NATIONAL INSTITUTE FOR HEALTH AND CLINICAL EXCELLENCE

PUBLIC HEALTH INTERVENTION GUIDANCE

DRAFT SCOPE

1 Guidance title

Guidance on interventions that promote good mental health and well-being in older people receiving support through primary care and other services and living in a) residential care or b) the community

1.1 Short title

Promoting mental well-being in older people

2 Background

- a) The National Institute for Health and Clinical Excellence ('NICE' or 'the Institute') has been asked by the Department of Health (DH) to develop guidance on public health interventions aimed at promoting mental heath in older people.
- b) NICE public health intervention guidance supports implementation of the preventive aspects of national service frameworks (NSFs) where a framework has been published. The statements in each NSF reflect the evidence that was used at the time the framework was prepared. The public health guidance published by the Institute after an NSF has been issued will have the effect of updating the framework. Specifically, in this case, the guidance will support the following NSFs and other policy documents:
 - 'A new ambition for old age: next steps in implementing the NSF for older people' (DH 2006a)
 - National service framework for mental health five years on' (DH 2004)

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- 'National service framework for older people' (DH 2001a)
- 'National service framework for mental health' (DH 1999)
- 'Our health, our care, our say: a new direction for community services' (DH 2006b)
- 'Making it possible: improving mental health and well-being in England' (DH 2005a)
- 'Independence well-being and choice: our vision for the future of social care for adults in England' (DH 2005b)
- Securing better mental health as part of active ageing' (DH 2005c)
- 'Fair access to care services' (DH 2002)
- 'Building capacity and partnerships in care' (DH 2001b)
- 'Promoting mental health and well-being in later life' (Inquiry into Mental Health and Well-being in Later Life 2006)
- 'A sure start to later life: ending inequalities for older people'
 (ODPM 2006)
- 'Everybody's business integrated mental health services for older adults' (CSIP 2005).
- c) This guidance will provide recommendations for good practice, based on the best available evidence of effectiveness, including cost effectiveness. It is aimed at professionals and practitioners working in the NHS, in other public sector organisations, the private sector and the voluntary and community sectors. It will also be aimed at carers and family members who have either a direct or indirect role in, and/or responsibility for, the care of older people in residential care and via primary care services.

3 The need for guidance

This scope adopts the term 'mental well-being', as defined in the NHS Health Scotland report on monitoring positive mental health (NHS Health Scotland 2006; Parkinson J 2006). (For a summary of the definition see 'Outcomes', section 4.5.)

- a) There are 9.7 million people aged 65 and over in the UK. In the next 10 years this figure is predicted to rise by 15%. By 2020, 1 in 5 UK citizens will be aged 65 plus (DH 2005c).
- b) The UK 'Inquiry into Mental Health and Well-being in Later Life' (2006) reports that 40% of older people attending GP surgeries, and 60% of those living in residential institutions, have poor mental health. However, 76% of those aged 75 and over who live in private residences rate their overall health as 'fairly good' or 'good' (ONS 2003).
- c) Mental health problems are common among older people in all care settings. Within these settings and where they occur among people living in their own homes, these problems often go unrecognised. Even where they are acknowledged, they are often inadequately or inappropriately managed (DH 2005c).
- d) Older people living in residential care homes may experience difficulty maintaining their independence, and their expectations of life may be low. Many have not made a deliberate choice to live in a care home (Bland R 1999).
- e) The UK inquiry into mental health and well-being in later life (2006) identified five factors that influence the mental health of older people: discrimination (for example, by age or culture); participation in meaningful activity; relationships; physical health (including physical capability to undertake everyday tasks); and poverty.

4 The guidance

- a) Public health guidance will be developed according to NICE processes and methods. For details see section 5.
- b) This document is the scope. It defines exactly what this guidance will (and will not) examine, and what the guidance developers will consider. The scope is based on a referral from the DH (see appendix A).

4.1 Populations

4.1.1 Groups that will be covered

Older people who are receiving domiciliary care and support, or living in sheltered housing or residential care homes.

4.2 Groups that will not be covered

- Residents of long stay nursing homes and homes registered to care for the 'elderly mentally infirm' or equivalent.
- Hospital or hospice inpatients.
- Older people undergoing pharmacological and/or non-pharmacological treatment for a clinically diagnosed mental illness or dementia.

4.3 Areas

4.3.1 Areas that will be covered

Interventions and activities that promote mental health and well-being in older people. Mental health promotion is defined as 'any activity or action that strengthens or protects mental health and well-being' (Inquiry into Mental Health and Well-being in Later Life 2006). Interventions include, but are not limited to:

 interventions delivered directly to older people by professionals, practitioners, their carers, family or peers, for example, to promote physical activity and improve mobility. It may also include providing help with daily tasks, social visits and home adaptations. interventions to increase older people's control over their daily life.
 This is defined as 'having the choice to do what you want, when you want'. For example, having a choice over meals and about going to bed, getting up, going out or simply being alone (PSSR 2006). It includes access to community facilities and services (for example, counselling support, benefits advice and educational opportunities).

