

Integrated care to address the physical health needs of people with severe mental illness: a rapid review

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Plain English summary

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Plain English summary

People with mental health conditions have a lower life expectancy and poorer physical health outcomes than the general population. Evidence suggests this is because of a combination of clinical risk factors, socioeconomic factors and health system factors.

Several recent reviews have looked at ways to better integrate physical and mental health care for people with severe mental illness (SMI). One review identified nine factors for good integrated care: (1) information sharing systems; (2) shared protocols; (3) joint funding and commissioning; (4) colocation of services; (5) multidisciplinary teams; (6) liaison services; (7) navigators; (8) research; and (9) reduction of stigma.

This rapid review looked for only the most recent evidence and examples of practice in this area by searching the published literature and by speaking to people involved in providing or using current services.

Few of the identified examples were described in detail and fewer still were evaluated, raising questions about the replicability and generalisability of much of the existing evidence. However, some common themes did emerge from the evidence. Efforts to improve the physical health care of people with SMI should empower people (staff and service users) and help remove everyday barriers to delivering and accessing integrated care. In particular, there is a need for improved communication between professionals and better information technology to support them, greater clarity about who is responsible and accountable for physical health care and awareness of the effects of stigmatisation on the wider culture and environment in which services are delivered.

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