

Professional and Service Transitions: The Ageing Population

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Overview

- Aim: stimulate discussion of how professionals can meet consumer needs and maintain job satisfaction in a time of ongoing change
- opportunities and challenges with an ageing population
 - For mental health care
 - For professionals
- Change
 - That has occurred
 - For services
 - For me
 - Drivers for ongoing change

Opportunities and challenges with an ageing population

- For mental health care
 - Increasing older population
 - But what is 'older'?
 - Increasing diversity of needs
 - Increasing range and quantum of services
 - But not linear change with population change
 - Increasing consumer partnership in care
 - At all levels
 - But not desired by all older consumers
 - Is that ok?
 - Constant change
 - As well as some things that don't

Opportunities and challenges with an ageing population

- For professionals
 - Tensions of constant need for change
 - Valuing experience and training
 - vs
 - Recognising limitations of these
 - Developing new service models
 - vs
 - Losing practices that work
 - or
 - Repeating past mistakes
 - Opportunity for learning, development and intellectual challenge
 - vs
 - Passing on past lessons to a new generation

One journey of transitions



<http://www.abc.net.au/news/2016-07-01/coalition-reignites-decades-long-push-to-upgrade-dixons-long-pt/7560962>



Medical student

- Dementia
- ECT
- Falls and confusion

Service image



My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Main Treatment options	Governance and networking
?	?	Doctor knows best	TCAs 'Prozac just arrived' ECT 1 st generation antipsychotics Benzodiazepines	?

JMO

- ‘Down there’
 - Concord
 - St Josephs
- Dementia, depression
- ECT
- Falls and confusion

Service Image



“temporary pavilion type wards built 1940

<https://www.slhd.nsw.gov.au/concord/images/history2.jpg>

<http://www.concordheritage.asn.au>



My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Treatment options	Governance and networking
<p>Isolated</p> <p>Few in general hospitals</p>	<p>OPDs</p> <p>Innovation: MDTs</p>	<p>Informed consent: Often carer told 'best option'</p>	<p>TCA's</p> <p>Fluoxetine</p> <p>moclobemide</p> <p>ECT</p> <p>1st generation antipsychotics</p> <p>Benzodiazepine s</p>	<p>Consultant</p>

Registrar

- 'Over there'
 - Lidcombe

Service Image



Lidcombe Hospital precinct Ward 18&19
<http://www.environment.nsw.gov.au/>



Ward 16 back veranda

Service image

- Imagine this with wooden dividers into 4 bed rooms open to a long corridor



My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Main Treatment options	Governance and networking
Isolated Occasionally in general hospitals	OPDs and community nurses	Informed consent: often via carers	TCAs SSRIs moclobemide 1st generation antipsychotics Risperidone olanzapine Benzodiazepines Valproate Avoid Tacrine	Consultant Unit director

