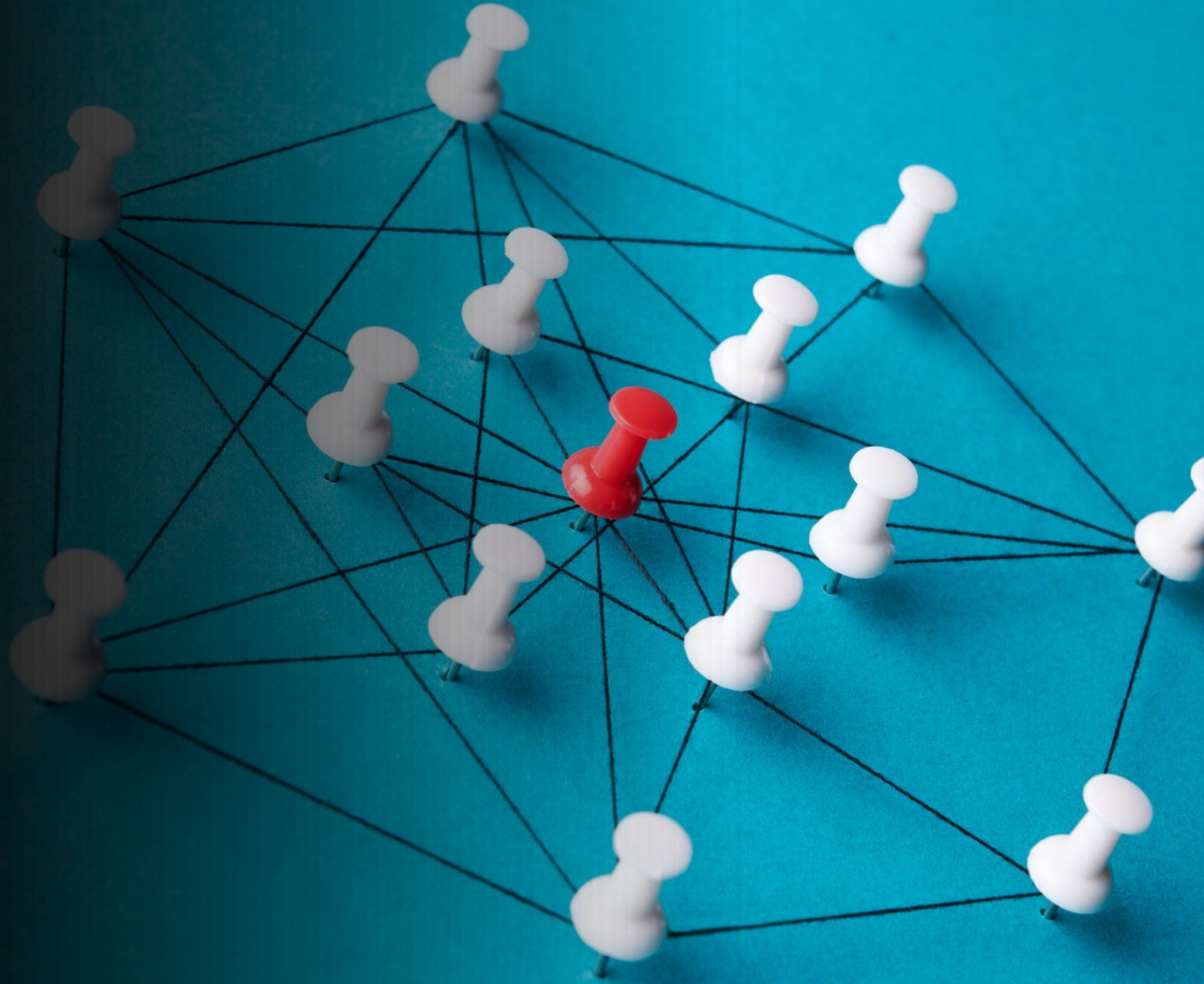




Network Psychiatry

Eucoms

June 17, 2026



Starting points

- “at the end of the day, each patients’ care is only as good as the care that is actually delivered” ...
- “care is delivered in clinical microsystems, which are the basic building blocks of health care”

(Quality by design, a clinical microsystems approach. Nelson, Batelden, Godfrey, Wiley 2007)



The microsteem

- Medical microsteem
 - Patients, doctors, nurses
 - and other medical staff
- Social microsystem
 - Significant others
 - Social domain



Integrated microsystem
as the basic building
block of network-
psychiatry



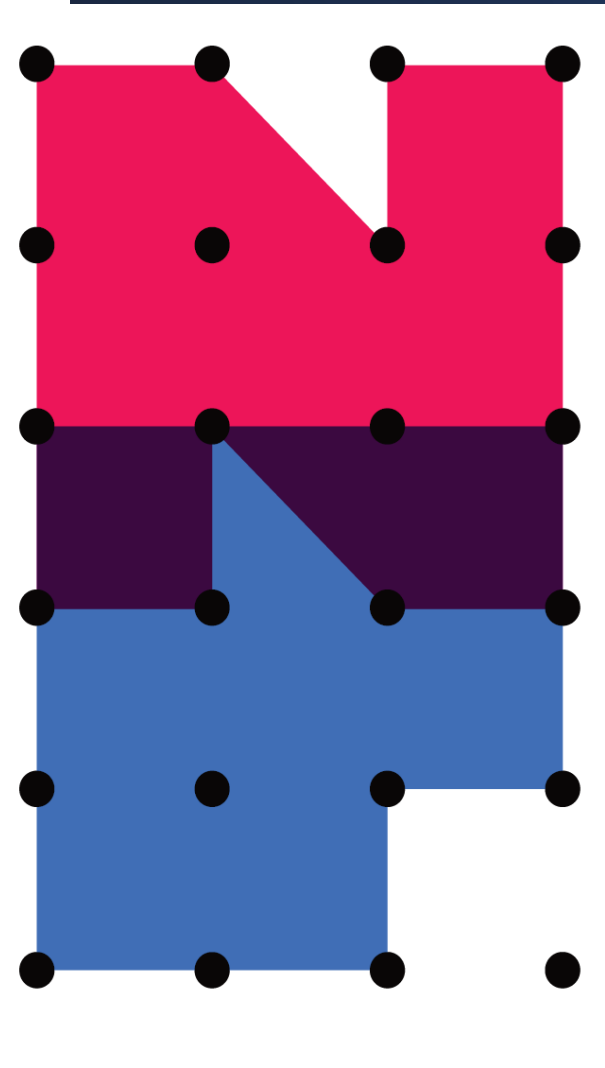
Network Psychiatry

- An attempt to:
 - Combine principles of recovery-oriented care as well as evidence- and practice-based care
 - Give a practical solution for dealing with complexity
 - Work together accross the medical and social domain



