

Care Services Improvement Partnership **CSIP**



Key messages for commisioners
Everybody's Business

**Integrated mental health services for older adults:
a service development guide**

Setting the scene

Everybody's Business. Integrated mental health service for older adults: a service development guide was launched in November 2005.

The guide, which is being rolled out by the Care Services Improvement Partnership, is committed to:

- Improving people's quality of life
- Meeting complex needs in a co-ordinated way
- Providing a person-centred approach and
- Promoting age equality.

This document outlines the key messages for commissioners and provides a detailed checklist.

It also provides details on the web resource which supports the service development guide and the new financial and service mapping framework for older people's mental health services.

Six key messages for commissioners

1) Older people's mental health is everybody's business

Conservative estimates of mental health problems in older people suggest they are widespread, occurring in about 40% of people visiting their GP, 50% of general hospital inpatients and 60% of people who live in care homes.

Depression is present in about 12 to 15% of people aged over 65. It is more common in people with long-term medical conditions and can worsen outcome in a range of physical disorders. Depression can usually be treated.

Dementia affects one person in 20 aged over 65 and one person in five over 80. In the next 10 years, the number of people aged over 65 will increase by 15% and the number of people aged over 85 will increase by 27%.

In cost of illness studies, the direct costs of Alzheimer's disease alone exceed the combined cost of stroke, cancer and heart disease.

2) Improving services for older people with mental health problems will help meet national targets and standards

There is much that can be done to improve the quality of life of older people with mental health problems and their carers.

By taking account of the mental health needs of older people, and the predicted increase in the number of older people, commissioners can:

- improve outcomes for service users and their carers and
- achieve savings across the health economy by making health and social care services more efficient.

Due to the widespread occurrence of mental health problems in older people using health and social care services, improving mental wellbeing in older people will support the delivery of a number of national targets and standards. These include reducing emergency inpatient bed days, enabling people to live independently at home and reducing death from suicide.

3) Access to mental health services should be based on need not age

The Department of Health is committed to making sure that adults of all ages are treated fairly, with access to services based on their needs, not their age. The development and delivery of mental health services should be equitable and appropriate for all adults.

When they are developing local services, commissioners and providers have the opportunity to consider how mental health services can be user led rather than service led, while recognising the specialist service requirements of some older people with mental illness.

4) Older people need holistic care in mainstream services

The Department of Health is committed to developing health and care services that address mental health needs as well as physical health needs. Health and social care services should start from the needs of the individual, offering choice and aiming to support and maximise the wellbeing and independence of older people and their carers.

Whatever the setting, older people with mental health problems should not be discriminated against and should have their mental health needs met. It is very important to ensure that the mental health needs of older people are being met in mainstream services.

5) Workforce development is central to driving service improvement

Older people with mental health problems and their carers often have complex needs and there are few areas where the quality of the workforce matters more.

A properly skilled workforce that can meet people's needs throughout health and social care is fundamental to delivering better mental health for older people. It is essential to have a strategy for workforce development, education and training that includes mainstream staff.

Supporting the new Guide

6) **Whole system commissioning and leadership are vital to deliver a comprehensive service**

The complex nature of older people's mental health requires a whole systems response, cutting across health and social care services (linking to housing, the voluntary sector, benefits advice etc), physical and mental health and mainstream and specialist care.

Older people's mental health issues should be considered as part of any service's response to the White Paper on improving community health and care services and the vision for adult social care Independence, Wellbeing and Choice.

Strong leadership across health, social services, local authorities and the voluntary sector is essential to co-ordinate the necessary response to drive improvements in older people's mental health services in order to:

- Communicate the vision of age inclusive and holistic services
- Ensure the delivery of effective and lasting results.

Everybody's business. Integrated mental health services for older adults: a service development guide is a good practice guide, which aims to inform local discussion about developing services to improve older people's mental health. It describes the foundations and key elements of a comprehensive older adults' mental health service.