My recollection of Specialist services



<http://www.health.nsw.gov.au/lhd/pages/default.aspx>



Hospital ward

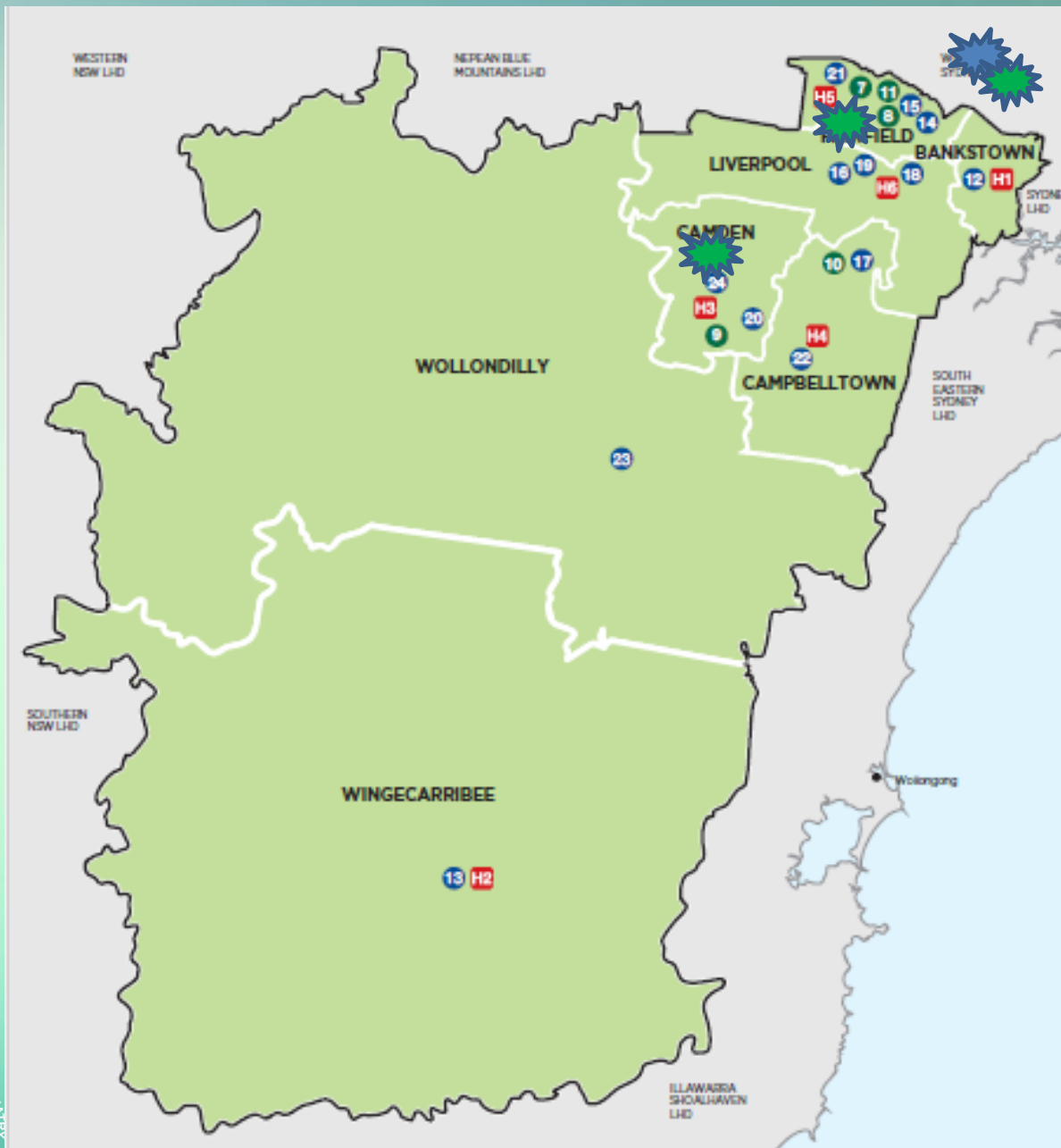





Community MDT



Individual clinicians





-  Hospital ward
-  Community MDT
-  Individual clinicians

Senior registrar

- 'Over there'
 - Braeside

Service Image



www.Hammond.com.au

My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Main Treatment options	Governance and networking
Isolated Occasionally in general hospitals	OPDs and community nurses Innovation: MDTs	Informed consent: often via carers	SSRIs venlafaxine moclobemide Risperidone Olanzapine quetiapine Benzodiazepines Valproate Behavioural Social Consider donepezil	Consultant Unit director FPOA

