

Questions and Answers

Psychogeriatric Services Consultation

What is psychogeriatric care?

Psychogeriatrics is a branch of Psychiatry and forms part of the multidisciplinary delivery of mental health care to older people. In Nelson Marlborough the Psychogeriatric Service primarily provides care for patients with dementia complicated by significant behavioural or psychological symptoms and elderly patients with mental illnesses like depression complicated by associated physical health issues.

Patients with such disorders are also treated and supported by many other services including Primary Care, Support Works, non government organisations and general hospital services. Many patients with these conditions are supported at home but some who have more complex needs require support in Aged Residential Care facilities.

What are the different levels of care in Aged Resident care facilities?

There are a number of levels of care these include, rest homes, hospital level care, dementia level care and the highest level, psychogeriatric care. Where patients are cared for depends on the level and type of disturbance they have associated with their mental disorder, and their associated physical health needs. Currently the highest level of care (Psychogeriatric care) is provided by NMDHB in Alexandra Hospital. In most other parts of New Zealand this type of care is provided by privately run Aged Residential Care Facilities

How can residents and families be ensured that there will be no reduction in services?

This proposed model of care is based on best practice for psychogeriatric care in New Zealand. As part of best practice we will work with staff, families, clients, and future provider/s so that clients receive the care they need.

When will the changes take place?

If this recommendation is accepted providers in the community who are able to meet the needs of people with the same or similar needs will be identified. NMDHB must be satisfied that the provider can meet the requirements to provide this level of care. Until we go to the community providers we will not know the exact timeframe but we will keep residents, families and stakeholders advised of this process. The physical facilities needed for this proposal will take some time to be developed.

How will families of resident's of Alexandra Hospital know where their family member will go to?

If residents are in a psychogeriatric continuing care bed they will be reassessed by clinical staff working with Needs Assessment Services Coordinators. They will consider support needs and work with families to decide where a relative's care needs are best met.

Transfer to the acute unit would be a last resort. We know that the less people with these issues are moved the better and, where possible, we will avoid this.

What does this mean for the people of Marlborough?

As they do now, acutely unwell people would be admitted when required for specialist assessment in Nelson and return either home or to a facility able to meet the needs of the individual.

If Psychogeriatric Continuing Care residents were not able to be managed in other care facilities prior to admission to Alexandra Hospital how can they be supported in community care now?

NMDHB has not previously contracted for this level of care in the community. We will now work with providers for the right level and type of care to be available for people with similar conditions as are currently in Alexandra Hospital. The community team now has a mix of staff including Social Work, Occupational Therapy, Physiotherapy and Nursing and is better positioned to provide support to community providers.

We recognise these people require a high level of support in the community and the community support team will be further developed to meet the increasing needs of the population.

Where will people be admitted if they require acute services in the future?

The only difference in the future will be that the service will be provided at Nelson Hospital site. If admitted acutely, the person would be treated much as they are now. A plan will be made in conjunction with relatives and support people for when they are ready to be discharged. Acute services will remain at Alexandra Hospital until an alternative facility is developed.

Where else has this model been introduced?

Bay of Plenty DHB – through Althorp Private Hospital

http://elderly.co.nz/Facilities/Dementia_Care_Secure_envir

[onment/Althorp_Private_Hospital/Service/DisplayService/FaStID/2634](#)

Canterbury DHB

http://www.eldernet.co.nz/Facilities/Hospital_Psychogeriatric_Care/Tuarangi_Home_Canterbury_DHB/Service/DisplayService/FaStID/2747

Auckland DHB

http://www.communitylinks.co.nz/Facilities/Hospital_Psychogeriatric_Care/Cornwall_Park_Hospital_Epsom/Service/DisplayService/FaStID/3098

Why would the DHB spend money moving Psychogeriatric Services instead of keeping Alexandra Hospital open?

A lot of good work has been done in Alexandra Hospital and we must acknowledge this, however the DHB is required to evaluate and reposition its provision of Health Services to meet the challenges now and into the future.

This proposed model of care is based on best practice provision for psychogeriatric care in New Zealand and we believe will give the best quality of care for all residents.

Our analysis to date tells us that the costs involved in upgrading Alexandra are very high and that the proposed change is the better option for the future of psychogeriatric care services.