitation



 **Project Content**

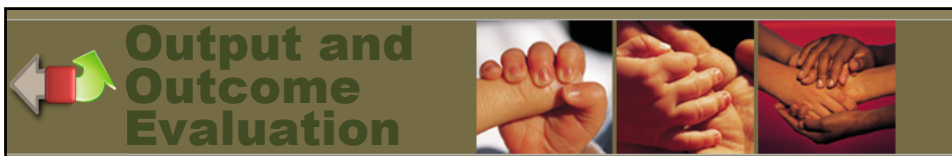
3. Establishment of a model of service collaboration for the treatment and rehabilitation of young ketamine abusers






Output and Outcome Evaluation

- Evaluation methods
 - Registration and treatment records
 - Questionnaires (Pre- and post-test comparisons)




Output and Outcome Evaluation

- Output and outcome benchmarks (1)
 - Output indicators
 - Number of medical consultations provided to ketamine abusers
 - Number of parents, family members and social workers engaged to assist the ketamine users
 - Number of ketamine abusers recruited and served


 **Output and Outcome Evaluation**

- Output and outcome benchmarks (2)
 - Outcome indicators
 - Improvement in treatment motivation
 - Reduction in ketamine use (including those abstinence from ketamine use)




 **Output and Outcome Evaluation**

- Evaluation results (1)

| | Expected Results | Achieved Results |
|---------------------------|--|---|
| Output Indicator 1 | To conduct 300 medical consultations to hidden young ketamine abusers, among which 60% (180) complete intensive counselling and motivational interview | Conducted 555(185%) urological consultations 182 complete intensive counselling and motivational interview |
| Output Indicator 2 | Engage 180 parents, family members and social workers to assist the ketamine users | 305 (169.4%) parents, family members and social workers were engaged. |
| Output Indicator 3 | To recruit and serve 180 hidden young ketamine abusers | 182 (101.1%) cases were recruited to the Crisis Accommodation Program |




Output and Outcome Evaluation








- Evaluation results (2)

| | Expected Results | Achieved Results |
|----------------------------|---|--|
| Outcome Indicator 1 | Significant improvement in treatment motivation found using paired t-test | <p><u>Immediate completion</u> :</p> <p>132 valid cases evaluated 90 cases improved (68.2%)</p> <p><u>2 weeks after completion</u>:</p> <p>75 valid cases evaluated 55 cases improved (73.3%)</p> <p><u>13 weeks after completion</u>:</p> <p>50 valid cases evaluated 37 cases improved (74.0%)</p> <p>Significant improvement found in all stages using paired t-test (P<0.05)</p> |



Output and Outcome Evaluation

- Evaluation results (3)



| | Expected Results | Achieved Results |
|----------------------------|---|---|
| Outcome Indicator 2 | Significant reduction of drug use found using paired t-test | <p><u>13 weeks after completion</u>:</p> <p>51 valid cases evaluated 45 cases improved (88.2%)</p> <p>Significant reduction of drug use found using paired t-test (P<0.05)</p> <p>Abstinence from ketamine use:</p> <p>51 valid cases evaluated 18 cases quitted (35.3%)</p> |

 **Experience Gained** 

- Reason behind success (1)
 - Top management support to the need for in-patient care
 - one-stop and integrated multidisciplinary interventions for the health and functional problems associated with ketamine abuse.

 **Experience Gained** 

- Reason behind success (2)
 - New model of service can tailor to the specific needs of the young substance abusers consuming ketamine
 - (a) brief intervention
 - facilitate a break from the community for attention and supported-evaluation of the need for change
 - minimize disturbance to the life and work/study of the ketamine abusers who are at their productive age

 **Experience Gained** 

- Reason behind success (3)
 - New model of service can tailor to the specific needs of the young substance abusers consuming ketamine
 - (b) urological, radiological and other medical interventions
 - heighten awareness and understanding of the health crises and problems associated with ketamine use

 **Experience Gained** 

- Reason behind success (4)
 - New model of service can tailor to the specific needs of the young substance abusers consuming ketamine
 - (c) focused occupational therapy
 - heighten awareness and understanding of the ketamine-related functional issues fundamental to the crises and problems in daily living and work
 - inspire the motivation for change
 - equip ketamine abusers with the necessary preparedness
 - » longer term rehabilitation
 - » relapse prevention


Experience Gained


- Reason behind success (5)
 - New model of service can tailor to the specific needs of the young substance abusers consuming ketamine
 - (d) structured system of hospital-NGO collaboration
 - ensure and facilitate effective communication, service interfacing and continuity of engagement of ketamine abusers in rehabilitation
 - provides a platform for ongoing educational and experience sharing to improve service collaboration and outcome

Experience Gained


- Lesson learnt (1)
 - Effective communication and structured service interface are essential to the success of service collaboration

Experience Gained





- Lesson learnt (2)
 - Effectiveness in the instillation of insights to the ketamine-induced health and functional problems is facilitated through education and assessment on a person-centred and face-to-face approach.


Experience Gained




- Lesson learnt (3)
 - Ketamine abusers need focused learning to equip themselves with the preparedness and readiness to engage in longer term rehabilitation for abstinence and relapse prevention from ketamine use.

 **Conclusion** 

- **Conclusion**
 - Brief intervention involving multidisciplinary in-patient and community interventions, and upon a structured system of collaboration is an effective model of service for the rehabilitation of ketamine abusers.

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End

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