My recollection of Specialist services



<http://www.health.nsw.gov.au/lhd/pages/default.aspx>



Hospital ward

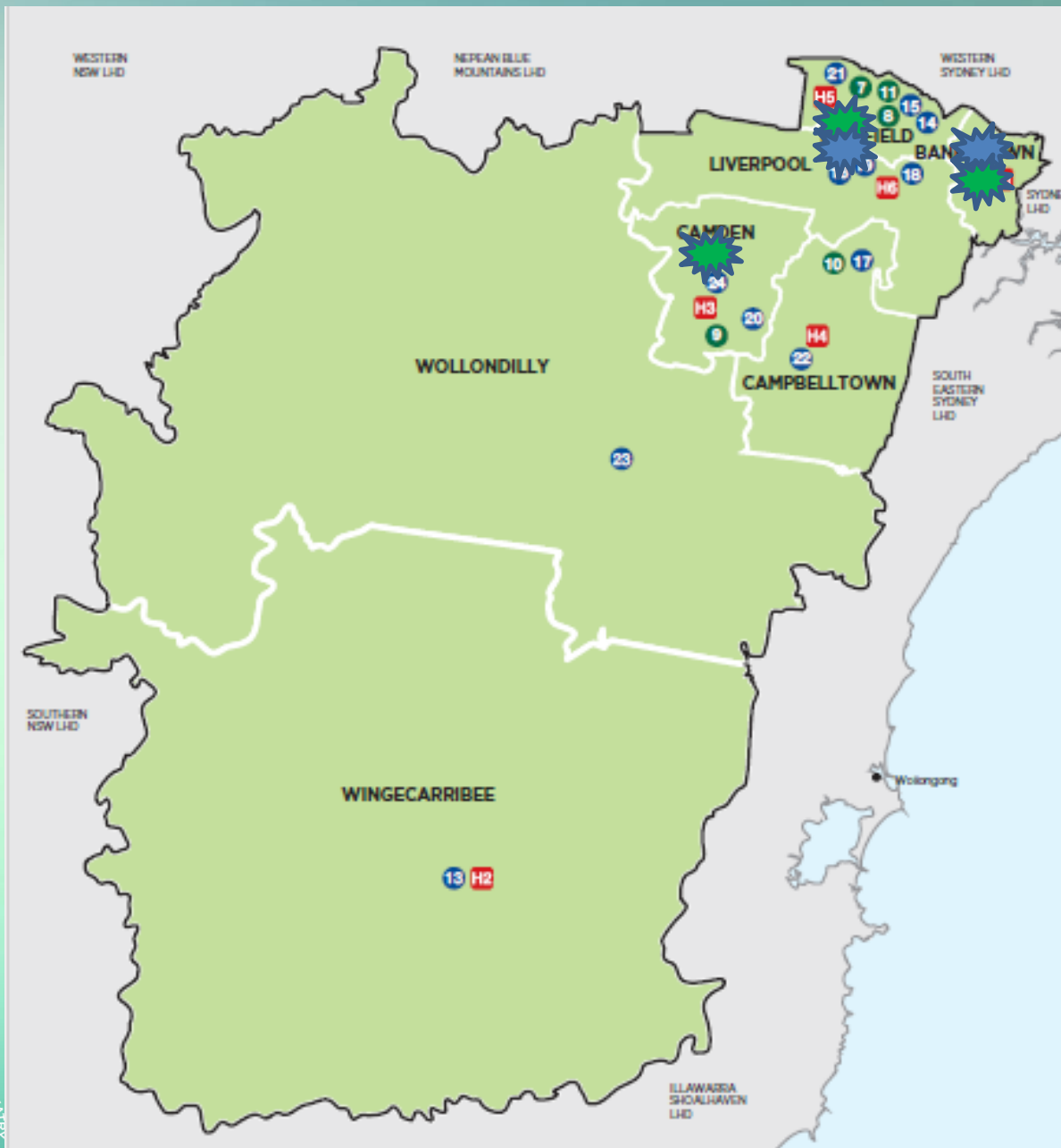


Community MDT



Individual clinicians





-  Hospital ward
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Consultant

- Part of what system(s)?
 - Aged care vs Mental health
 - Outpatients vs community mental health
- Autonomy vs ‘who cares?’