The service development guide is supported by comprehensive web-based resources for commissioners, planners and health and social care practitioners.

This includes include best practice guidance and local service examples, as well as links to relevant policy.

The Healthcare Commission and the Commission for Social Care Inspection will use the service development guide and any available data from service mapping to inform their inspection of services.

To download copies of the service development guide and access the supporting web resources visit: www.everybodysbusiness.org.uk

A checklist for commissioning services for older people with mental health problems

About this checklist

This checklist should:

- Help commissioners carry out an audit of mental health promotion and services for older people with mental health problems and
- Set out what the overall range of services should be in local health and social care communities.

It is based on *Everybody's business. Integrated mental health services for older adults: a service development guide*. This describes the foundations and main areas of a comprehensive older people's mental health service, as initially described in the National Service Framework for Older People 2001. The guide can be found at:

www.everybodysbusiness.org.uk

The framework of service domains, with key elements and key messages, was chosen as it was felt that these domains would be easily recognisable to commissioners and providers, although this has caused some problems in where to place services between the specialist and mainstream sections. It also potentially weakens understanding of how the components inter-relate, and wherever possible the service development guide reflects the relationships between these service domains.

Other useful approaches to the description of older people's mental health services can be found at:

www.olderpeoplesmentalhealth.csip.org.uk

Service and financial mapping

For the first time in 2005, the Department of Health will support service and financial mapping for specialist older people's mental health services.

It is hoped that this will prove invaluable for local providers and commissioners as a basis for commissioning discussions, as it is a transparent way of national benchmarking of service elements alongside local activity data.

Service mapping will aid understanding of local service style, in exploring how some service elements may substitute for others. It may help to identify an ageist pattern of service delivery, as well as providing the basis of a local service directory for users and carers.

Services are identified by type (described in some detail, including staff, availability and functions) and can be ascribed to individual primary care trusts (PCTs) and councils with responsibilities for social services. It is hoped that the scope of the mapping can be extended to other services in subsequent years.

For further details on service and financial mapping visit: **www.opmhmapping.org.uk**

The Healthcare Commission and the Commission for Social Care Inspection will use the service development guide and any available data from service mapping to inform their inspection of services.

Commissioning strategy

Is there a published shared vision of older people's mental health services, drawn up in consultation with users and carers and signed off by senior representatives from the following organisations:

- primary care
- the general acute hospital
- social services
- the local authority, including housing and leisure
- the mental health trust
- independent domiciliary and care-home sectors
- voluntary organisations and
- users and carers.

Is this based on evidence from the following:

- Need, within forecast populations over the next 10 years
- The domiciliary and care-home sectors
- Realistic budgets. What is the year-on-year growth and how does this match population growth?
- Current services, measured where possible. Are local services taking part in the service mapping exercise?
- A gap analysis between the elements of service recommended in Everybody's Business and the National Service Framework for Older People, and what there is currently in place.
- Use of best-practice guidance of effective interventions.

Commissioning checklist	In place	Action needed
<p>Is there a commissioning plan based on this, with monitoring and review arrangements?</p> <p>Are health act flexibilities being used to work more closely with partners?</p> <p>Do the methods for monitoring performance measure service user satisfaction, and the teaching, training and supporting roles of specialist mental health services, as well as more traditional patient-based output data?</p>		
<p>Involving older people and their carers</p> <p>Have older people with mental health problems been involved in drawing up the shared vision?</p> <p>Is there a strategy in each provider organisation for involving users, with dedicated resources and staff training?</p> <p>What evidence is there of feedback to the service users as a result of their involvement?</p> <p>Is there evidence of provider organisations involving people with mental health problems in planning services and giving feedback on their service experience?</p> <p>Are older people with mental health problems and their carers supported to make appropriate use of direct payments or individualised budgets?</p>		

