



North District Hospital BDF150034

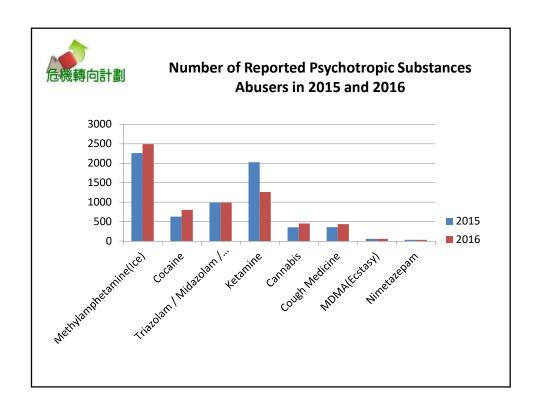
Crisis Accommodation GPS Program for Ketamine Abusers and Family Members

危機轉向GPS計劃

10-10-2016 to 9-2-2019



- Background
- Introduction of the project
- Output & Outcome
- Challenge
- Conclusion





Ketamine-associated Urological Damage

Chronic Inflammatory Response

- Dysuria
- Suprapubic pain
- > Frequency (as often as once in 15 min)
- Urgency
- > Incontinence
- ➤ Nocturia (up to 7–8 times per night)
- Painful haematuria

Limited daily activities



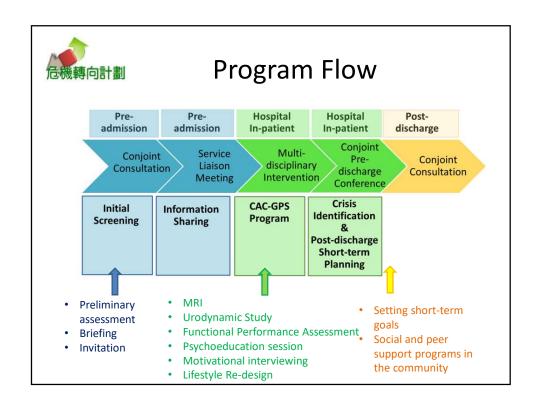
Introduction of the Project

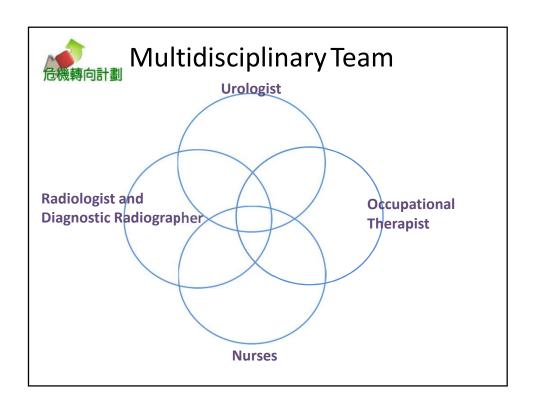


Objectives

- To address the challenges of substance use and co-occurring medical, mental health, and lifestyle problems of the ketamine abusers
- To ensure the continuity of care for ketamine abusers by building a territory-wide collaborative model between hospitals and social service agencies in the community









Post Discharge Follow-Up



Complete Assessment Forms in FU sessions:

- Beat Drugs Fund Evaluation Question Set No. 13 (Contemplation Ladder)
- Beat Drugs Fund Evaluation Question Set No. 6 (Frequency of drug use in the past 3 months)
- Beat Drugs Fund Evaluation Question Set No. 7 (Frequency of drug use in the past 6
- Psychometric properties of a Chinese version of the short Depression Anxiety Stress Scales (DASS21)



Social and peer support programs in the community after discharge

- CCPSA
- Substance Abuse Clinic
- Residential Drug Treatment Service



Output Indicators

- 1. Receive 180 referrals for the program
- 2. 60% of the referred cases (or **108** cases) completed the 5 days' in-patient program
- 35% of the family members of the cases (or 38 cases) completed the 5 days' in-patient program are referred to NGO for further family work

Output Indicators and Achieved Numbers

	Expected Outcome	Achieved Outcome	
Output Indicator 1	180	202	M: 80 F: 122
Output Indicator 2	108	109	M: 48 F: 61
Output Indicator 3	38	38	



Outcome Indicators

- 1. 50% of cases completed the 5 days' in-patient program show improvement in motivation or readiness to change (or significant improvement as indicated by paired t-test)
- 2. 50% of cases completed the 5 days' in-patient program show reduction in ketamine use
- Percentage of ketamine abusers who complete the 5 days' in-patient program being admitted to CCPSA or DTRC (or other drug treatment services) for further treatment within 6 months
- 4. Percentage of ketamine abusers who complete the 5 days' in-patient program reduces drug use at 6 months



Outcome Indicators and Achieved Number

1	50% of cases completed the 5 days' in- patient program show improvement in motivation or readiness to change	104 valid cases were evaluated. 63 (60.58%) cases improved.
2	50% of cases completed the 5 days' in- patient program show reduction in ketamine use	Among those who report still using drugs at pre-test (i.e. pre-test score>0), 22 cases evaluated. 21 (95.45%) cases reduced drug use frequency. 18 (81.82%) cases quitted. Among those who reported not using drug at pre-test (i.e. pre-test score=0), 17 cases evaluated. 17 (100%) cases avoided relapse.



Outcome Indicators and Achieved Number

3	Percentage of ketamine abusers who complete the 5 days' in-patient program being admitted to CCPSA or DTRC (or other drug treatment services) for further treatment within 6 months	2 (1.83%) cases were admitted to CCPSA. 36 (33.03%) cases were admitted to DTRC.
4	Percentage of ketamine abusers who complete the 5 days' in-patient program reduces drug use at 6 months	Among those who reported still using drug at pre-test (i.e. pre-test score>0), 15 cases were evaluated. 15 (100%) of them reduced drug use frequency. 11 (73.33%) of them quitted. Among those who reported not using drug at pre-test (i.e. pre-test score=0), 6 cases were evaluated. 6 (100%) of them avoided relapse.



Challenge

Prolonged winter surge month in hospital:

Dec 2016 – Sept 2017 (10 months)

Dec 2017 - May 2018 (6 months)

➤ Limit No. of Bed for intake



Solution

- The project was extended for 4 months.
- Date of completion postponed from 9/10/2018 to 9/2/2019.



Experience Gained

- Collaboration between hospitals and community social services
- Single point of contact to handle enquires and referral



Conclusion

- The Crisis Accommodation GPS Program is a short-term hospitalization and community support program that addresses the health care needs of ketamine abusers
- Overall, it is effective in reducing drug use, anxiety, and helping patients to move from pre-contemplation to the contemplation or preparation stage of change