Service Image



www.Hammond.com.au

My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Treatment options	Governance and networking
General hospital or specialist hospital	MDT Community nurses OPD	Consultation Informed consent	SSRIs venlafaxine Risperidone Olanzapine quetiapine Benzodiazepine Valproate Behavioural therapy Social Cholinesterase inhibitors?	Consultant Unit director FPOA

My recollection of Specialist services



<http://www.health.nsw.gov.au/lhd/pages/default.aspx>



Hospital ward

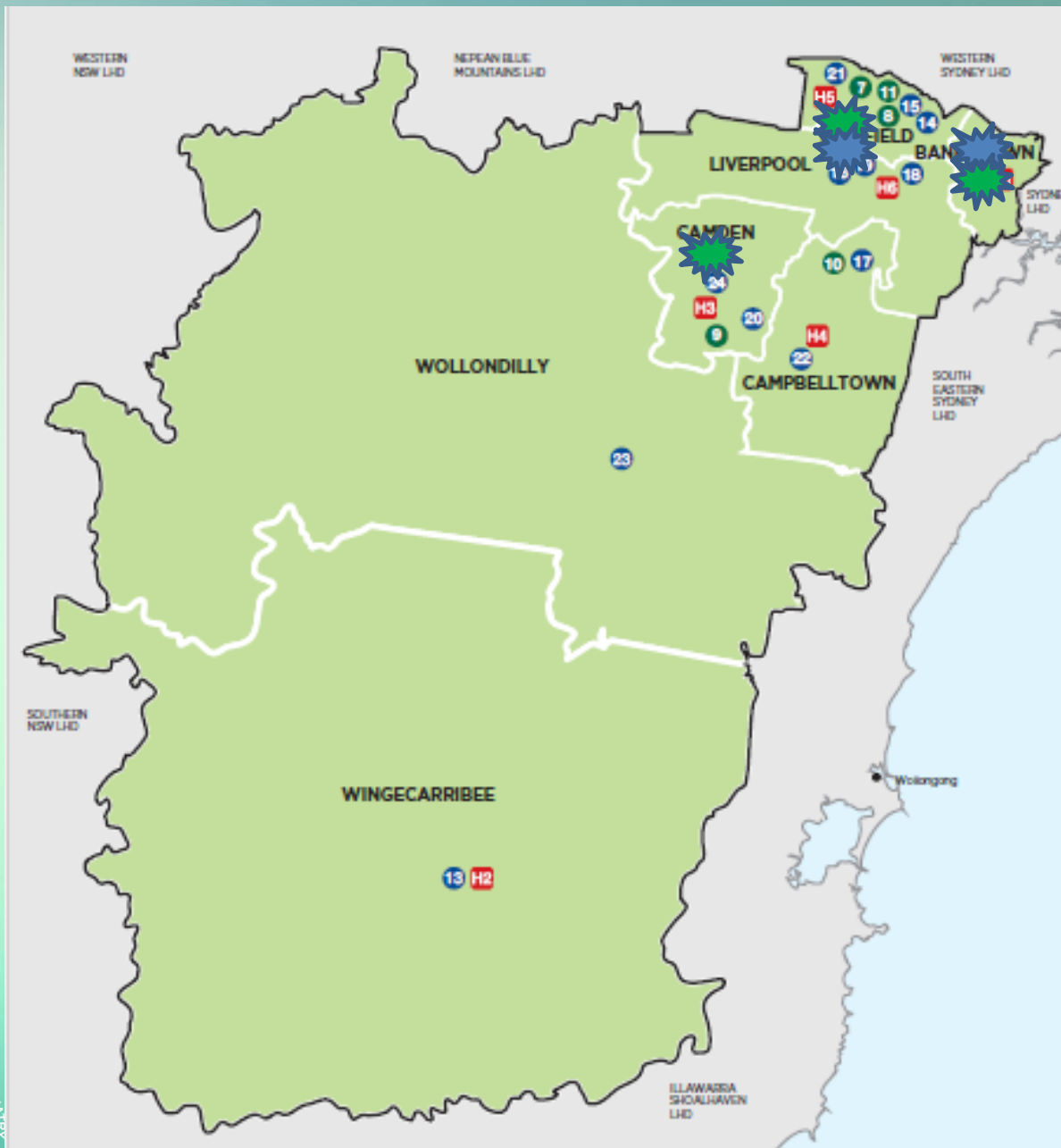


Community MDT



Individual clinicians





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Coordinator

- Why work like other units?

