

Survey of Consultant Old Age Psychiatrists' views of "graduate" arrangements

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Background

Old Age Psychiatry was accepted as an NHS specialty in the 1980s, marking it as one of the first countries to acknowledge that older adults with mental health problems had a specific set of requirements and needs. The adoption of the speciality took place during the 80s and 90s and now all but the smallest of health boards in Scotland have an "Old Age Psychiatry" Service, as opposed to the "General Adult Psychiatry" services that treat younger adults.

There is perception that the transition between services can be difficult, that there are marked variations between regions and that experiences of the transition to an older adult service can be difficult. Such transitions are not unusual in services and significant positive work has recently been undertaken regarding the transfer from child and adolescent mental health services to general adult psychiatry services.

Services are resourced differently, and it is often felt that older adult services are not as well resourced as the general adult service in an area.

The reasons for transfer between services are also not well articulated. Some services use age, usually 65, despite the fact that this is a protected characteristic under equality legislation. Some use the Royal College of Psychiatry Criteria:

1. People of any age with a primary dementia.
2. People with mental disorder and physical illness or frailty that contributes to, or complicates, the management of their mental illness. This may include people under 65 years of age.
3. People with psychological or social difficulties related to the ageing process, or end-of-life issues, or who feel their needs may be best met by a service for older people. This would normally include people over 70 years of age.

A series of discussions organised by Support in Mind and VHS have begun to examine this issue in a Scottish context, and this paper has been written to further inform the discussion.

