A Correlation of Needs and Intervention in Home and Community Based Psychiatric Services in the HSE-SWA

“This is an important study from a number of perspectives. It underscores the vital importance of assessing and addressing the actual needs of patients rather than focussing narrowly just on presenting symptoms. It demonstrates the value of a home-based approach to mental health treatment and provides reassurance that serious un-met needs can be successfully tackled by newly formed as well as ‘battle-hardened’ teams. The results of the study with respect to Later Life Psychiatry are also of major significance highlighting the value of providing care and treatment in a person's own environment.

This study should be a model for how a modern mental health service should be organised around the real-life needs of people with serious mental health problems”.

Dr Pat Devitt

Dr Siobhain Ni Bhriain has just completed a study funded by the Mental Health Commission on ‘A correlation of needs and intervention in home and community based psychiatric services in the HSE-SWA’. This is published on the Mental Health Commission website (http://www.mhcirl.ie/Research/Dr_Siobhan_Ni_Bhriain.pdf) The paper starts with an excellent overview of the evidence for efficacy of community based services. 319 patients were recruited into the study.

It compared two General Adult Psychiatry (GAP) services and Psychiatry of Later life (PLL) services in the Dublin South West Area. Measures of met and unmet need were correlated with the mode of service delivery, including Home Care Treatment, Day Hospital Treatment or both. This study was a prospective, longitudinal, naturalistic one and the data was collected over a 2 ½ year period and included assessments at baseline, at end of intervention and 6 months after the end of intervention. The outcome measure used was the Camberwell Assessment of Need-Short Appraisal Scale (CANSAS) for the General Adult Psychiatry (GAP) sectors and the Camberwell Assessment of Need for the Elderly-Short Version (CANE-S) for the Psychiatry of Later Life (PLL) Service.

The report states that the most important overall finding of the study is that the community-based interventions successfully meet a substantial portion of needs at the intervention examined and that these needs remain met six months after the end of the intervention. This is important because it demonstrates the efficacy of the service to meet needs on a sustained basis even when the intervention has been discontinued. All interventions significantly reduced unmet need as identified at the outset of the intervention and these remained reduced after six months, with a significant increase in met need and/or a reduction in total needs. Both GAP Sectors and Psychiatry of Later Life demonstrated a clear ability to meet needs.

Further findings demonstrated that there were variations in the efficacy of the different interventions within the different areas examined. In Psychiatry of Later Life, the Day Hospital did not appear to effectively sustain needs at 6 months after discharge as did the Home Care Team or combination.

Both GAP services showed those with highest need were referred to Home Care Treatment, rather than Day Hospital treatment. Slight differences were found between services, but nonetheless, the overall finding is that unmet needs are effectively met and reduced on an ongoing basis by community and home-based interventions in this service.