Service Image

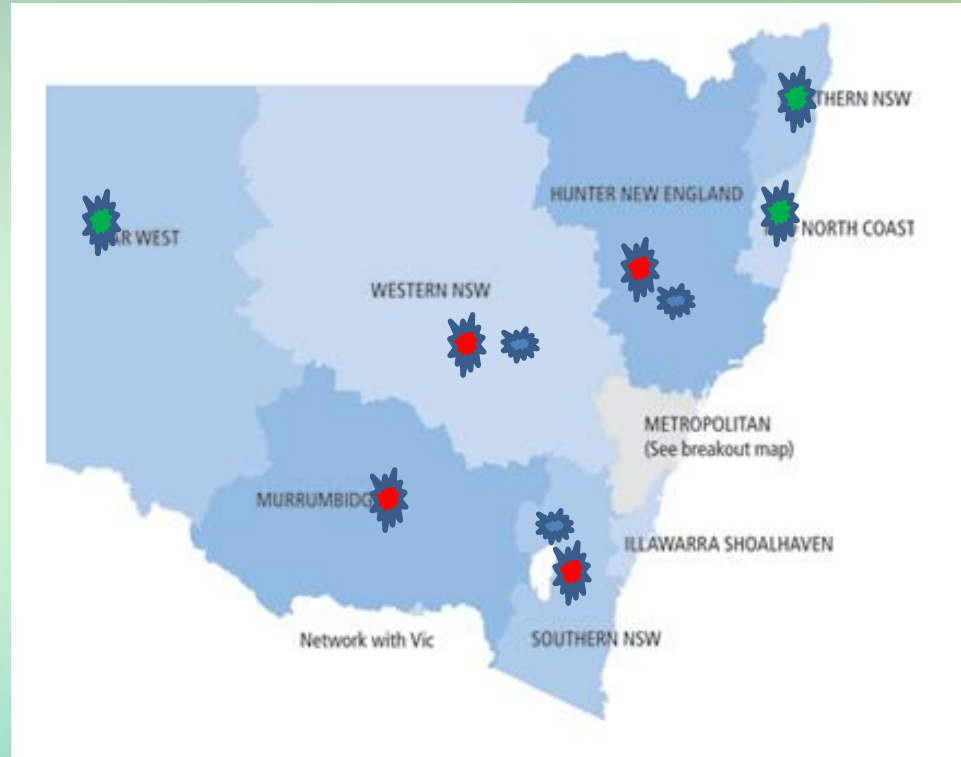


www.Hammond.com.au

My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Treatment options	Governance and networking
General hospital or specialist hospital	MDT Community nurses OPD	Consultation Informed consent	SSRIs SNRIs mirtazapine Risperidone Olanzapine quetiapine Benzodiazepine Valproate Behavioural therapy Social Cholinesterase inhibitors?	Consultant Unit director Area Director ½ person in NSW Health FPOA