Leading Principles

1. Recovery vision central in the network
2. Service user as the director of his own care process: "nothing about us, without us"
3. Cooperation with significant others, from the start, in Resourcegroups



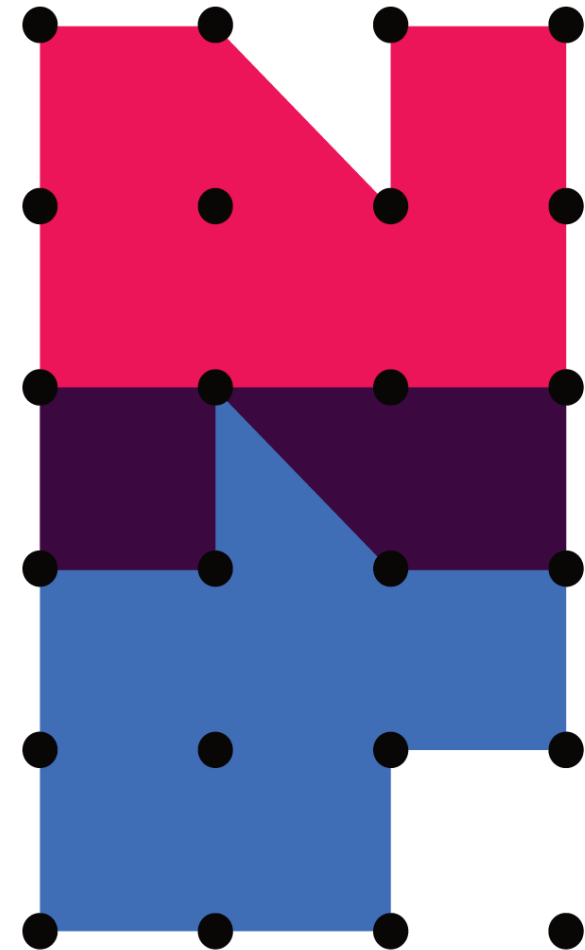
Leading Principles

4. Collaboration between psychiatric/medical and social domain

- On the level of the service user (resourcegroups)
- On the level of institutions
- Stimulating mutual dialogue, respect for different perspectives accros different domains

