

Mental health in old age

This section considers both mental illness in age group 65+ and dementia (all ages).

Depression and anxiety

Everybody will experience times of feeling low or miserable but when these feelings persist or interfere in daily life then a person could be suffering from depression. Depression can range from mild depression which can make daily tasks harder to do to severe clinical depression which can be accompanied by suicidal thoughts or ideations.

Anxiety disorders encompass a range of disorders where a person's worry or fear has a significant impact on their life. These can range from a specific phobia about a certain object or event to a generalised anxiety disorder characterised by anxiety about a range of situations or issues. People with anxiety disorders are more likely to suffer from depression than people without an anxiety disorder.

Many older people experience psychological or emotional distress and depression associated with factors linked to old age, including isolation, loss of independence, loneliness, physical illness and/or disabilities and losses of many kinds, including bereavements.

Information provided by the [Mental Health Foundation](#) suggests that nationally; depression affects 1 in 5 older people living in the community and 2 in 5 older people in care homes. An estimated 2 to 4% have severe depression. Estimates based on [McDougall et al's](#) (2007) study suggest that around 1,200 older people living in Slough are estimated to have depression with numbers rising slightly year on year.

Dementia

Dementia is a common condition which results in the decline in a person's memory, judgement, understanding, language, and thinking. It is associated with memory loss, problems with reasoning and communication, and a reduction in a person's ability to carry out daily activities such as washing, dressing and cooking. The most common types of dementia are: Alzheimer's disease, vascular dementia, mixed dementia and dementia with Lewy bodies. Dementia is a progressive condition, which means that the symptoms will gradually get worse.

Dementia is most commonly found in people aged over 65 years of age although people younger than this can suffer from early-onset dementia. It is predicted that the numbers of people affected with dementia will rise nationally. In Slough the numbers of people with dementia is estimated to rise year on year and by 2025 it is expected to affect 1261 people.

According to the [Alzheimer's Society](#), there are around 850,000 people in the UK with dementia. One in six people aged 80 and over have dementia and two thirds of people with dementia are women. There are 40,000 younger people with dementia in the UK. There are 25,000 people with dementia from black and minority ethnic groups in the UK. The number of people with dementia is increasing because

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people are living longer. There are 670,000 carers of people with dementia in the UK. It is estimated that by 2025, the number of people with dementia in the UK will have increased to around 1 million.

The mental health of older people impacts upon acute general hospitals and care home populations as 50-80% of care home residents can be expected to suffer from dementia. To illustrate, a typical district general hospital with 500 beds will admit 5,000 older people each year and 3,000 will suffer a mental disorder in addition to the physical disorder for which they were admitted. On average, older people will occupy 330 of these beds at any time and 220 of these will have a mental disorder.

What do we know?

Latest information from [Projecting Older People Population Information \(POPPI\)](#) shows that the ethnicity of people aged over 65 in Slough is predominantly White (68.6%). 24.3% are from an Asian or Asian British background and 4.63% from a Black or Black British background.

Dementia prevalence and projection for Slough

Figure 1 shows the number of people in Slough predicted to have early onset dementia up to 2030.

Figure 1: Number of people predicted to have early onset dementia

Slough	2014	2015	2020	2025	2030
Total males aged 30-64 predicted to have early onset dementia	18	18	20	22	24
Total females aged 30-64 predicted to have early onset dementia	12	12	14	15	16
Total population aged 65 and over predicted to have dementia	962	992	1,090	1,261	1,482

Source: [Projecting Older People Population Information and Projecting Adult Needs and Service Information \(2013\)](#)

GP registrations: 516 people (0.34% of the population) are recorded on Slough GP registers as having dementia, according to the [Quality and Outcomes Framework](#) up to March 2015. This is significantly below the expected number for Slough and is expected to rise following joint undertakings between Practice surgeries, the Slough Memory Clinic and Slough CCG.

Social Situation: Slough Borough Council's Adult Social Care Survey asked Service Users about their social situation in 2011-2012. The [Health and Social Care Information Centre's results](#) show that Older People accessing services in Slough reported that they felt they have less social contact than the national or South East regional response. The majority did, however, feel that they have at least adequate social contact.

