

(CMHT):

Funded by Primary Care Trusts (PCTs), the CMHT comprises:

- Consultant Psychiatrist
- Community Psychiatric Nurse (CPN) team
- Home treatment
- Assertive Outreach/ Crisis Resolution/ Early Intervention/Dual Diagnosis teams
- Psychiatric Liaison (A&E/MAU*)
- GP
- Psychologist
- Social worker
- OT
- Voluntary sector support agencies

* Medical Admissions Unit

DOH Mental Health Policy Implementation Guide

This has the following guidelines:

The CMHT works with primary care. This includes pre-referral discussion; triage at GP surgery; referrals to a single point of entry.

In terms of assessment, aims should be same day crisis response assessment; prompt routine assessments (4 weeks max, working towards 1 week);

Consultant/Staff grade doctor should be involved in more than 70% of these assessments. The patient should have a choice about whether he/she is seen at surgery or at home. The service user should be involved in assessment

As regards Social services assessment within the framework of CPA, there should be an integrated approach and a single point of referral.

A team approach is vital, with assessments & reviews at a weekly meeting; there should be cross cover within the team (not profession specific) and of course, good continuity of care.

- Regular review should be undertaken weekly, with the Consultant and include ongoing review of care plans of severely mentally ill patients. There should also be regular reviews with the Primary Healthcare Trust (PHCT).
- Interventions: establishment of referral arrangements should be an early priority; a care co-ordinator ensures continuity using home visits, repeat appointments etc.; it is essential that contact frequency be flexible.