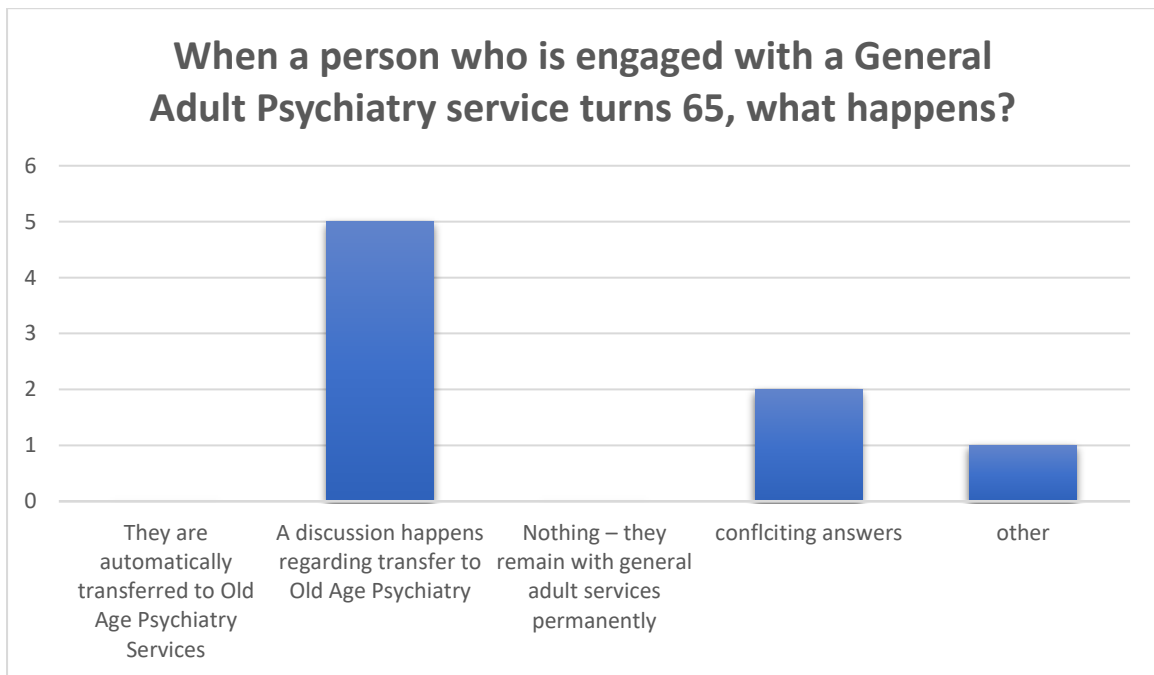
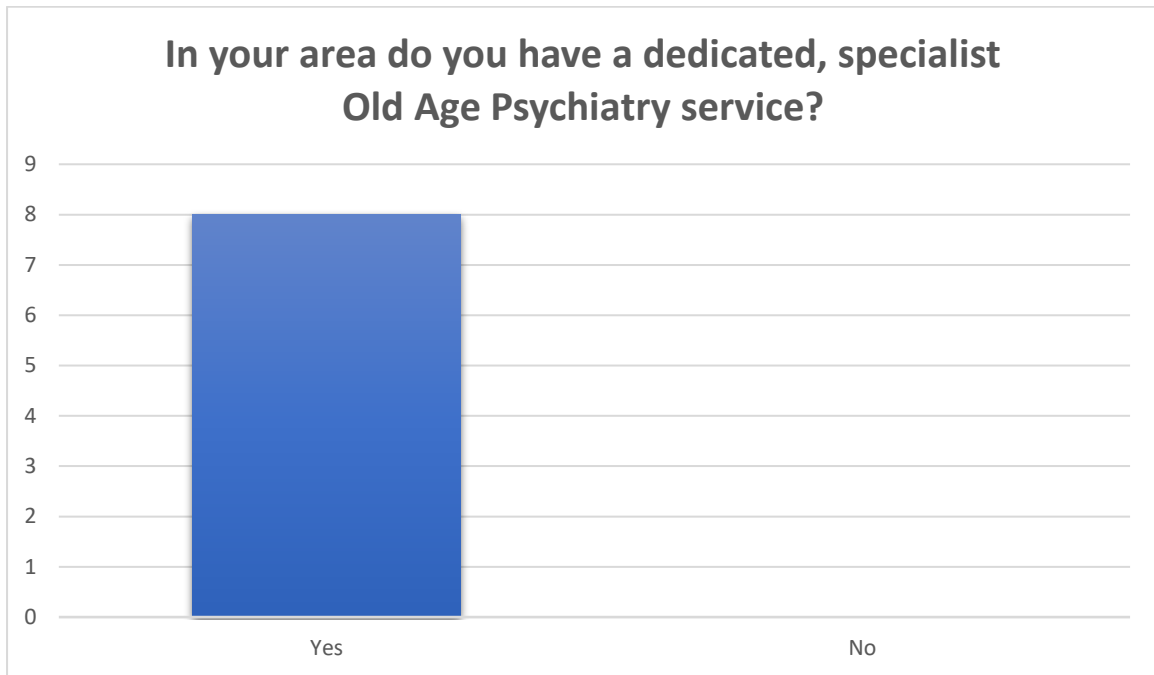
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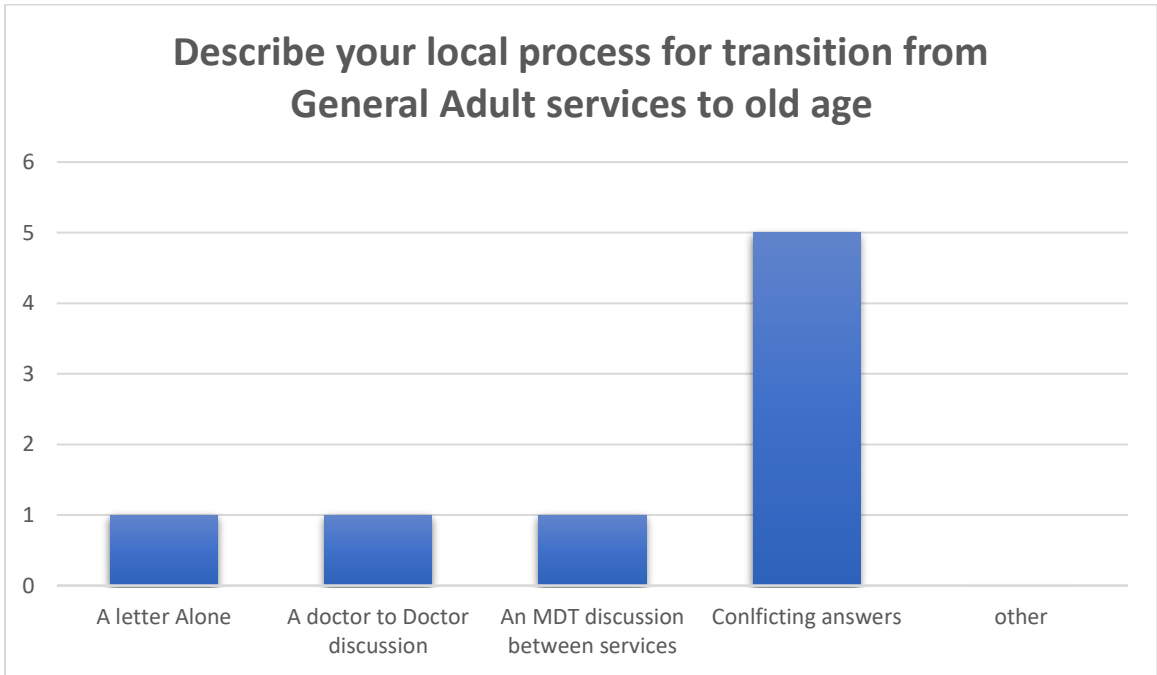
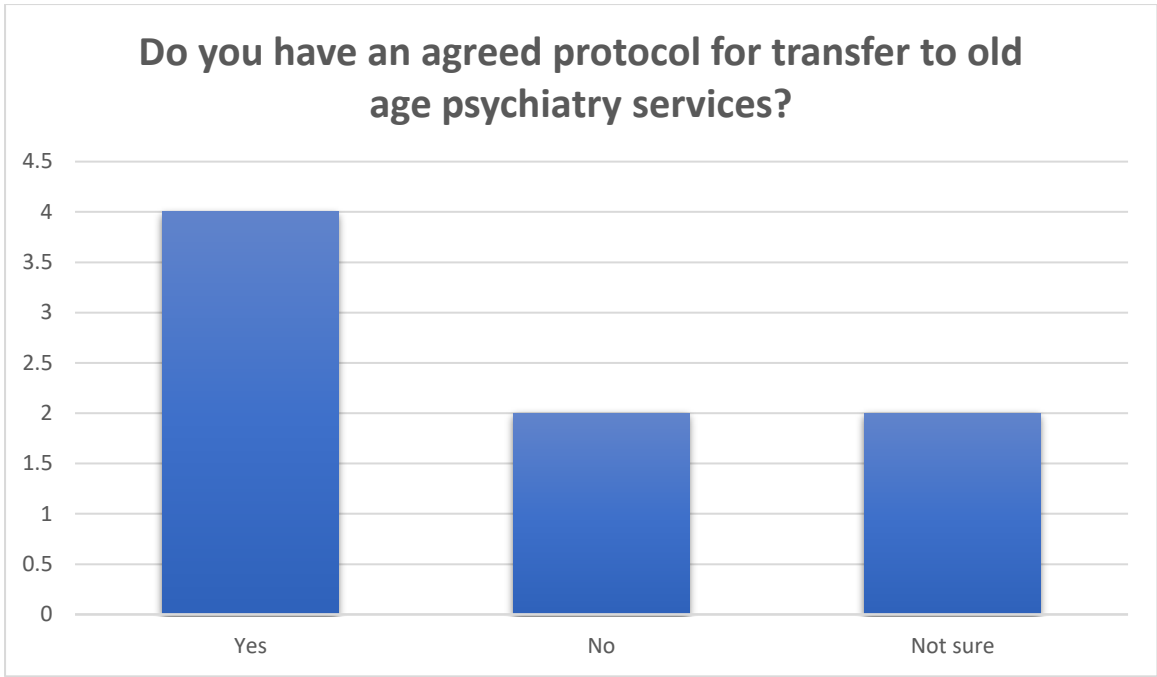
A survey of consultants in old age psychiatry took place during one of the bi-annual meetings held by the Old Age Faculty of the royal college of Psychiatrists in Scotland. This meeting was hosted in Aberdeen in May 2019. A paper survey was delivered in packs to all attendees, most of whom are consultants in Old Age Psychiatry. As the purpose of this paper is to highlight practice and variation, Health Boards are not mentioned by named.

