

# Audit tool for achieving age equality in health and social care

## B2.3: Mental health services

### B2.3.1: Access to high quality, specialist mental health services by age

#### RED

Older people access a limited range of age-differentiated mental health services. There is limited access to out of hours and crisis management services for older people, and there is no expectation that crisis, outreach, liaison or home treatment teams should cover all ages over 18.

#### AMBER

People can access a range of mental health services to meet their individual needs on a 24-hour, seven day a week basis, but the nature, range and timing of these services and interventions varies by age.

#### GREEN

People of different ages have equal access to a comprehensive range of mental health services and support across primary and secondary health and social care services, including crisis resolution, home treatment services and assertive outreach services. Clear protocols are used to facilitate a smooth transfer of individuals from adult to specialist older people's services where age differentiated services exist, and these make it clear that age may be a guide but is not an absolute marker for determining which service is most appropriate.

### **B2.3.2: Hospital admission rates for mental health diagnoses**

#### **RED**

Admissions to inpatient mental health services and general hospitals for people over 65 are inexplicably low/ high compared to referrals for people under 65 for the same conditions/ diagnoses; length of hospital stays are inexplicably longer for people over 65 years.

#### **AMBER**

Information on admissions to and lengths of stay for inpatient mental health services and general hospitals highlight differences by age, eg as a result of fewer alternatives to inpatient admission for older people. These differences are being addressed in local commissioning and service delivery plans.

#### **GREEN**

A range of alternatives to general and specialist hospital admission exist which are accessed by all age groups. There is evidence that admission rates to and lengths of stay in inpatient services are equitable across different age groups and for those experiencing multiple discrimination, with follow up support provided on an individual basis to avoid unplanned readmissions.

### **B2.3.3: Management and support for people with dementia, delirium and depression in general hospitals by age**

#### **RED**

Hospital environments are not safe, therapeutic or welcoming of older people with mental health problems, including dementias, delirium and depression and hospital staff are not trained in recognising, understanding and responding to the differences between these conditions. Waiting times for social care assessment vary by age and there is poor access to rehabilitation services.

#### **AMBER**

Protocols to guide the treatment and support provided to older people with dementias, delirium and depression in hospital are in place but are inconsistently applied.

#### **GREEN**

Person-centred approaches underpin the way that all older people are supported in hospitals, including people with diverse mental health problems, and staff are trained, confident and competent in responding to their individual needs. Waiting times for social care assessment do not vary by age and there is good access to rehabilitation services for all age groups.

#### **B2.3.4: Percentage of people accessing alcohol and drug services by age**

##### **RED**

There is no information available on access to/ take up rates of alcohol and drug services by people over 65.

##### **AMBER**

Percentage of people over 65 accessing drug and alcohol services is known, but this information is not used to inform local provision of treatment/ support services to meet local older people's needs.

##### **GREEN**

Older people with drug and/or alcohol related support needs are able to access appropriate treatment and support from primary as well as specialist secondary health and social care, including specialist interventions, services and support where necessary.

### **B2.3.5: Organisation, funding and delivery of mental health services for people by age**

#### **RED**

Mental health services are commissioned and provided separately on the basis of age with no reference to guidance. There is evidence that less money is spent on mental health services for people over 65 than for people aged 18-64, taking all other factors into account (including nature and severity of mental health conditions).

#### **AMBER**

An action plan has been drawn up to ensure local services are non-discriminatory, with the aim of commissioning services to meet local needs and trends of different mental health problems/ conditions by age.

#### **GREEN**

People of all ages are positive about their experiences of mental health services including initial contact and assessment; responsiveness, knowledge and competence of staff; range and quality of treatment, interventions and support; information, advice and advocacy support and level of choice and control throughout the period of support. Provider organisation's policies are impact assessed to ensure they are non-ageist and local provision is based on an underpinning principle that treatment and care is always provided on the basis of each individual's needs, not their age, in line with the features of non-discriminatory mental health services.