

Global Conference on NURSING AND HEALTHCARE

March 27-28, 2019 | Amsterdam, Netherlands

Petra Eichelsheim, J Prim Care Gen Pract 2019, Volume 2

RECOVERY IN CHRONIC DEPRESSION IN PRIMARY HEATLH HEALTHCARE

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Summary: What is the best way to support patients with chronic depression in finding their needs for recovery? A problem analysis learned there is need for a method that defines the needs of patients for their recovery and an instrument that deepens the conversation so that needs are found.

Methods: To find answers in search of the best method for finding the needs in recovery the researcher used interviewing, a search in several scientific databases, internet and scientific, describing literature. There was a focus on the strengths and weaknesses of the methods and the overall experience. The criteria for a method were inventoried. It is important that the patient is in charge of the process and the pace. The method is easy to use and clear.

Innovation: I Hope is a method of a toolkit including a routine outcome monitor (I Roc). I Roc consists of twelve questions. The questions refer to the four forms of recovery and all life areas. At the end of the questionnaire an overview arises in which the areas of development show up. The method is attractive due to the use of colors and pictures.

Implementation: At first there was a start with a pilot with two therapists so that some experience was gained. The next step is implementation of the method in the electronic patient record. The outcomes will be part of a large validation research for I Roc. The first experiences with I Roc are positive. Research of recovery is still quite young. Therefore the results of this investigation can not be generalized to other practices because this research is the first in primary mental health care. Much more research is required to find the working elements of recovery.

BIOGRAPHY

Petra Eichelsheim is working as a nurse practitioner of mental health, University of Applied Sciences in Utrecht, Netherlands. She completed her studies in master of science in nursing. Eichelsheim started working in social psychiatric nurse in Dijk and Duin BV till 1987 and then Eichelsheim moved to Brijder Addiction Treatment as a team manager from 1997 to 2009, later joined as social psychiatric nurse at PsyQ and continuing as a nursing specialist GGZ at Indigo and ADHD central.

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Journal of Primary Care and General Practice | Volume 2