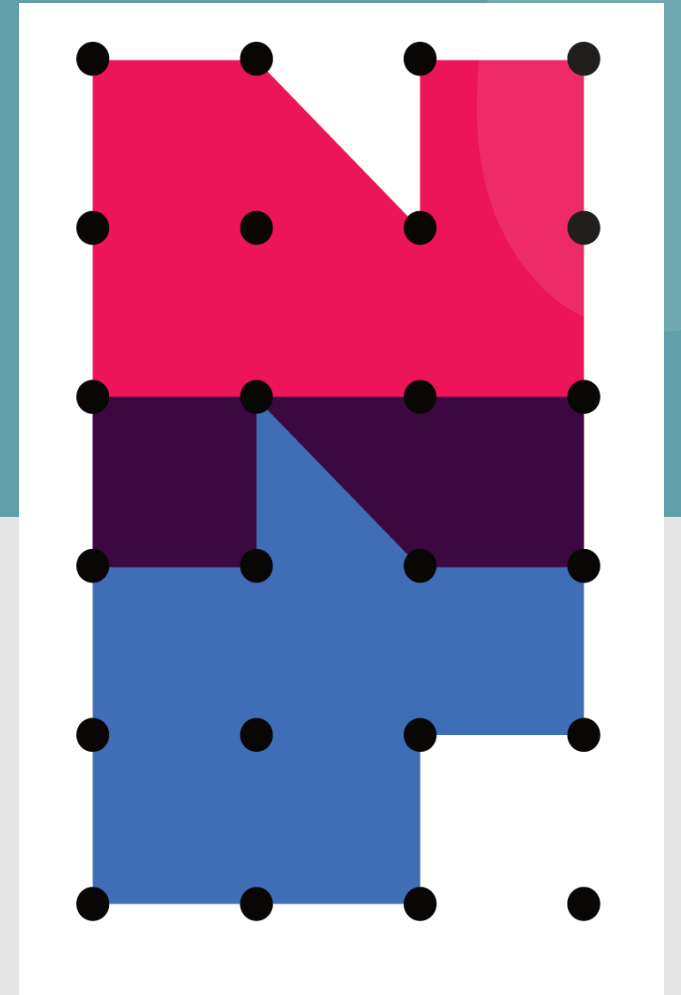
5. Providing continuation of care

- In a network of formal caregivers
- By organizing a stable informal network

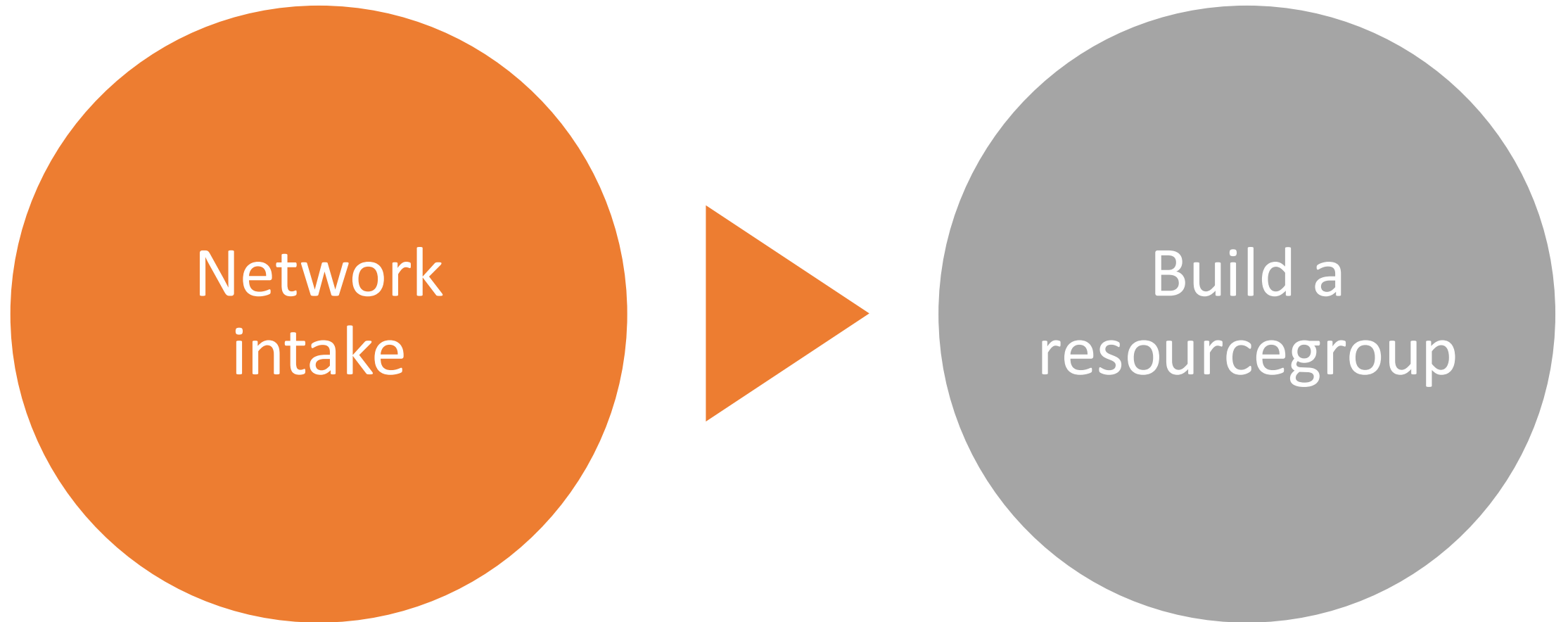


Network Psychiatry: collaboration between medical and social domain

1. On the level of the service user: resourcegroup
2. On the level of organisations: an informal network of organisations



Network Psychiatry in FACT



The Network Intake



Step 1. The client's story (what happened to you?) and making an inventory of helping and hindering factors



Step 2. What do you want to change?



Step 3. Who can help you with what?
(sociogram)

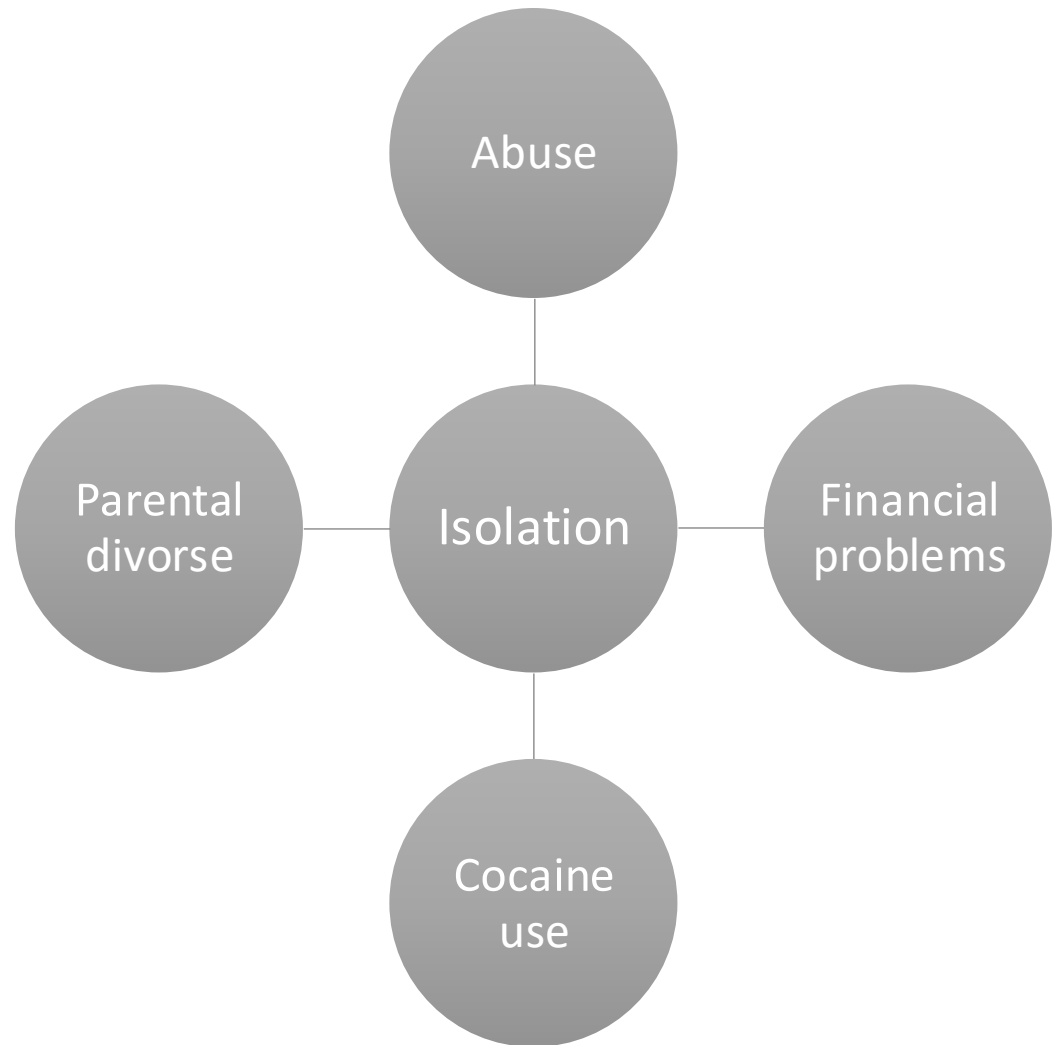


Step 4. Setting up the resourcegroup

Network intake step 1a.

The client's story:

- What happened to you?
- Where are you now?

