

## **7.2 Older People's Mental Health**

Good mental health in older age is just as important as physical concerns. Indeed poor mental health in old age will inevitably contribute to physical deterioration. Therefore mental health problems in old age should be treated as vigorously as physical health problems in that age group and mental health problems in younger people. It is estimated that between ten and twenty percent of older people (aged 65 years or over) suffer from serious mental health problems. Hence there is need to develop standards specific to the mental health of older people. However, the generic mental health standards for people of all ages within this document apply equally to older people.

Serious mental health problems seen in older people include long term conditions persisting from earlier in life as well as depression occurring for the first time in old age which can both precipitate and exacerbate the condition. The so called "organic" conditions including Alzheimer's disease and other dementing illnesses predominantly occur in older age groups. Particular skill is required in their early identification and management.

Early identification, diagnosis and intervention is crucial in the care of people with dementia. A strategy for dementia is currently being developed for Northern Ireland and specific standards for dementia will be developed following its completion.

## Overarching Standard 46: Older People's Transition

A person with severe and enduring mental illness who are approaching the age of 65 years should have a review to assess whether their needs are best met in existing adult mental health services or older people mental health services. This should take into account the views of the individual, their families and carers and should be reviewed on an annual basis thereafter.

### Rationale

Services should take account of each individual's need rather than their chronological age.

### Evidence

Bamford Review: Living Fuller Lives: Dementia and Mental Health Issues in Older Age Report (June 2007) [http://www.rmhdni.gov.uk/living\\_fuller\\_lives.pdf](http://www.rmhdni.gov.uk/living_fuller_lives.pdf)

DOH (2001) National Service Framework for Older People

[http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_4003066](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_4003066)

### Responsibility for delivery/implementation

Trusts – Adult Mental Health Services

### Quality Dimensions

**Person Centred** – Older people, what is important to them, their family and friends are central to the planning and delivery of health promotion activities and material. Options should be explored in regard to what would work best for them given their unique context and lifestyle.

**Timely** – takes consideration of service boundaries and barriers

**Efficient** – Appropriate resources would be available

**Effective** – Appropriate care being delivered in the correct setting

**Equitable** – Addresses ageism and inequity

**Safe** – Provides an appropriate age related consideration of need

Performance Indicator	Data Source	Anticipated Performance Level	Date to be achieved by
Percentage of people in Adult Mental Health services between 64 and 65 years old who have had a review which incorporates transition planning in the previous 12 months.	HSC Trust report (No of people age 64-65 and no of reviews undertaken)	Establish baseline  Performance levels to be determined once baseline established	March 2013

## **Overarching Standard 47: Older People's Assessment and Early Intervention**

Older people (age 65 years and over) should have access to a comprehensive older people's mental health service including mental health promotion, early detection and diagnosis, assessment and treatment and support for carers. Any older person experiencing mental health problems should have access to appropriate physiological investigation and screening by Primary Care to rule out potential physical conditions and to inform referral decisions. Following any initial diagnosis they should have an early comprehensive assessment using an appropriate assessment tool, followed by appropriate interventions and/or onward referral to specialist mental health services and/or other services as appropriate.

### **Rationale**

As longevity increases, there will be an increased proportion of people living in the community who can present with mental illness. Around 15% of older people are affected by mild to moderate depression. Dementia is a progressive neurodegenerative disorder that affects cognitive functioning causing behavioural disturbance and reduced activities of daily living.

It is important that older people are assessed in order to detect any Mental Health problems including Dementia. This will allow early intervention, signposting to appropriate services and information provided from a wide range of community, statutory and voluntary organisations.

Older people may have a possible mental health problem as the result of an underlying medical condition which should be treated in the first instance.

### **Evidence**

Bamford Review: Living Fuller Lives: Dementia and Mental Health Issues in Older Age Report (June 2007) [http://www.rmhdni.gov.uk/living\\_fuller\\_lives.pdf](http://www.rmhdni.gov.uk/living_fuller_lives.pdf)

Royal College of Psychiatrists (2006) Raising the standard – specialist services for older people with mental illness. Report of the Faculty of Old Age Psychiatry. <http://www.rcpsych.ac.uk/PDF/RaisingtheStandardOAPwebsite.pdf>

DOH (2004) Integrating Older Peoples Mental Health Services. Commissioned by the Children, Older People and Social Care Policy Directorate <http://www.nmhdn.org.uk/silo/files/integrating-opmh-services.pdf>

Social Care Institute of Excellence (SCIE) Guide 3 Assessing the Mental Health needs of Older People, April 2006 <http://www.scie.org.uk/publications/guides/guide03/index.asp>

### **Responsibility for delivery/implementation**

Trust – Mental Health and Older People Directorates  
General Practice and Primary Care in partnership with Voluntary / Community Groups

## Quality Dimensions

**Person Centred** – Access to mental health services should be accessible for older people. Options should be explored in regard to what would work best for them given their unique personal history, context and lifestyle.

**Efficient** – Pro-active services

**Effective** – Good Practice Initiatives (see Living Fuller Lives and Older Docs)

**Safe** – A comprehensive service would minimise the risks associated with living with dementia.

<b>Performance Indicator</b>	<b>Data Source</b>	<b>Anticipated Performance Level</b>	<b>Date to be achieved by</b>
Establish current level of service provision	HSC Trust report	Establish baseline  Performance levels to be determined once baseline established	March 2013
Percentage of older people who have access to the full range of older people's mental health services	HSC Trust report to indicate services available	Establish baseline  Performance levels to be determined once baseline established	March 2013
Percentage of older people in receipt of services who have had a holistic review including mental health assessment	HSC Trust report	Establish baseline  Performance levels to be determined once baseline established	March 2013