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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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Plain English summary

Improving outcomes for people in mental health crisis

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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.

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