Services for Older People with Mental Health Problems: The Impact of the National Service Framework

Sue Tucker, Jane Hughes and David Challis*

The enhancement of community-based care and the provision of mental health services that are comprehensive, accessible, responsive, individualised, multidisciplinary, accountable and systemic are broadly universal aims (WHO/WPA, 1997). Not all areas can live up to such aspirations however, and past reports have highlighted considerable differences in the provision of health and social care for older people with mental health problems in England (Alzheimer’s Disease Society, 1997; Audit Commission 2000, 2002). The publication of the National Service Framework for Older People (NSFOP) (DH, 2001) was thus widely welcomed as an attempt to address these inconsistencies and drive up the quality of care.

An essential component of the NHS Plan (DH, 2000), the NSFOP sets out a ten-year programme of action and reform based around the achievement of eight standards. While standard seven specifically addresses the provision of integrated mental health services, other aspects of the programme, including the elimination of age discrimination and the delivery of ‘person-centred’ care, would also be expected to make a significant impact on the experience of older people with mental health problems. However, subsequent progress reviews have made little mention of the development of mental health services.

In 2004, the PSSRU at Manchester, working in conjunction with the Royal College of Psychiatrists Faculty of Old Age Psychiatry, undertook a study to provide a more detailed picture of the extent to which, some three years after its publication, old age mental health services were delivering the Framework’s goals. The study took the form of a cross-sectional survey of consultant psychiatrists, working in England and specialising in the care of older people. A self-administered structured postal questionnaire, with items firmly grounded in the guidance of the NSFOP, explored four key domains:

- The range of specialist mental health services provided for older people
- The nature of the interface between specialist mental health services and generic services caring for older people
- The degree of interdisciplinary/interagency working
- The extent to which services for older people with mental health problems were person-centred.

More than 300 consultants responded, representing nearly 90% of trusts providing mental health services. Considerable differences were reported in each domain, with variation both within and between trusts. While a handful of respondents described well-resourced, comprehensive services, and many felt that their services were developing, provision in most areas appeared to be patchy and inconsistent. There were particular concerns about the issues detailed in box 1.

Box 1 Psychiatrists’ particular concerns
- The lack of availability of certain professional groups seen as core to the provision of multidisciplinary services
- The inability of community services to meet client needs
- Increasing referral rates and workloads
- The nature of the relationship between health and social services
- The lack of effective information systems
- The difficulties of providing adequate support to generic services caring for older people with mental health problems

References