Commissioning checklist	In place	Action needed
<p>Health promotion</p> <p>Is there a mental health promotion strategy for older people which deals with:</p> <ul style="list-style-type: none"> • public attitudes • staying active • social networks • standards of living • physical health and • providing easily accessed information about health promotion activities? <p>Does it:</p> <ul style="list-style-type: none"> • ensure access to mainstream health promotion services • support ‘low level’ practical home-based support • enhance community engagement to reduce isolation and increase respect • balance preventative services with intensive support and • have a method for evaluating progress? <p>Assessment and planning care</p> <p>Is there evidence of:</p> <ul style="list-style-type: none"> • all health and social care sectors adopting a common framework for assessment and care planning • assessment and care planning information being routinely shared between services and • information being shared between specialist mental health staff and mainstream staff using the single assessment process (SAP)? 		

Commissioning checklist	In place	Action needed
<p>Is there an agreed care pathway from independence to low level care and to specialist care for both dementia and functional mental illnesses (such as depression and schizophrenia)?</p>		
<p>Developing culturally appropriate services</p> <p>Has the ethnic origin of the local elderly population been assessed, with estimates of how this will change over the next 10 years?</p> <p>Have appropriate older people from black and ethnic minority groups been involved in developing commissioning plans?</p> <p>Do the plans consider:</p> <ul style="list-style-type: none"> • how appropriate services are and how easy they are to get access to • community engagement and • providing better information on health promotion and services for older people from black and minority ethnic groups? 		
<p>Workforce</p> <p>Is there a local joint workforce development plan that includes provision for staff working with older people with mental health problems?</p> <p>Are there adequate plans for training of mainstream staff in the recognition and initial management of older people with mental health problems?</p> <p>Are primary care graduate workers, Support Time and Recovery workers and community matrons case-managing older people with mental health problems where appropriate?</p>		

Commissioning checklist	In place	Action needed
<p>Leadership</p> <p>Is there a named individual who is responsible for commissioning older people’s mental health services?</p> <p>Is there joint leadership across organisations to achieve the joint vision?</p> <p>Are provider organisations adequately prioritising OPMH services in leadership training opportunities?</p>		
<p>Primary care</p> <p>Are GPs using brief assessment tools to check for depression and dementia?</p> <p>Is there evidence of training for primary care staff on older people’s mental health issues?</p> <p>Have older people with mental health problems been included in initiatives such as:</p> <ul style="list-style-type: none"> • putting into practice the long-term conditions model • involvement in a primary care mental health collaborative and • development of a disease register for people with severe mental illness? 		

Commissioning checklist	In place	Action needed
<p>Home care</p> <p>Are home care staff adequately trained in mental health awareness and communication skills?</p> <p>Is care provided to support people at home 24 hours a day, every day?</p> <p>Does this link with:</p> <ul style="list-style-type: none"> • A&E diversion schemes and • telecare and assistive technology schemes? <p>Is there a 24-hour facility for crisis response for older people with mental health problems?</p> <p>Day services</p> <p>Is there a range of day services that meets the needs of older people with physical and mental health problems?</p> <p>Is there training by members of the local mental health team?</p> <p>Are day services socially inclusive for older people with mental health problems, and do they promote independence and wellbeing?</p> <p>Is there a waiting list for day care that meets a particular level of need? If so, is this acceptable or does it have unforeseen consequences?</p> <p>Are day hospital or treatment services being used appropriately for short-term assessment and therapeutic interventions?</p>		

Commissioning checklist	In place	Action needed
<p>Housing</p> <p>Is housing an integral part of the strategy for older people with mental health problems?</p> <p>Are older people with mental illness supported with a range of low-level practical support to enable them to live in their own homes for longer?</p> <p>Are telecare services and community equipment easily accessible for older people with mental illness?</p> <p>Are there staff skilled in working with people with mental illness and assistive technology?</p> <p>Is telecare supported by community-based staff 24-hours a day, every day?</p> <p>Is there a range of suitable housing which can be adapted for an older person as they become mentally or physically more frail?</p> <p>Is training on mental health issues in older people set up for housing staff?</p> <p>Care homes</p> <p>Are independent-sector providers involved in long-term joint planning to meet the needs of older people with mental health problems?</p> <p>Is there an appropriate mix of homes registered to look after people with mental health problems?</p> <p>Are there effective discussions between providers and inspectors on the issues of registration, diagnosis, care needs and training, so that there is adequate training of care home staff and people who develop dementia do not automatically have to move home?</p>		