4.3.2 Areas that will not be covered

- Community interventions to improve the physical and social environment that are not directly targeted at older people and/or their carers (for example, street lighting).
- Pre-retirement and financial planning schemes.
- Assessments for long-term continuing care.
- Treatment of mental health disorders and conditions, including pharmacological and psycho-social interventions.
- Palliative care.

4.4 Comparators

Interventions will be examined, where possible, against no intervention and against each other.

4.5 Outcomes

Outcomes will be assessed using the definition of mental well-being set out in 'Monitoring positive mental health' (NHS Health Scotland 2006; Parkinson 2006). They will include, but are not limited to, standardised and validated measures (including self-report) of:

- quality of life
- psychological well-being
- self-esteem.

4.6 Key questions

The following key question will be addressed:

What are the most effective and cost effective ways of promoting the mental well-being of older people who live in residential care or receive support to live in the community?

Subsidiary questions may include:

- What type of intervention works best? (For example, should interventions focus directly on mental well-being or on improving independence and the ability to carry out day to day tasks and make choices?
- What are the most cost effective and appropriate interventions for different groups of older people? For example, for males and females, different age groups, those with a physical disability, those living in rural/urban areas, from different social classes or from different ethnic groups?
- What is the frequency, length and duration of an effective intervention?
- Is it better if a general/ specialist practitioner or a peer delivers an intervention?
- Are interventions that involve older people in their design and delivery more effective than interventions that do not?
- Are interventions that involve immediate family members and/or carers more effective than those without any such involvement?
- Does the intervention lead to any adverse or unintended effects?
- What are the barriers to and facilitators of effective implementation?

4.7 Target audiences and settings

The guidance will be aimed at professionals and practitioners working in the NHS, in other public sector organisations, the private sector and the voluntary and community sectors. It will also be aimed at carers and family members who have either a direct or indirect role in, and/or responsibility for, the care of older people in residential care and via primary care services.

4.8 Status of this document

This is the draft scope, released for consultation on 4 December 2006, to be discussed at a stakeholder meeting on 15 December 2006. Following consultation, the final version of the scope will be available at the NICE website in January 2007.

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5 Further information

The public health guidance development process and methods are described in 'Methods for development of NICE public health guidance' (NICE 2006) and 'The public health guidance development process: An overview for stakeholders, including public health practitioners, policy makers and the public' NICE 2006) available at: www.nice.org.uk/page.aspx?o=299970

6 NICE related guidance

Published

Clinical guidelines

Dementia: Supporting people with dementia and their carers in health and social care. *NICE clinical guideline* no. 42 (2006). Available from: www.nice.org.uk/CG042

Nutrition support in adults: oral nutrition support, enteral tube feeding and parenteral nutrition. *NICE clinical guideline* no. 32 (2006). Available from: www.nice.org.uk/CG032

Falls: the assessment and prevention of falls in older people. *NICE clinical guideline* no.21 (2004). Available from: www.nice.org.uk/CG21

Appendix A Referral from the Department of Health

The Department of Health asked the Institute to produce:

'Guidance for primary care and for residential care institutions on the promotion of good mental health in older people.'

Appendix B References

Bland R (1999) 'Independence, privacy and risk: two contrasting approaches to residential care for older people'. *Ageing & Society* 19:539–560.

Care Service Improvement Partnership (2005) *Everybody's business – integrated mental health services for older adults.* Leeds: Care Service Improvement Partnership.

Department of Health (1999) *National service framework for mental health.*London: Department of Health.

Department of Health (2001a) *National service framework for older people.*Core standards. London: Department of Health.

Department of Health (2001b) *Building capacity and partnerships in care*. London: Department of Health.

Department of Health (2002) *Fair access to care services*. London: Department of Health.

Department of Health (2004) *National service framework for mental health – five years on.* London: Department of Health.

Department of Health (2005a) *Making it possible: improving mental health and well-being in England.* London: Department of Health.

Department of Health (2005b) *Independence well-being and choice: our vision* for the future of social care for adults in England. London: Department of Health.

Department of Health (2005c) Securing better mental health as part of active ageing. London: Department of Health.

Department of Health (2006a) *A new ambition for old age: next steps in implementing the NSF for older people.* London: Department of Health.

Department of Health (2006b) *Our health, our care, our say: a new direction for community services.* London: Department of Health.

Inquiry into Mental Health and Well-being in Later Life (2006) *Promoting* mental health and well-being in later life. London: Age Concern and Mental Health Foundation.

NHS Health Scotland (2006) *Monitoring positive mental health*. NHS Health Scotland. (Available at: www.healthscotland.com/mental-health-work.aspx)

Parkinson J (2006) 'Establishing national mental health and well-being indicators for Scotland.' *The Journal of Public Mental Health.* Vol 5 1:42–48.

Office for National Statistics (2003) *Census 2001 national report for England and Wales.* London: The Stationery Office.

Office of the Deputy Prime Minister (2006) A sure start to later life: ending inequalities for older people – final report from the Social Exclusion Unit. London: Office of the Deputy Prime Minister.

PSSRU (2006) 'Control, well-being and the meaning of home in care homes and extra care housing'. *Research summary 38.* (Available from: www.pssru.ac.uk/pdf/rs038.pdf)