

P03-191

FACT: A DUTCH VERSION OF ASSERTIVE COMMUNITY TREATMENT

J.R. van Veldhuizen^{1,2}

¹*Centre for Certification ACT & FACT, CCAF, Groningen,* ²*GGZ Noord Holland Noord, GGZ NHN, Heiloo, The Netherlands*

Learning objectives: To reflect on theory, implementation, practice and evaluation of FACT: the Dutch version of Assertive Community Treatment.

ACT is an EBM intervention for the 20% most severe mentally ill (SMI) outside the psychiatric hospital. From 2004 we started with a Dutch version: the FACT (Function ACT) model.

FACT teams are multidisciplinary teams serving all SMI outside the psychiatric hospital in a region/area of 50.000 inhabitants. The teams offer two kinds of care:

- 1) clinical case managementteam and home care for the stable group and
- 2) full ACT for patients in danger of crisis / recurrent psychosis or readmission.

The second group is on a digital whiteboard and is discussed every morning by the team to coordinate shared caseload and assertive outreach.

Interesting is the finding that the first and the second group have a large overlap in time: in 3 years >60% of the patients in the team has been the digital board.

In FACT we bring together care, crisis-intervention, treatment (and metabolic screening), recovery oriented support and care and CBT and IPS. We work in close cooperation with the psychiatric hospitals and sheltered living departments in 'transmural' care.

The number of FACT-teams in Holland is rapidly growing (> 80). The model appears to be able to serve all SMI in a certain region with good continuity of care. First findings are positive (very low drop out, more patients in remission, better satisfaction).

Certification started by the Centre for Certification ACT and FACT (see www.ccaf.nl)