



- Title** **Systematic Reviews of the Effectiveness of Day Care for People with Severe Mental Disorders**
- Agency** **NCCHTA, National Coordinating Centre for Health Technology Assessment**  
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tel: +44 2380 595586, fax: +44 2380 595639, [www.nccta.org/execsumm/summ521.htm](http://www.nccta.org/execsumm/summ521.htm)
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## Aim

- To assess the effectiveness and feasibility of day hospital versus inpatient care for people with acute psychiatric disorders. (Review (1))
- To assess the effectiveness of Prevocational Training (PVT) and Supported Employment (SEm) relative to each other and to standard care (in hospital or the community) for people with severe mental disorders. In addition, the review examined the effectiveness of: (a) special types of PVT ("clubhouse" model) and SEm (individual placement and support model); and (b) modifications for enhancing PVT (eg, payment or psychological interventions). (Review (2))
- To assess the effectiveness of day treatment programs versus outpatient care for people with non-psychotic disorders; and to assess the effectiveness of day care centers versus outpatient care for people with severe long-term disorders. (Review (3))

## Conclusions and results

- Acute day hospitals are an attractive option in situations where demand for inpatient care is high and facilities exist that are suitable for conversion. They are a less attractive option when demand for inpatient care is low and where effective alternatives already exist.
- Supported employment is more effective than prevocational training for patients suffering from a severe mental disorder who want to work. There is no evidence that prevocational training is more effective than standard community care or hospital care. The implication of these findings is that people suffering from mental disorders who want to work should be offered the option of supported employment.
- There is some limited evidence to support the use of day treatment programs for patients with anxiety or depression who have not responded to standard outpatient treatment. There is no evidence to support the use of day hospitals as day care centers.

## Recommendations

The interpretation of day hospital research would be enhanced if future trials made use of the common set of outcome measures used in this review. It is important to examine how acute day hospital care can be most effectively integrated into a modern community-based psychiatric service.

## Methods

Eligible studies were randomized controlled trials (RCTs). Data sources included the Cochrane Controlled Trials Register, MEDLINE, EMBASE, CINAHL, PsycLIT, and the reference lists of articles. Researchers were approached to identify unpublished studies. Trialists were asked to provide individual patient data. Data were extracted independently by two reviewers and cross-checked.

## Further research/reviews required

The cost effectiveness of SEm should be examined in larger multicenter trials, both within and outside of the USA. There is a case for countries outside the USA to survey their existing VR services to determine the extent to which the most effective interventions are being offered. Also, future research should address the feasibility of day treatment programs and how far they are cost effective against other alternatives, such as outpatient cognitive behavioral therapy.

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