

EVOLUTION OF PSYCHIATRY REHABILITATION INSTITUTION ACCREDITATION IN TAIWAN MEDICAL SYSTEM

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Introduction

The overview of history of mental health in Taiwan and around the world, the trend of community-based development has been established. It has moved towards community-based service since Department of Health (DOH) of Taiwan approved not only "Health Care Plan-To Build Mental Care Network" and To Strengthen Psychiatry Community Rehabilitation" in 1985, but also "Psychiatry Community Rehabilitation Trial Project" in 1989. The severe mentally ill patients face several difficulties in social adaptation, for example, social media often reports "Ticking time bombs" to describe mental illness in the community, or persistent recurrence of symptoms and impaired cognitive function affect patients' employment. Since 2011, DOH of Taiwan has announced 123,572 Cases who are registered as severe mental illness. Therefore, DOH starts to assign Taiwan Joint Commission of Hospital Accreditation (abbreviated as TJCHA) to conduct the Accreditation of Psychiatric Rehabilitation Institution from 2004. Until now, the Accreditation Standard has been reviewed for several rounds. In other words, the government has assured high quality community-based rehabilitation through accreditation.

Table-1 Timeline



Aims

To enhance the life quality of mental ill patients and match current government policy, the occupancy ratio of community oriented items on all accreditation ones and the achieved ratio of institutes would be analyzed in order to revise the accredited standard of 2013 version.

Method

Collecting national and international literatures about community-based rehabilitation in psychiatric institutes and analyzing accredited items and results were from 2010 to 2011. The community rehabilitation center standards were 49 items with 20% community-based ones and the achievement rate was 95%, then the rehabilitation home standards were 52 items with 25% community-based ones and achievement rate was 92%.

Table-2 Collecting and Analyzing accredited items and results

	Items	Related community-based rate(%)	Achievement rate(%)
Community Rehabilitation Center	49	20	95
Rehabilitation Home	52	25	92

According to the accreditation evaluators consensus conference in 2011, the proposal of rehabilitation institutions and the government policy, we developed the principles : (1) the standard goes simply and reduces structure items, (2) leading institutions up to community, and (3) empowering trained patients and assuring environment safety.

Results

There are 6 chapters in 2013 version, including human resource, space and equipment, provision of rehabilitation service, quality of rehabilitation services, combining community resources, and the recommendations of improvement from previous evaluation. The new version of rehabilitation center accreditation are 38 items with 35% community-based ones, and the new one of rehabilitation home accreditation are 43 items with 40% community-based ones.

Table-3 Old Psychiatric Rehabilitation Institutions Accreditation Standards v.s The New ones

Old Psychiatric Rehabilitation Institutions Accreditation Standards			New Psychiatric Rehabilitation Institutions Accreditation Standards		
Chapter	Community Rehabilitation Center	Rehabilitation Home	Chapter	Community Rehabilitation Center	Rehabilitation Home
Chapter 1: The Appropriateness of staff allocation	4	5	Chapter 1: The Human Resource	3	4
Chapter 2: The appropriateness of site location and space allocation	4	4	Chapter 2: Space and Equipment	10	12
Chapter 3: The properness of service facilities	11	12	Chapter 3: Provision of rehabilitation service	11	11
Chapter 4: The provision of a sound rehabilitation service	11	11	Chapter 4: Quality of rehabilitation service	10	12
Chapter 5: The measures of rehabilitation service quality management	13	14	Chapter 5: Combining community resources	2	2
Chapter 6: The proper collaboration with community resource network	4	4	Chapter 6: Recommendations of improvement from previous evaluation	2	2
Chapter 7: The recommendations of improvement from previous evaluation- completion of evaluation information and good quality of field evaluation briefing	2	2			
Total	49	52	Total	38	43

Conclusions

The revised accreditation standard is more closing to be community oriented which no doubt reiterates the psychiatric rehabilitation should support convalescent patients to achieve the fully integrated. Then they can exercise civil right and explore opportunities in becoming the member of community and society.