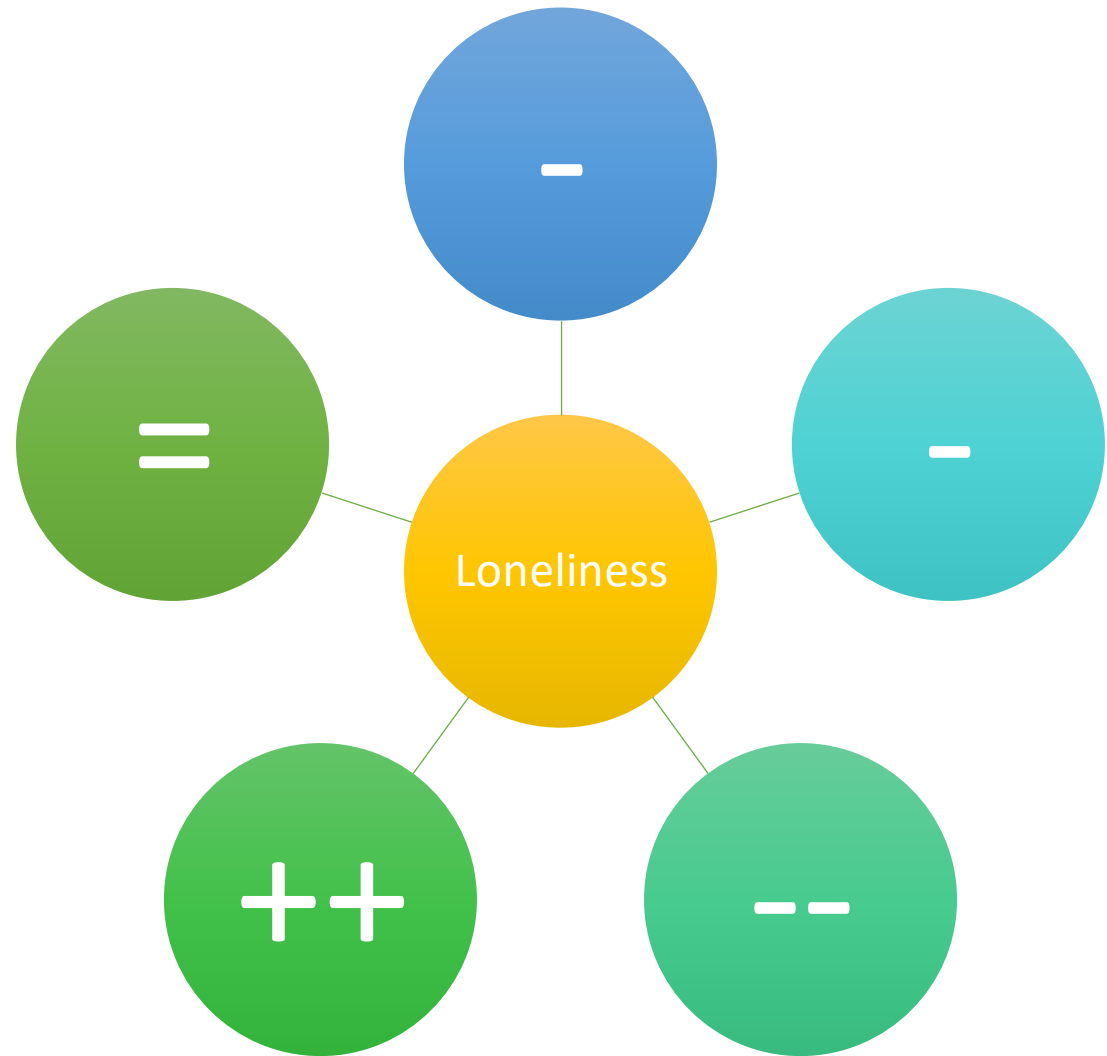


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Step 1b. helping and hindering factors:

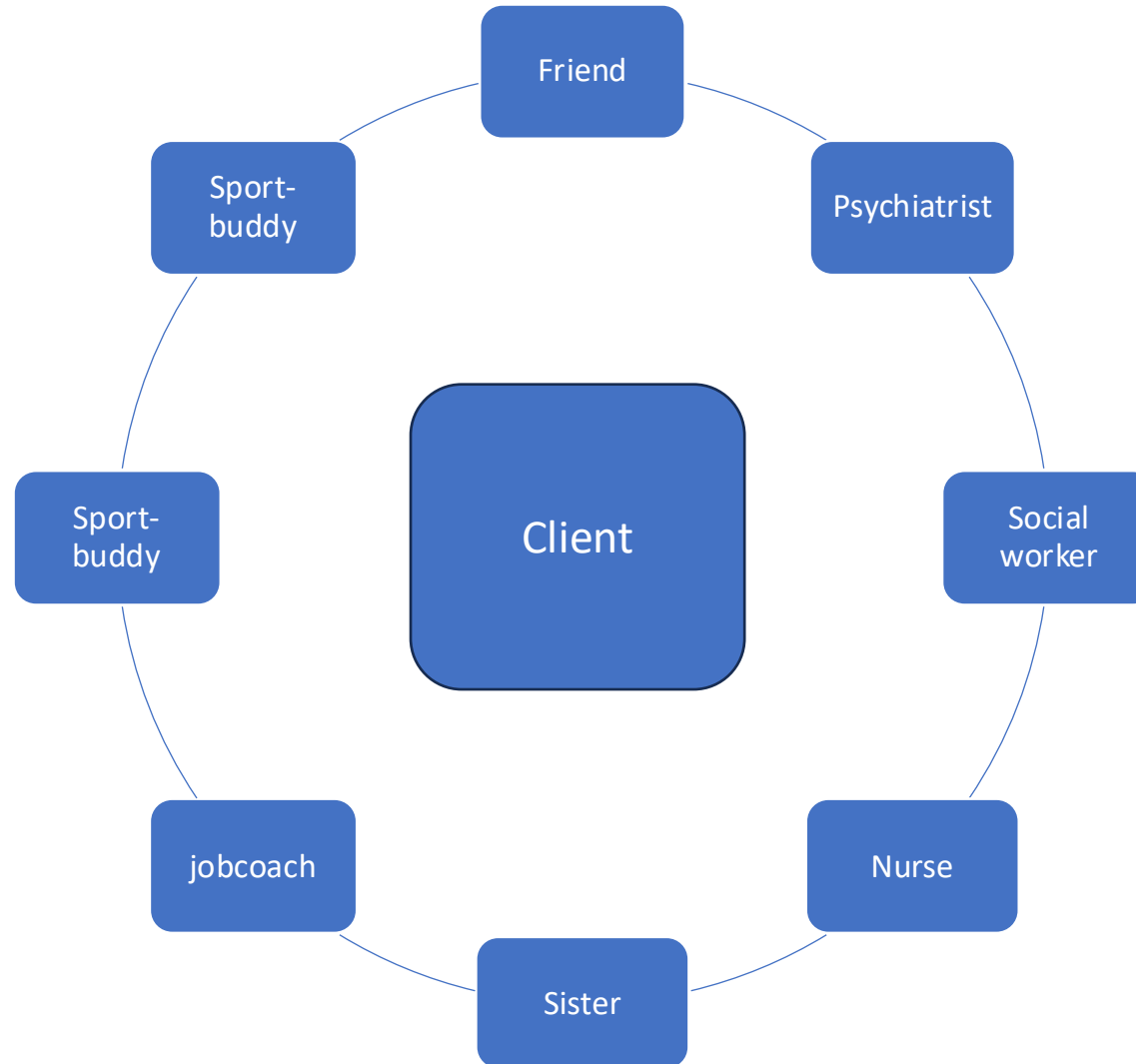
Score:

- Who/what helps you?
- What gives you courage/strengths/energy?
- Who/what stands in your way/hinders you?