My recollection of Specialist services



<http://www.health.nsw.gov.au/lhd/pages/default.aspx>



Hospital ward

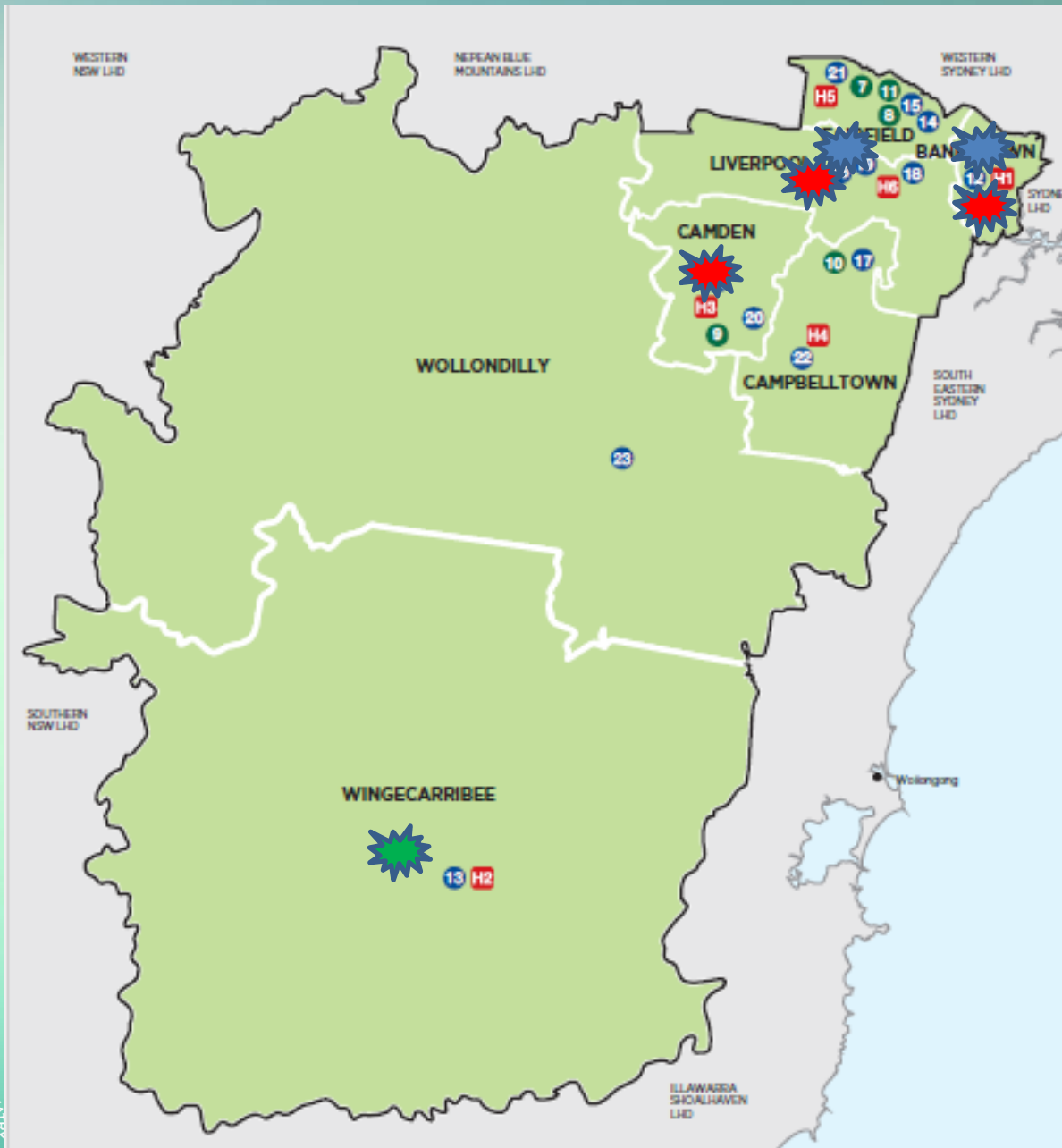


Community MDT



Individual clinicians





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Clinical Director and Clinical Advisor

- How to work differently with more resources?