Results

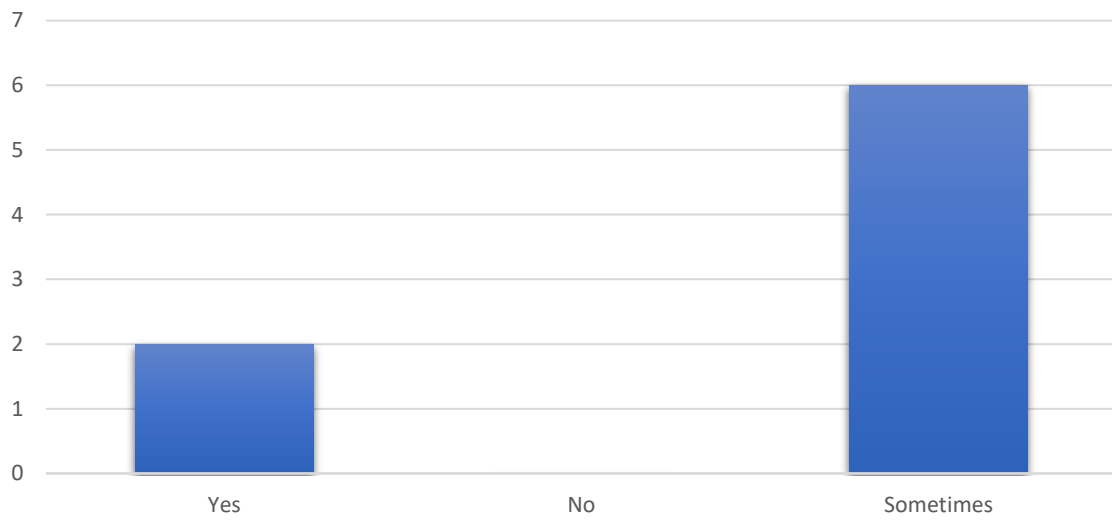
23 of 47 participants responded to the survey, giving representation from 8 of the 14 territorial boards. As the Western Isles, Shetland and Orkney do not have specialist Old Age Psychiatry

services, this puts the total at 8 out of 11 potential boards who are likely to have an old age psychiatry service.