This information can be displayed on a whiteboard

Step 3. Who could be involved in realizing your goals?



This information can be displayed on a whiteboard

Step 4. Setting up the Resourcegroep

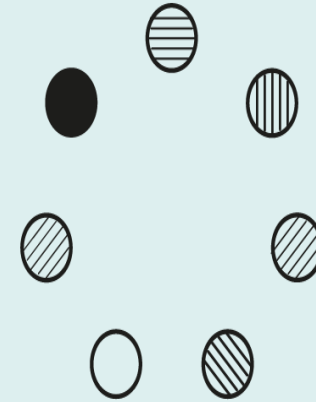
- Service user is the director of the RG
- Client nominates the members of the RG
(e.g. case manager and other (peer)worker in (F)ACT can already be the start of a RG)
- Support from case manager / peer worker



Aims of a Resourcegroup



**Create a resilient
network**



**Develop
meaningful roles**

What are the basic principles?

1. Service user is the director

- Nomination of RG members
- Targets in the RG plan
- Chairman
- Location
- Frequency of the meetings
- Developing ownership and responsibility



Front. Psychiatry 12:632437.
doi: 10.3389/fpsy.2021.632437

ORIGINAL RESEARCH
published: 12 February 2021
doi: 10.3389/fpsy.2021.632437



Interpersonal Relations Within the Context of Resource Groups for People With Severe Mental Illness: A Narrative Approach

Cathelijn D. Tjaden^{1,2*}, *Jenny Boumans*¹, *Cornelis L. Mulder*^{3,4} and *Hans Kroon*^{1,2}

What are the basic principles?

Structural involvement of significant others and activating the social environment



Experience of social support

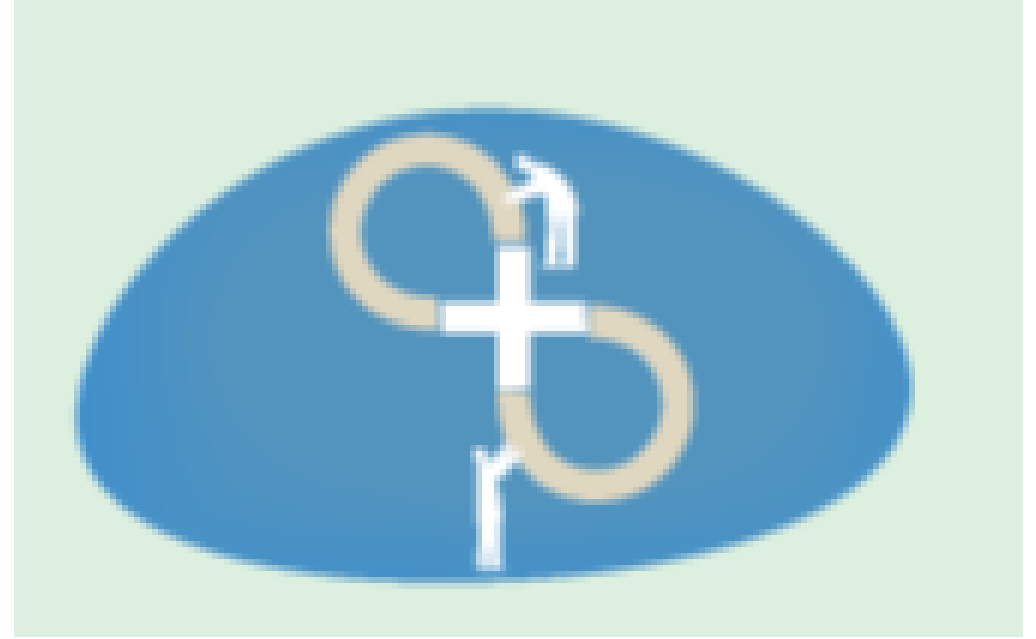
Client: yes, my resourcegroup was helpful....

Researcher: was it?

Client: yes, to have all these people in one room, that I can actually feel and see what a network I have, around me, literally. That was helpful and supporting



What are the basic principles?

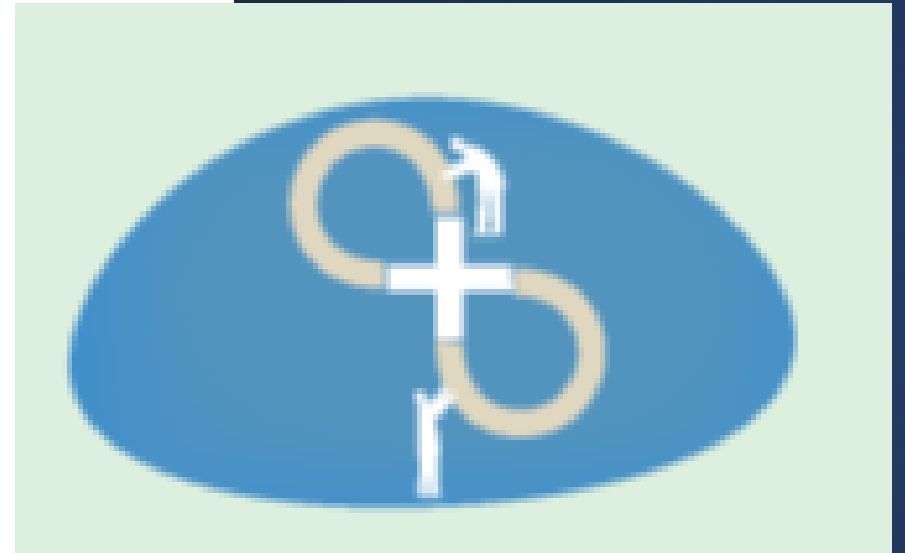


3. Continuity of care



Continuity of care

- Specific treatment (psychotherapy, medication) takes place in between the meetings of the resourcegroup
- In case of relapse/crisis: the resourcegroup can help (a crisisplan can be made within the context of the resourcegroup)
- When (F)ACT ends (part of) the resourcegroup can continue

