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Citation: Paton, F., Wright, K., Ayre, N., Dare, C., Johnson, S., Lloyd-Evans, B., Simpson, A., Webber, M. & Meader, N. (2016). Improving outcomes for people in mental health crisis: a rapid synthesis of the evidence for available models of care. Health Technology Assessment, 20(3), pp. 1-162. doi: 10.3310/hta20030

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Link to published version: <https://doi.org/10.3310/hta20030>

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Improving outcomes for people in mental health crisis: a rapid synthesis of the evidence for available models of care

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Declared competing interests of authors: none

Published January 2016

DOI: 10.3310/hta20030

Plain English summary

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Health Technology Assessment 2016; Vol. 20: No. 3

DOI: 10.3310/hta20030

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Plain English summary

What was the problem/question?

The Crisis Concordat (a national agreement between services involved in care and support of people in crisis) suggests four stages of care: (1) support before crisis point; (2) urgent and emergency access to crisis care; (3) quality treatment and care when in crisis; and (4) promoting recovery. We examined evidence on how well different services work for each of these four stages.

What did we do?

We looked at evidence on effectiveness of services from guidelines, reviews of studies and individual studies. We also examined experiences of these services.

What did we find?

There was very little evidence for the effectiveness of services provided before crisis.

It was inconclusive what services were best for improving emergency access to crisis care in accident and emergency and for helping the police with their responsibilities under the Mental Health Act 1983.

Crisis teams work well, but each area has different types of services. Ongoing work is seeking to ensure the best services happen consistently across the country. Crisis houses and acute day hospitals are also important alternatives to inpatient treatment.

There are a range of services that help people with mental health symptoms. One important area is building the strengths of individuals through things such as help with getting/keeping a job or providing people with the support they need to help themselves.

What does this mean?

There is need for more work to see what helps best to stop people reaching crisis point and also what help is best when they reach crisis. There also needs more work looking at how people can recover better when attending a specialist mental health hospital.

ISSN 1366-5278 (Print)

ISSN 2046-4924 (Online)

Impact factor: 5.116

Health Technology Assessment is indexed in MEDLINE, CINAHL, EMBASE, The Cochrane Library and the ISI Science Citation Index.

This journal is a member of and subscribes to the principles of the Committee on Publication Ethics (COPE) (www.publicationethics.org/).

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This report

The research reported in this issue of the journal was funded by the HTA programme as project number 14/51/01. The contractual start date was in August 2014. The draft report began editorial review in February 2015 and was accepted for publication in July 2015. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health.

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