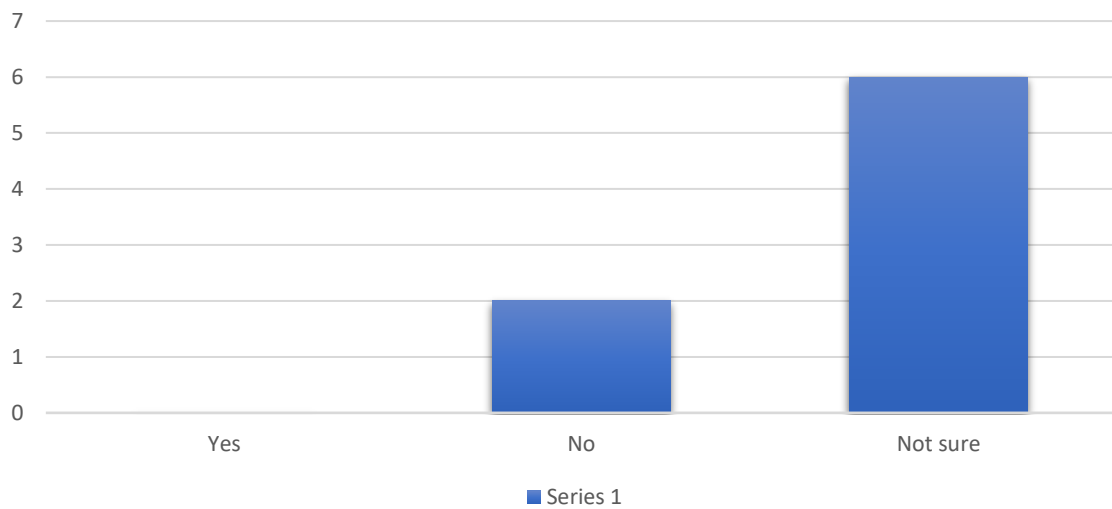


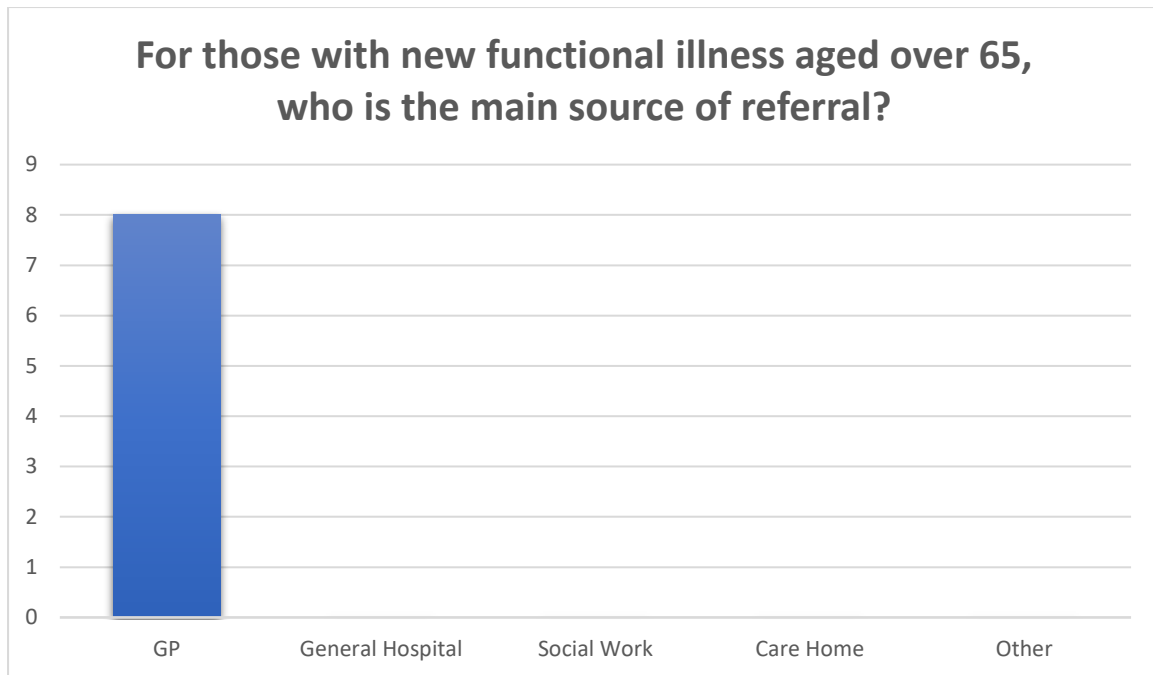


Is the patient consulted regarding transfer between general adult and old age?



Do you know the local transition arrangements are for older adults re Social work?





Discussion

The results show that the most common scenario is for a process to be in place which involves a discussion regarding transfer between the general adult and old age psychiatry services. However, the results show variation in most areas, with uncertainty about the processes used and even whether or not policies exist.

There are limitations to this work – those surveyed represent only a sample of Old Age Psychiatrists working in Scotland presently. The results also do not reflect the views of the General Adult Psychiatrists, and thus there is a degree of bias.