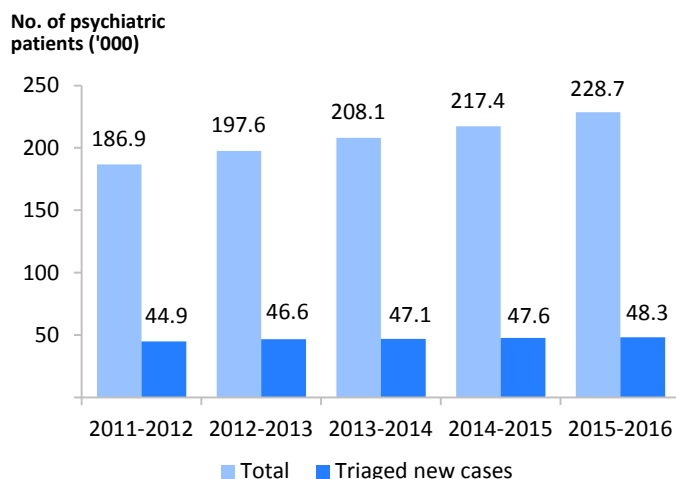




## Mental health services

**Figure 1 – Number of patients using the psychiatric services of the Hospital Authority**



**Figure 2 – Usage of psychiatric services provided by the Hospital Authority**

	2011-2012	2015-2016	Rate of change
<b>Psychiatric inpatient services</b>			
No. of patients treated	14 300	14 700	+ 2.8%
No. of inpatient discharges and deaths	16 011	17 440	+ 8.9%
Average length of stay	65 days	54 days	- 16.9%
<b>Psychiatric day hospital services</b>			
No. of attendances	220 532	223 781	+ 1.5%
<b>Psychiatric specialist outpatient services</b>			
No. of attendances	755 745	825 591	+ 9.2%
<b>Psychiatric outreach services</b>			
No. of psychiatric outreach attendances	220 550	282 735	+ 28.2%
No. of psychogeriatric outreach attendances	95 446	97 503	+ 2.2%

**Figure 3 – Psychiatric facilities of the Hospital Authority**

	2011-2012	2015-2016	Change
<b>Psychiatric inpatient services</b>			
No. of beds	3 607	3 607	No change
Bed occupancy rate	77%	71%	Down by six percentage points
<b>Psychiatric day hospital services</b>			
No. of places	889	889	No change

## Highlights

- There have been public concerns about the prevalence of mental illnesses in Hong Kong, as reflected by the Hong Kong Mental Morbidity Survey 2010-2013 commissioned by the Food and Health Bureau. The survey, which was the first and latest territory-wide study on common mental disorders ("CMD"), estimated that the prevalence rate of any past-week CMD among people aged between 16 and 75 in the population was 13.3%. That means, about one in seven people in the specified age range suffered from anxiety, depression or other common mood disorders.
- Probably reflecting the above, the number of patients using the psychiatric services of the Hospital Authority ("HA") increased by 22% from 186 900 in 2011-2012 to 228 700 in 2015-2016 (Figure 1). During the same period, over 44 000 new cases of psychiatric patients were treated in the psychiatric specialist outpatient clinics ("SOPCs") of HA each year.
- Amid the prevalence of mental illnesses in Hong Kong, HA has been increasing its focus on providing ambulatory and community care instead of inpatient care for psychiatric patients. The number of attendances in psychiatric SOPCs and psychiatric outreach attendances increased by 9.2% and 28.2% respectively between 2011-2012 and 2015-2016. In contrast, the number of psychiatric patients treated in inpatient settings just increased by 2.8% (Figure 2). Besides, the number of psychiatric beds provided by HA remained unchanged over the years (Figure 3).
- The Social Welfare Department has also commissioned non-governmental organizations to operate 24 integrated community centres for mental wellness, providing one-stop and district-based community support services for ex-mentally ill persons and persons with mental health problems. According to the Government, only 15 of the 24 centres have secured permanent premises. For the other nine centres, suitable sites for permanent accommodation have only been identified for five of them, where fitting-out/building works or district consultation are being or will be carried out.

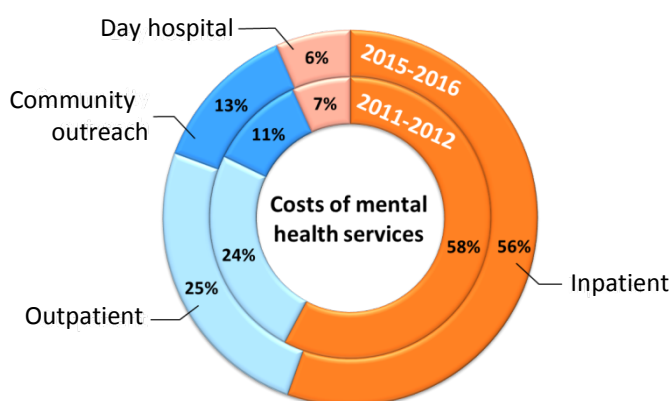
## Mental health services (cont'd)

**Figure 4 – Psychiatric workforce in the Hospital Authority**

	2011-2012 <sup>(1)</sup>	2015-2016 <sup>(1)</sup>	Rate of change
Psychiatric doctors	334	344	+ 3.0%
Community psychiatric nurses	125	130	+ 4.0%
Psychiatric nurses (including community psychiatric nurses)	2 161	2 472	+ 14.4%
Occupational therapists	189	245	+ 29.6%
Clinical psychologists	54	82	+ 51.9%
Medical social workers	243	243	No change

Note: (1) As at the end of the financial year.

**Figure 5 – Costs incurred by the Hospital Authority for providing mental health services**



**Figure 6 – Median waiting time for service for new routine cases**

New routine cases	2012-2013	2015-2016
All cases	16 weeks	22 weeks
Child and adolescent psychiatric services	12 to 52 weeks <sup>(1)</sup>	41 to 95 weeks <sup>(1)</sup>
Adult psychiatric services	4 to 17 weeks <sup>(1)</sup>	4 to 34 weeks <sup>(1)</sup>
Psychogeriatric services	Information not available	27 weeks

Note: (1) Range of median waiting time recorded by the hospital clusters.

## Highlights

- HA's focus on providing ambulatory and community care instead of inpatient care for psychiatric patients is indeed in line with the international trend. However, it is observed that the number of community psychiatric nurses working in HA only increased slightly by 4% and the number of psychiatric doctors by 3% between 2011-2012 and 2015-2016 (**Figure 4**).
- In 2015-2016, 327 case managers (including psychiatric nurses, occupational therapists and registered social workers) were taking care of 15 400 patients with severe mental illness ("SMI") under the case management programme of HA. The ratio of case manager to patients with SMI was 1:47. Nonetheless, the Review Committee on Mental Health recommended that HA should review the ratio with a view to improving it to around 1:40 in three to five years' time.
- Despite a surge in the usage of ambulatory and community care services between 2011-2012 and 2015-2016 (**Figure 2** above), the proportion of costs incurred by these services to the total costs borne by HA virtually remained unchanged between 2011-2012 and 2015-2016 (**Figure 5**).
- The increase in waiting time for service at the psychiatric SOPCs for new routine cases in recent years reflects the overstretched public mental health system. This is particularly the case for child and adolescent ("C&A") psychiatric services. There were 11 472 new routine cases for C&A psychiatric services in 2015-2016, with the median waiting time for service ranging between 41 weeks and 95 weeks depending on the hospital clusters (**Figure 6**).

Data sources: Latest figures from Budget Speech, Food and Health Bureau, Hospital Authority and Lam, L. et al.