

EMI (EQUIPE MOBILE D'INTERVENTION), A MOBILE INTERVENTION TEAM, A MEANS TO FACILITATE ACCESS TO PSYCHIATRIC CARE

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Rapid access to psychiatric care is a major public health issue. It may be reduced by social factors (homelessness), age or the disease itself (psychotic symptoms together with self-isolation, severe social phobia). Concerning the first two factors, mobile teams have been set up throughout Europe in recent years. In the third instance, people knowing the patient (often family, in psychological distress too) notify psychiatric authorities about a person not known to them. An early contact with patients increases their chances of improving, provided treatment can be organized quickly. This also prevents the family becoming exhausted, trying to cope with these psychiatric disorders. Over the past three years, a mobile intervention team (EMI) made home visits to unrecorded patients who were reclusive or had previously refused care. Specific protocolized psychiatric assessment and a clinical, contextualized approach in the patient's daily environment maximize access to care and allow for day-care treatment or hospitalization in better conditions. Organizing public psychiatric care in catchment areas has enabled patients to live outside institutions and has helped develop structures linked to a reference hospital, which allows for follow-up care after a hospital stay. However, entering the system may still be problematic, hence the home visits. Thanks to innovative organization at a time when French psychiatric departments are having their budgets cut, this team provides rapid treatment at home for psychiatric emergencies and facilitates access to care.