

CME COURSE TITLE	Integrated care for patients with schizophrenia and other severe mental illnesses: working towards recovery
COURSE DIRECTOR AND CO-DIRECTORS	<i>C. Mulder¹, M. Bahler²</i> Institute(s): ¹ : Psychiatry, Erasmus University Medical Centre, Rotterdam, ² : Mental Health Center North-Holland North, Heiloo, The Netherlands
COURSE LEVEL	Basic
EDUCATIONAL OBJECTIVES	After the course participants will be able to understand the multiple and complex needs of patients with schizophrenia and ways to organize care in an integrated multidisciplinary model, called Flexible Assertive Community Treatment (FACT). The course participants learn about evidence-based practices that are used in the treatment and recovery process of patients with schizophrenia, and provide them in such a way that patients benefit from them in a structured manner. Finally, course participants will learn about the evidence demonstrating that FACT can be a (cost)effective way of providing integrated care for severely mentally ill patients.
COURSE DESCRIPTION	Fragmented care for patients with schizophrenia and other severe mental illnesses is a fundamental problem in many mental health care systems in Europe. This leads to less effective treatments, dropout from treatment and patients not receiving appropriate care. It is a challenge to organize the care for persons with severe mental illnesses (and their relatives) in such a way that they have access to the Evidence Based Practices (EBP's) and social services at the same time. The EBP's include Medication Management, Cognitive Behavioral Therapy, (Family) Psycho Education, Individual Placement and Support, and Integrated Dual Diagnosis Treatment. The multidisciplinary team not only treats motivated patients, but also tries to engage less motivated patients using outreach services. The multidisciplinary team includes a psychiatrist, psychologist, nurse, social worker, supported employment specialist, addiction specialist and a peer specialist. This team is able to (1) apply the EBP's mentioned above (in line with treatment guidelines), (2) to work with the patient on their long term recovery goals, and (3) to use outreach and assertive strategies. In Netherlands this is combined in a model called Flexible Assertive Community Treatment (FACT). This model is very popular in the Netherlands (more than 200 FACT teams) and is getting increasing attention in other European countries as well.
PREREQUISITE KNOWLEDGE	Participants should have basic knowledge of treatment needs of patients with schizophrenia and other severe mental illnesses.
COURSE METHODS AND MATERIAL	Small group discussions; case studies; vignette; debate; slides; handouts
RECOMMENDED READINGS	Veldhuizen R van. FACT: A Dutch version of ACT. Community Mental Health J 2007; 43:421-433. Bond GR, Drake RE. Should we adopt the Dutch version of ACT? Commentary on "FACT: a Dutch version of ACT". Community Ment Health J. 2007 43:435-358. Drukker M et al. A real-life observational study of the effectiveness of FACT in a Dutch mental health region. BMC Psychiatry. 2008, 86-93
LANGUAGES	English
TARGET AUDIENCE	None
EARLY CAREER PSYCHIATRISTS	Yes