Service Image



www.Hammond.com.au

Service Image



<http://www.crownfurniture.com.au>

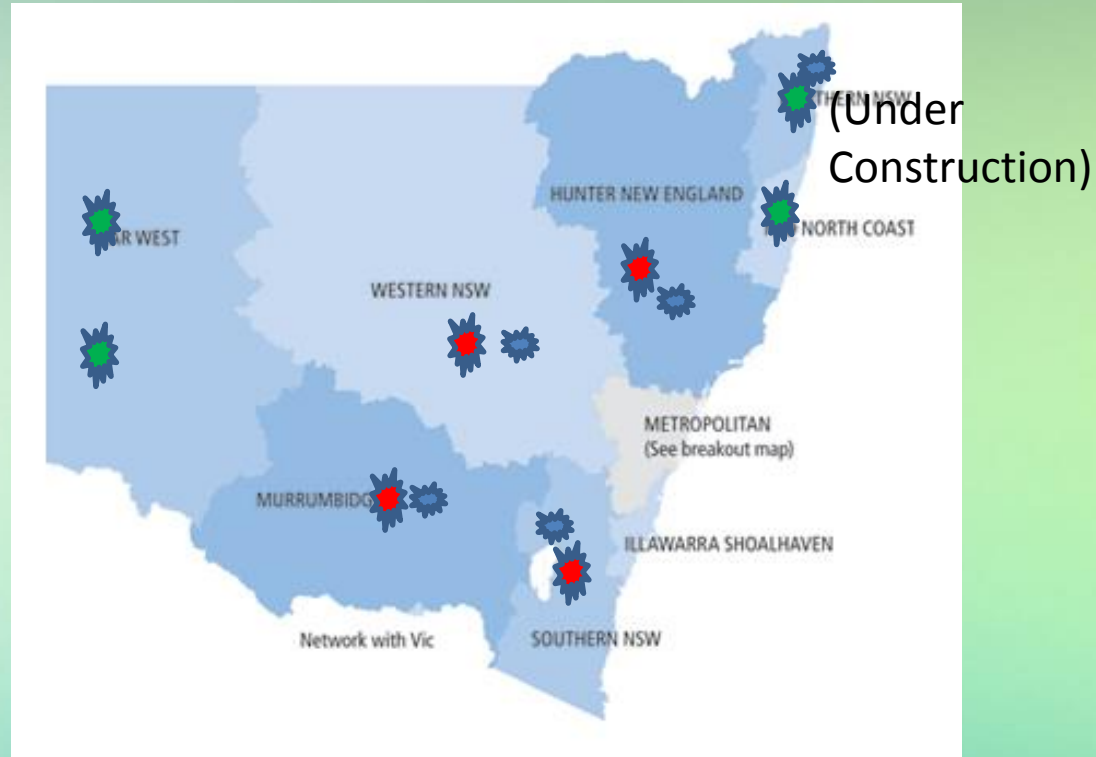


<http://www.dailytelegraph.com.au>

My recollection regarding mental health services for older people:

Dominant model : hospital services	Dominant model : community services	Consumer involvement	Treatment options	Governance and networking
General hospital	MDT	Consultation Informed consent Moving to co-production	SSRIs SNRIs mirtazapine Risperidone Olanzapine quetiapine Benzodiazepine Valproate Behavioural therapy Social Cholinesterase inhibitors?	Consultant Unit director Area Director OPMHPU State benchmarking NSW networks National design guidelines State service plan State models of care FPOA