Current activity and services

What are the services?

Services are commissioned from Berkshire Healthcare NHS Foundation Trust:

Slough Memory Services – based at Upton Hospital

The Memory Clinic provides specialist assessment and treatment of memory problems at early to moderate stages of dementia as defined by National Institute of Health and Clinical Excellence (NICE). The Clinic offers assessment, prescription of anti-dementia drugs, medication management and monitors effectiveness of medications, as well as side effects. Being informed initially about a new diagnosis, especially a type of dementia, can be very emotionally distressing for patients and their carers, hence The Memory Clinic also offers other therapeutic support, advice and counselling to patients and carers as required.

The valuable role played by Carers is acknowledged in The Clinic who also provide advice and information to carers to support them through the caring process so that they are able to manage and care for their relative at home for as long as is possible.

In addition to the outpatients clinics offered, the staff also facilitate groups, such as a Cognitive Behaviour Therapy group, Cognitive Stimulation Therapy, Dementia Information Group to provide information and advice about various aspects of Dementia to carers, patients and other interested parties.

Slough Older Persons Mental Health Liaison service

Alzheimer's society report in 2009 recommends commissioning specialist liaison older people's mental health teams to facilitate the management and care of people with dementia in hospitals. Prior to 2013, Older people mental health liaison team (OPMHLT) in East Berkshire was nurse led with 2 nurses. In July 2014 with increased funding from CCG in East Berkshire, capacity in the team has increased to offer 9 staff (consultant liaison psychiatrist, nurses, social worker, Occupational therapist and psychologist). The Liaison service provides early and effective advice, diagnosis and management of patients with dementia in the acute setting, such as Heatherwood and Wexham Park Hospital/ Frimley, community hospitals and hospice. Assessment is provided for patients of any age with dementia and mental health needs in older people. The service facilitates diagnosis, appropriate treatment and timely discharge for patients by offering rapid mental health assessment and treatment for patients, advice to acute trust clinicians, and collaboration with discharge teams. They also offer a training programme to hospital staff to understand the effects of dementia in order to decrease the risk of mis-diagnosis;

Home Treatment Team- based at Upton Hospital

The Home Treatment Team is a multi-disciplinary team of mental health staff, which operates every day from 9am -7pm. They offer mental health assessment and short-term intensive treatment and support to older people who are at significant risk and need intensive support in their homes to prevent hospital admission. This is usually during the acute phase of their mental illness as an alternative to hospital admission. The service also assesses and treats individuals who have disengaged from their treatment plan where there is an urgent need to re-establish medication or treatment.

Older Persons Mental Health In Patients service- situated at Prospect Park Hospital, Reading

Two wards, namely Rowan and Orchid, situated at Prospect Park Hospital, hosts 40 inpatient beds and care for older adults from the 6 localities in Berkshire. The wards provide assessment and treatment to patients with severe and/or enduring conditions such as bipolar disorder, schizophrenia and dementia.

Community Mental Health Team for Older persons

This service is jointly provided with Slough Borough Council to meet mental health and social care needs and is based at Upton Hospital.

The Service provides assessment and treatment to older people with complex mental health problems (either functional or due to Dementia) requiring the expertise of health and social care professionals who specialise in conditions associated with later life. Entry to the service is not defined by age, but is based on needs; typically associated with mental illness complicated by physical health conditions associated with later life, consequently the average age of people using the service is 80 years. The service provides assessment and treatment, for:

- functional mental illness - older people with severe mental illness including psychosis, anxiety and depression presenting de novo in later life
- dementia - for people of any age with a Dementia- Illnesses such as Alzheimer's Disease, Vascular Dementia and Frontotemporal Dementia which can develop from the age of 40 years.

The service is jointly provided by health and social care and includes access to self directed support where required. There is currently no specialist service for younger onset dementia.

In 2014, 61% of referrals were for memory and 26% were for functional mental health conditions. The average age of users was 80 years for females and 77 years for males. The percentage of male presentations was 31%, compared with 69% for females.

Several services are also commissioned by Slough Borough Council from the voluntary sector.