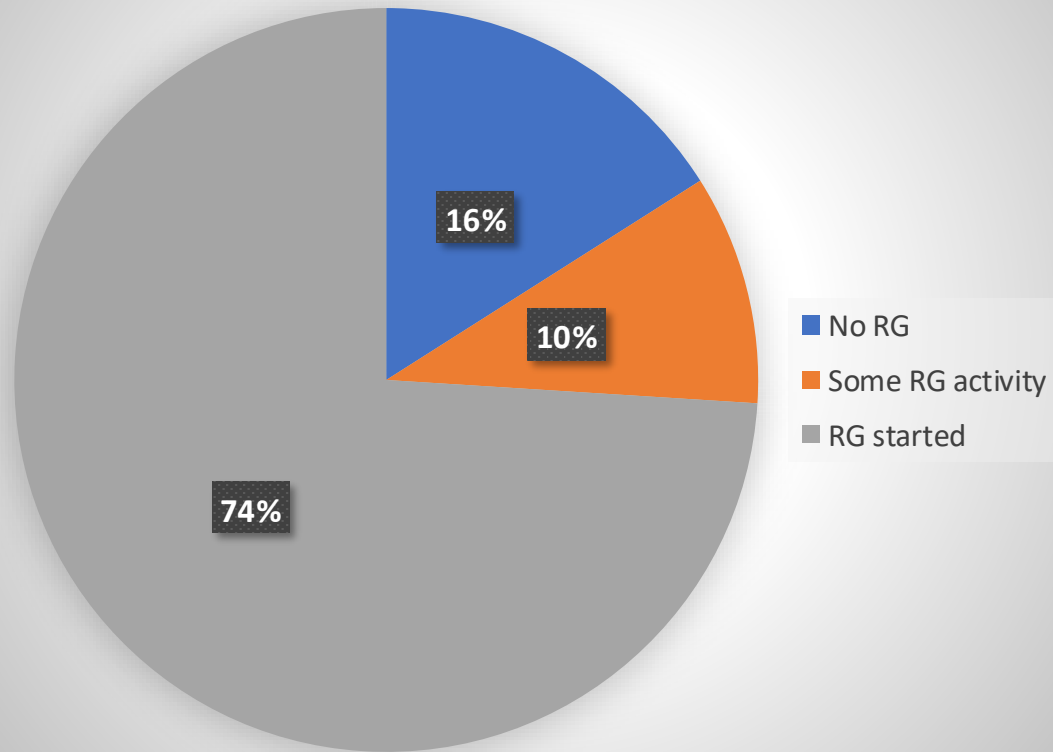


Results of working
with resourcegroups

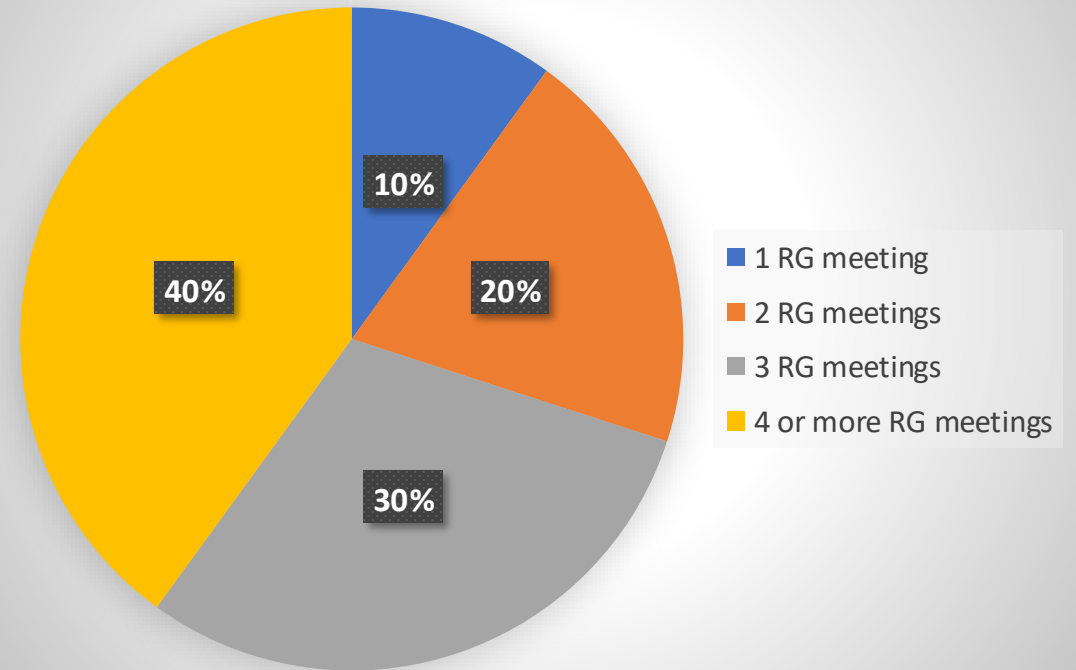


How did implementation of RG go?