My recollection of Specialist services



<http://www.health.nsw.gov.au/lhd/pages/default.aspx>



Hospital ward

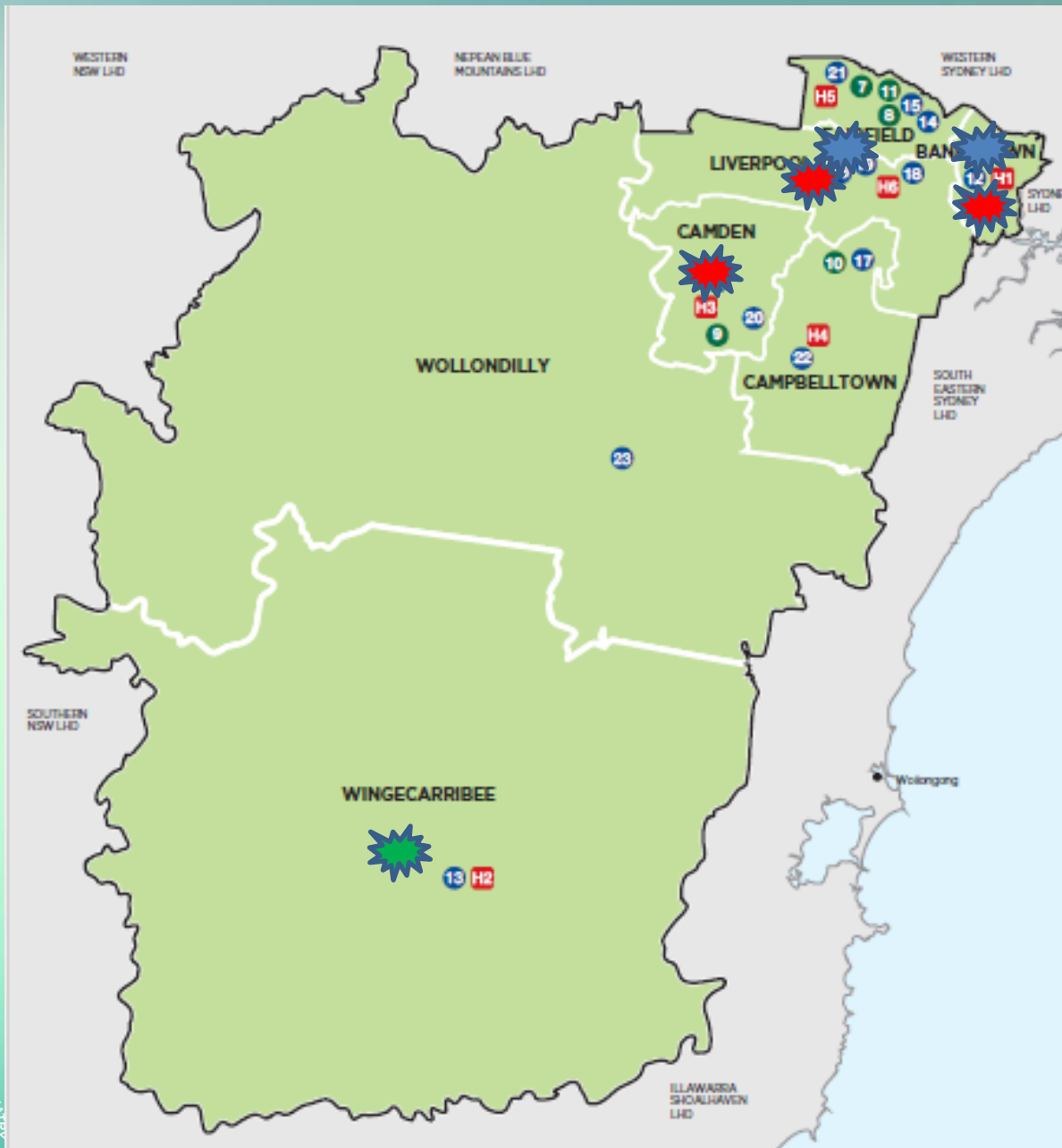


Community MDT



Individual clinicians





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College participation



And the personal transitions...



How will you meet the opportunities and challenges of working in an ageing population?

- For professionals
 - Tensions of constant need for change
 - Valuing experience and training
 - vs
 - Recognising limitations of these
 - Developing new service models
 - vs
 - Losing practices that work
 - or
 - Repeating past mistakes
 - Opportunity for learning, development and intellectual challenge
 - vs
 - Passing on past lessons to a new generation

Future drivers of change

- Community
- Consumers and their partners
 - We need to be a partner
- ABF
- Public reporting
- National MH Planning framework