

## Memory Clinic or CMHT?

The memory services are part of the Day Hospital provision in each of the localities. The service in Aylesbury is well established and provides a programme of screening, assessment, prescription of Cholinesterase Inhibitors, (ChEI the dementia medication), follow up and signposting

All referrals to the CMHT and the memory services are generally, but not exclusively, from the persons GP. All referrals come into the CMHT as the gate keepers in the first instance. An MDT decides if the individual patient should be seen under the memory services or the CMHT. The professionals are reliant on the GP providing enough information to make that decision and clinical judgement

As part of the National Service Framework (NSF) for older people and the guidance from the National Institute and Clinical Excellence (NICE) there are protocols in place that enable the local GPs to know when they should trigger a referral to the specialist mental health services. Of course the GPs are reliant on the patient and or their family/carer presenting at the surgery with a problem in the first instance.

The factors that would influence whether the patient is seen by the memory services or the CMHT depends at what stage their condition appears to be at and what type of dementia (if any) they might be suffering from. The memory service is best placed to assess and treat people, as appropriate, in the earlier stages of their memory problems. If the clinical picture is leaning towards Alzheimer's disease then the structured assessment, prescription of ChEI, diagnosis and review provided by the memory clinic is going to be more appropriate and beneficial. Typically these people may still be functioning quite well at home, some driving and engaging in a range of leisure activities. Many are living with their spouse or family who have noticed specific issues with the person's memory or ability to carry out tasks. The GPs referral may indicate some significant changes in the patient's clinical presentation.

For patients seen in the memory service, they and their family/carer are offered an initial appointment in clinic within four weeks of the referral. At that appointment various screening assessments will be carried out including an assessment for the carer as appropriate. One of the assessments carried out is the Mini Mental State Examination (MMSE) which is the critical score indicated by the NICE guidance for the prescription of ChEI. Patients are then offered a further appointment with the Psychiatrist, who is able to give the diagnosis. If the diagnosis is indicating an Alzheimer's type dementia then the patient may be eligible for a ChEI as long as their MMSE score is in line with NICE guidance. These people will receive regular follow up in the memory service and support with their diagnosis. All patients/families assessed in the memory service will receive information about memory problems, strategies for coping and signposting on to other helpful resources.

For those scoring above 20 on the MMSE (not meeting NICE guidance for ChEI) they will be offered a review by the memory service at six months to

assess for changes or deterioration and may be offered treatment or discharged as appropriate. At any point these people can contact the service again for support and or get re referred by their GP. The memory service can also at any point refer on any patient to the CMHT if it looks likely that the situation with regards to the patient's condition or circumstances at home have become more advanced or complicated.

If the initial GP referral indicates a more complex picture with a more advanced memory problem, perhaps much less functional ability, issues with behaviour or social functioning, little social support at home, more physical frailty and a clinical picture conducive with a vascular dementia, then it is likely that assessment, treatment and support at home by the CMHT is going to be more appropriate. Many of these patients could not get to a clinic.

For patients to be assessed in the community by the CMHT, they will receive a similar assessment process of their mental health needs, memory and social circumstances. This will usually take place within a week or two of the referral. They will be allocated a specialist professional to coordinate their care within the service and at the interface with partner organisations as appropriate. These patients are likely at this stage to require longer term support from the CMHT and other services with regards to care and diagnosis. The same psychiatrists work across the whole service and as necessary will see patients or advise other CMHT staff. They can prescribe ChEI as appropriate for patients seen by the CMHT.