Commissioning checklist	In place	Action needed
<p>Intermediate care</p> <p>Do intermediate-care services include people with mental health problems?</p> <p>Are there specific rehabilitative facilities for this group?</p> <p>Is there mental health training and in-reach by community mental health team staff to support mainstream staff, and easy access to advice and other support from specialist mental health services when necessary?</p>		
<p>General hospital</p> <p>Is there explicit commissioning of specialist mental health support for older people in the general hospital?</p> <p>Is there adequate training for staff on mental health issues?</p> <p>Is there evidence of the use of simple assessment tools, and the use of initial management and referral pathways?</p> <p>Is good practice with regard to the discharge of people with dementia followed?</p> <p>Is there monitoring of the level of mental health problems in people whose transfer is delayed?</p> <p>Is there adequate protection to prevent people from being transferred to institutional care without appropriate rehabilitation?</p>		

Commissioning checklist	In place	Action needed
<p>Specialist community mental health services for older people</p> <p>Is there an adequate multidisciplinary and integrated health and social care team?</p> <p>Do service users and their carers get easily accessible information and signposting to services early in their illness?</p> <p>Do service users know who their key worker is at all times, even when they have been discharged from the specialist service?</p> <p>Is there access to support 24 hours a day, every day?</p> <p>Does the team have sufficient capacity to train and support mainstream services as part of its work?</p> <p>Is the team fully involved in sharing information with mainstream partners as part of the single assessment process?</p> <p>Have services developed a care planning system that dovetails specialist mental health assessment with the single assessment process?</p> <p>Can the community team provide home-based assessment and treatment in a timely manner?</p> <p>Is the full range of mental health treatment available to older people based on their needs, not their age?</p> <p>Is there clear guidance on access to alcohol and drug advisory services?</p> <p>Are early intervention services available to people with mild dementia?</p> <p>Is there adequate access to a range of psychological therapies which do not discriminate against older people?</p>		

Commissioning checklist	In place	Action needed
<p>Inpatient services</p> <p>Is there adequate involvement of users and carers in giving feedback on their service experience and in helping plan service delivery on the ward?</p> <p>Is the physical environment and structure of the day organised to maximise independence and enable people?</p> <p>Is there adequate availability of general medical support in terms of access to investigative procedures and specialist medical advice?</p> <p>Is there a low enough bed occupancy level to allow prioritisation of community emergencies?</p> <p>Are delayed transfers of care being monitored?</p> <p>Is there easy-to-access information, for services users and their carers, on registered nursing care contribution and continuing care?</p>		
<p>Special groups</p> <p>Is there a strategy for the interface between learning disabilities and older people's mental health services?</p> <p>Is there a named person responsible for commissioning services for younger people with dementia?</p> <p>Is there a named clinician responsible for taking referrals for younger people with dementia and a close working relationship between this clinician and neurology services?</p> <p>Do older people in prison get the same access as others to specialist mental health assessment and treatment?</p>		

DH INFORMATION READER BOX

Policy	Estates HR / Workforce Management Performance IM & T Planning Finance Clinical Partnership Working
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Contact Details	Kate Hardy Older People & Disability Division, Directorate of Care Services Department of Health, 133 -- 155 Waterloo Road London SE1 8UG 020 7972 4039
For Recipient's Use	

Everybody's Business. Integrated mental health for older adults: a service development guide is being rolled out by the Care Service Improvement Partnership, which was established in April 2005 to support improvements in services and in the wellbeing of a number of service user and patient groups.

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