Dementia Advisor

The function of the dementia advisor is to provide a consistent relationship, offering personalised and responsive practical support to patients and carers, following assessment in the memory clinic. . The focus is on individual empowerment to access the information and support needed, promoting independence, self-help, well-being, choice and control.

The National Dementia Challenge recognised the enormity of the impact on carers and recommends that carers' needs should be given parity with those of the person diagnosed with dementia. The dementia advisor therefore also has a role as carer champion, ensuring that carers receive timely flexible advice, information, and personalised support to undertake caring roles.

When people are seen in the Memory Clinic and given a diagnosis of Dementia, they and their carers are offered a referral to the Dementia Advisor. The Dementia Advisor supports people by offering information and advice, whilst signposting to relevant services. She visits people in their own homes and can offer as little or much support as individuals require. The Dementia Advisor provides a consistent point of contact throughout a person's journey and forms a valuable link to other resources e.g. Social Service.

National and local strategies (current best practice)

The [Department of Health's Mental Health Strategy](#) was published in 2011. This strategy sets out how the government, working with all sectors of the community, will improve the mental health and wellbeing of the population and provide high-quality services that are equally accessible to all. The strategy identifies six outcomes:

- more people will have good health
- more people with MH problems will recover
- more people with MH problems will have good physical health
- more positive experience of care and support
- fewer people will suffer avoidable harm
- reduced stigma and discrimination

The [National Dementia Strategy](#), which was published in 2009, was a 5 year plan for improving health and social care services for people with dementia and carers. There are 17 objectives, intended to ensure better knowledge and remove stigma, ensure early diagnosis and develop services.

Local Implementation of the Dementia Strategy has been overseen by a Partnership group, and actions focussed on review of information to service users and carers; housing provision; dementia friendly communities; workforce development; accurate data projections. Funding through the Dementia Challenge Fund has supported some of this activity. Although the strategy has now been over, The implementation group has continued to persevere with the outcomes.

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A [full schedule of guidance](#) can be found at the National Institute of Health and Care Excellence (NICE) website.

What is this telling us?

Increasing older population means that the incidence of dementia and conditions affecting older persons will increase.

The ethnic profile of Slough means that numbers of service users from Black and Minority Ethnic (BME) groups are increasing. The Slough OPMH service has made concerted efforts to reach out to the BME communities:

1. Widespread use of interpreters
2. Cognitive stimulation Therapy groups now offered in Punjabi
3. Dementia Information groups offered in Punjabi
4. Leaflets and letters available in different languages (Punjabi, Urdu, Polish)
5. Audible translation on website
6. Part time dementia advisor who is able to communicate in different Asian languages
7. Participating in Patient Story projects to obtain the views of BME service users
8. Conducting a survey with a section of the BME community regarding knowledge and myths of the Slough memory Clinic

What are the key inequalities?

Identifying those with the highest risks of dementia depends on the type of dementia they have. The [Alzheimer's Society](#) provides helpful factsheets describing each type and also identifies a number of research projects underway to look at possible causes of dementia.

What are the unmet needs/service gaps?

- Dementia adviser: The future of the dementia adviser in Slough is still not a substantive post, as it is in neighbouring localities. The role has been positively evaluated and is crucial in terms of delivering on the objectives of the Care Act. Substantive funding for the post will sustain the role.
- Black and Minority Ethnic (BME) service users represent a large proportion of Memory Clinic patients
- Training for care home staff in managing mental health conditions and dementia has been identified as a need but not formally commissioned.
- Housing: Local housing provision including 'extra care' housing is not set up to meet needs of people with dementia. Need to improve range of options including use of telecare and telehealth to maintain people in their own homes.
- Although improving, the low numbers of patients on GP registers may mean that patients are not receiving early diagnosis, treatment and support.
- Physical health checks and health promotion for older persons with mental ill health

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- To continue to monitor and reduce the inappropriate use of anti-psychotic prescribing and treatment of dementia service users in Slough.
- To ensure that the service is effectively promoting the rights of carers and offering carers access to services in accordance with the Care Act.

Recommendations for consideration by other key organisations

- Slough Borough Council - substantive post for dementia adviser to be established.
- Slough Borough Council- consideration of post for carers champion in the service
- Maintain focus on depression and social inclusion for this age group.