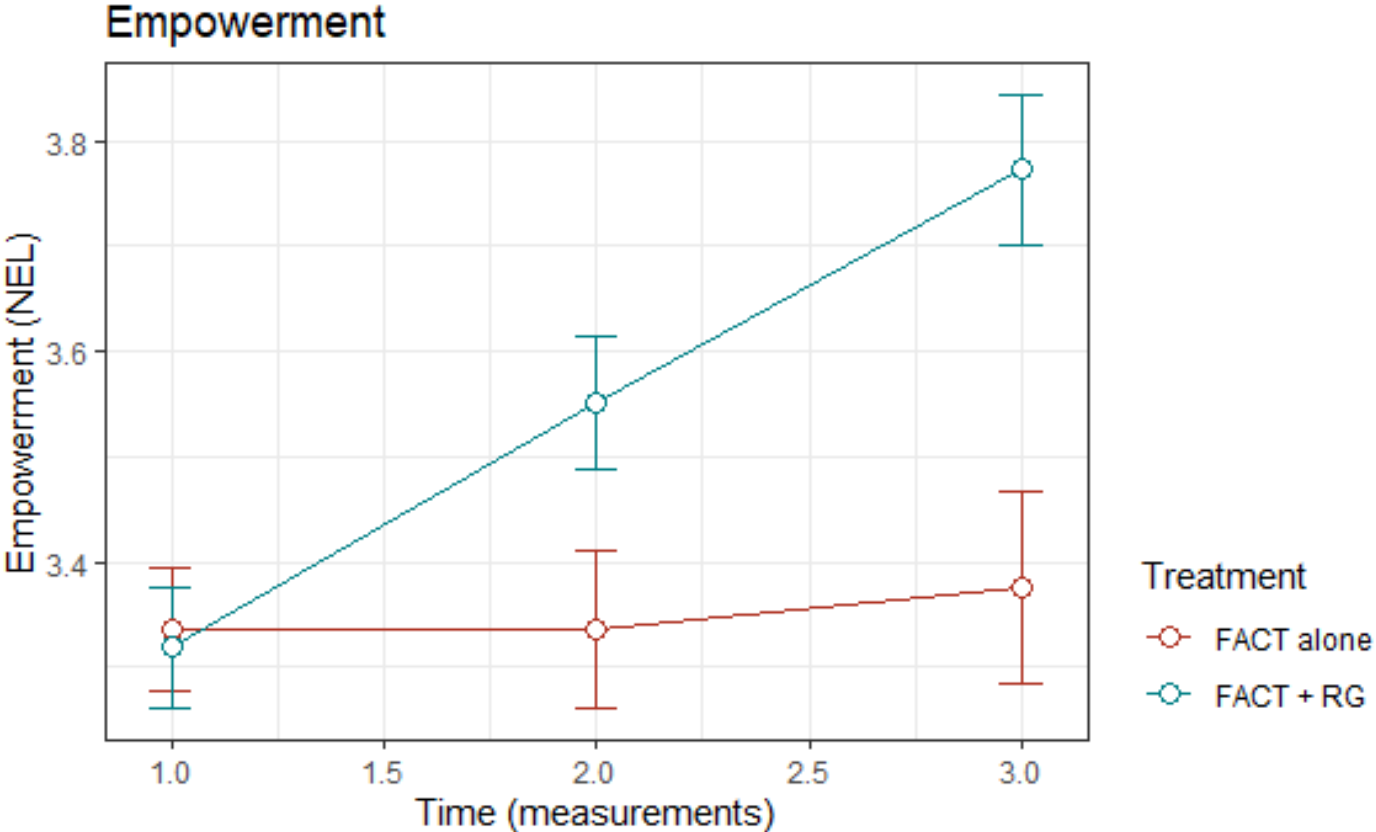
RG startup



Number of RG meetings



Primary
outcome





What is Empowerment?

- Examples of items of Netherlands Empowerment List (NEL):
 - People around me, take me for who I am
 - I know what I better could or better not could do
 - I have a goal in my life

Secondary effects of RG (Tjaden et al. JAMA Psychiatry 2021)



Positive effects on

Functioning
WHODAS, GAF
Quality of Life
Personal
Recovery (iROC)

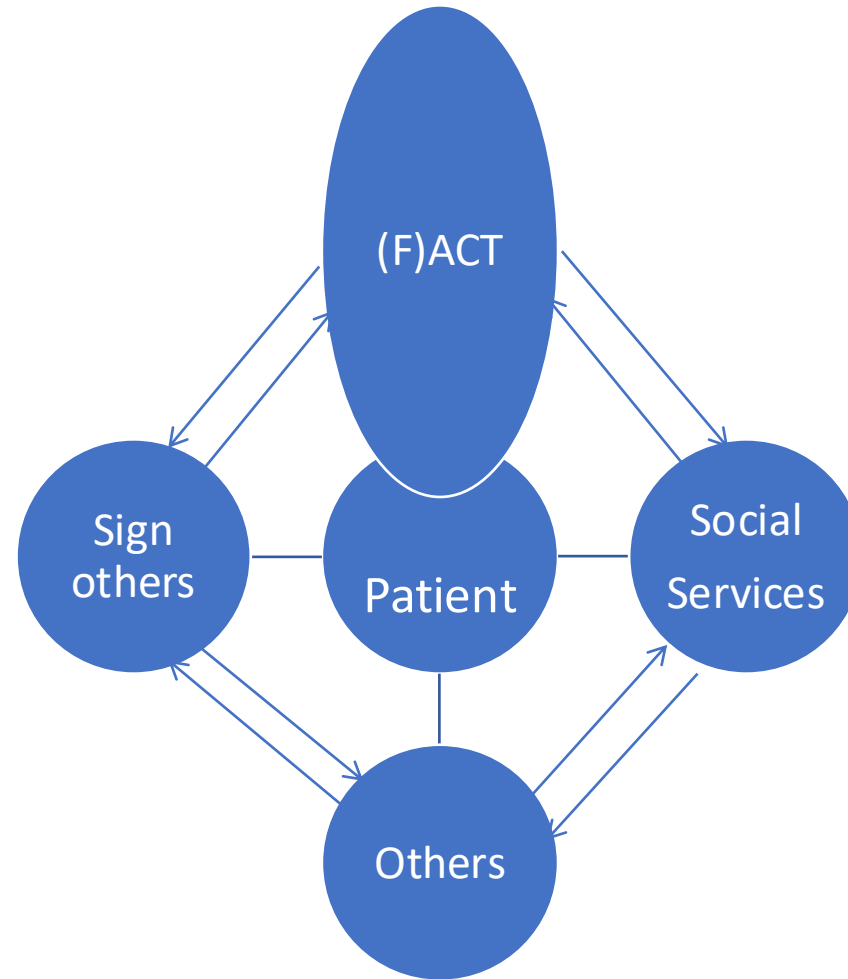


No effects on symptoms

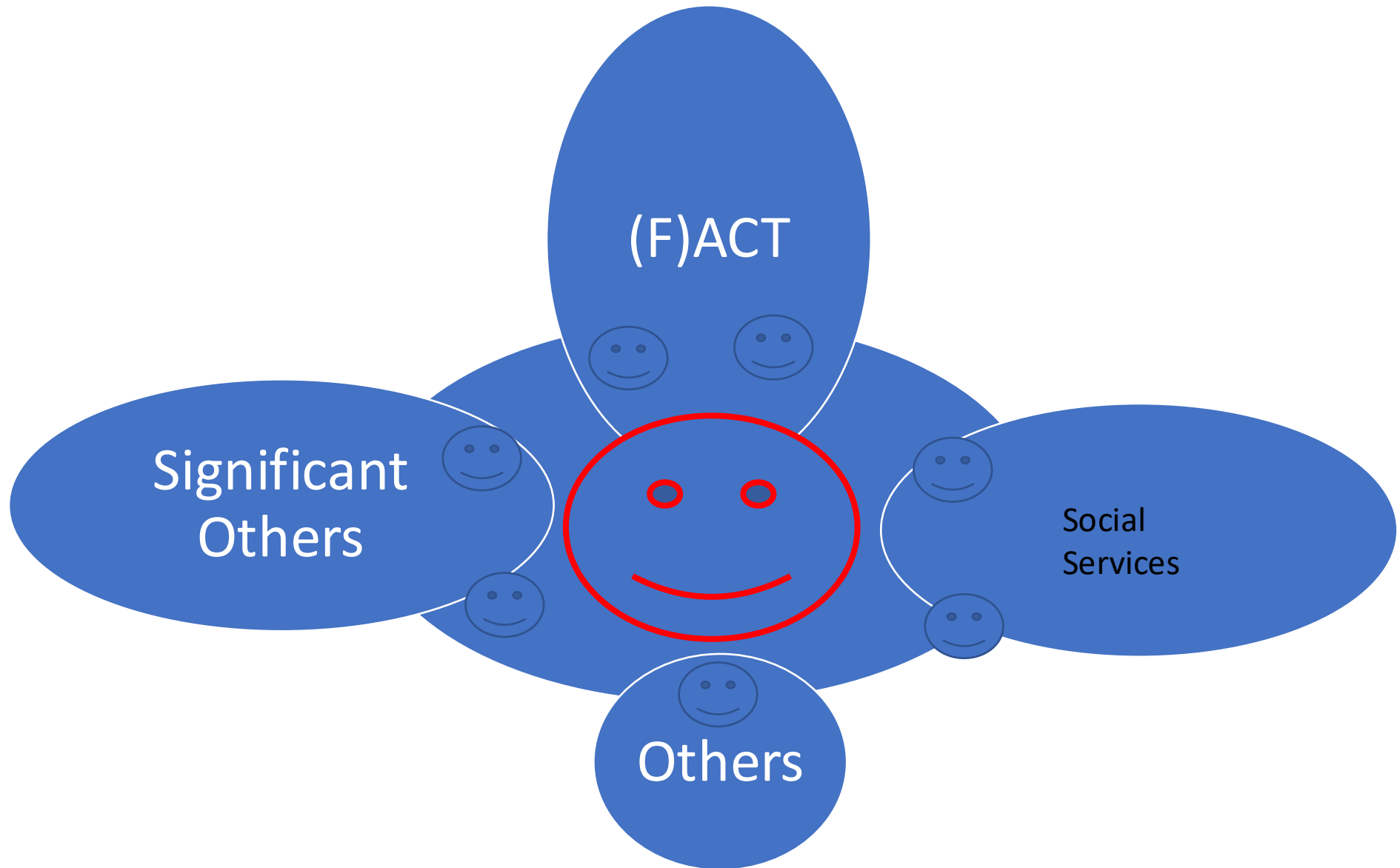


Costs: savings of 1000 CAD in 18 months

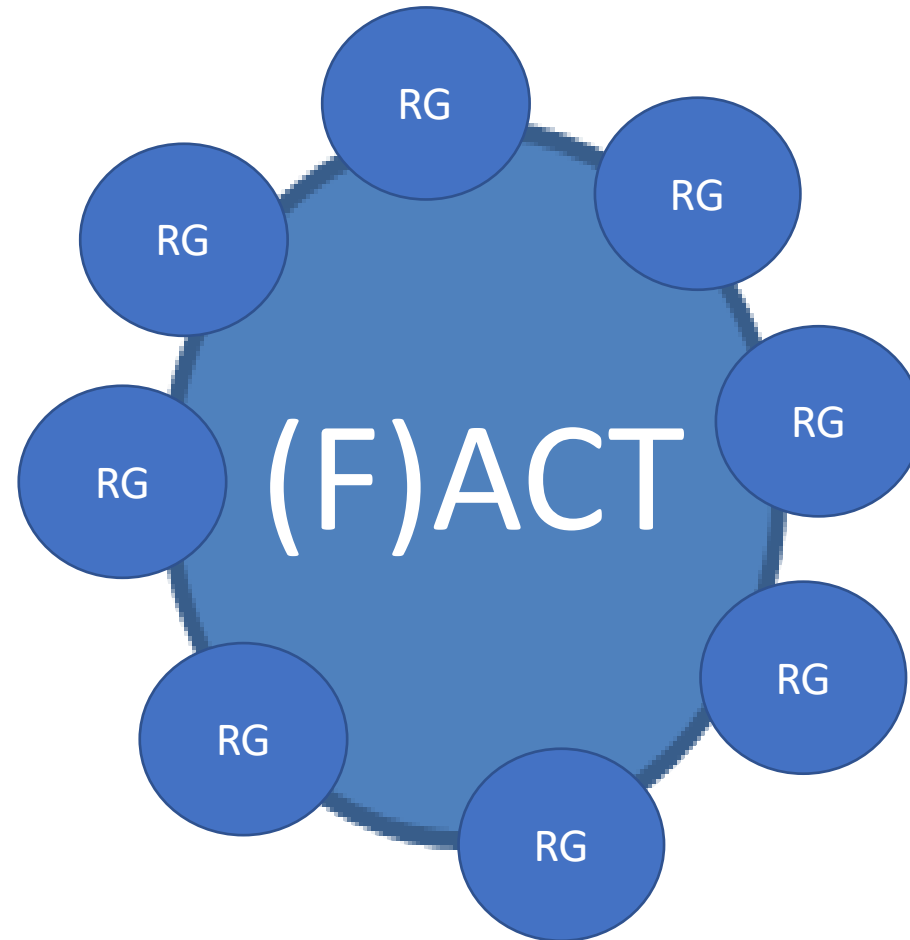
(F)ACT: old model



Resource group in (F)ACT



(F)ACT and RG



Resource group outside (F)ACT

