Referral For Advice
Adult Mental Health Services (18-65)

Belfast Health and Social Care Trust

Dr Kathy Lark (Specialty Doctor in Psychiatry)

Current Issues…

Primary Care

Patient Journey

Secondary care

Referral for Advice, the aims of the service

- Initially to provide support during the Covid pandemic.
- Ensure rapid specialist support to GPs.
- Enable quicker access to treatment for patients and reduce the patient journey.
- Enabling conversations to occur between doctors in Primary and Secondary care leading to joint learning and cooperation

GP

Patient

Referral for Advice Psychiatrist

Medical Specialists

Pharmacist

RC PSYCH ROYAL COLLEGE OF PSYCHIATRISTS Perinatal

Specialist Colleagues eg Perinatal Psychiatrists

What sort of problems is the Referral for Advice available for……

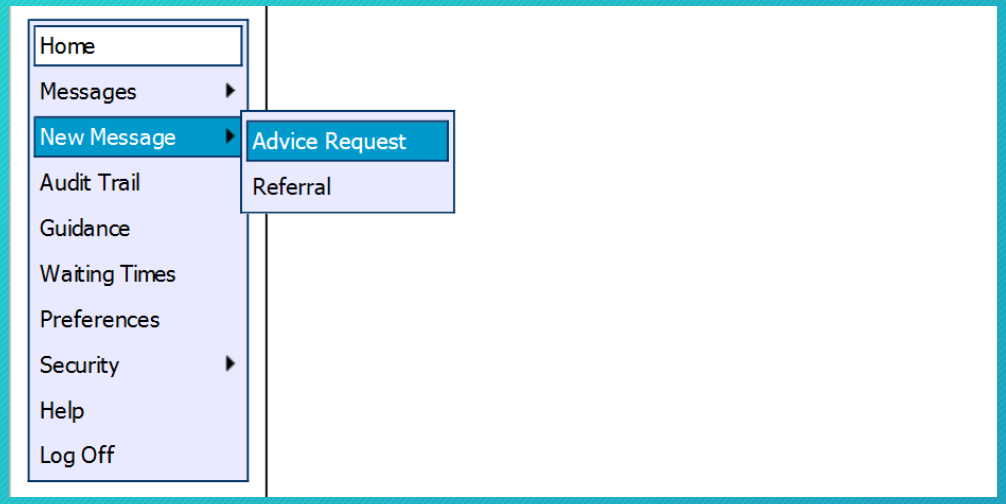
- Advice regarding change and choice of antidepressants…
- Management of medication side effects…
- Prescribing psychotropic medication on a background of physical health conditions eg epilepsy or cardiac disease…
- Ongoing treatment plans and management of patients GPs are happy to review but would like some advice and support to do so..

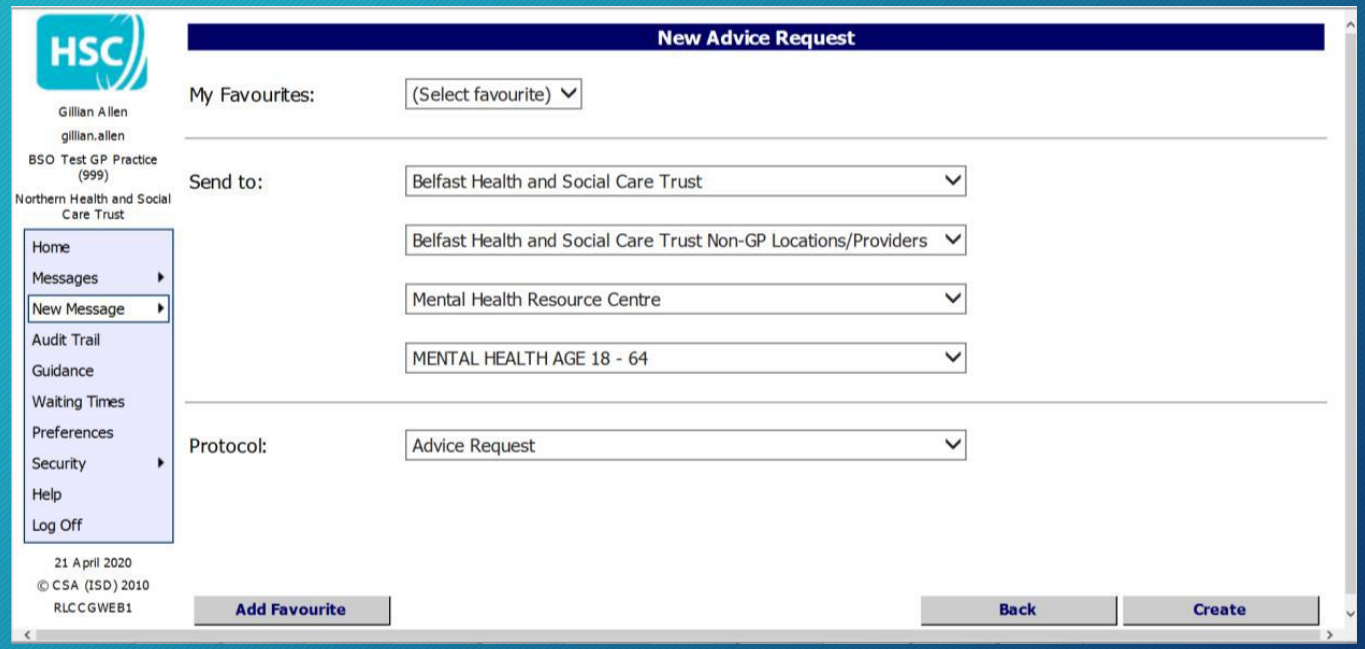
Referral for Advice is available if the patient is….

- 1) Aged 18-64 and living in the catchment area of Belfast Mental Health Services
- 2) **NOT** currently open to Mental Health Services
- 3) **NOT** currently requiring specialist mental health assessment

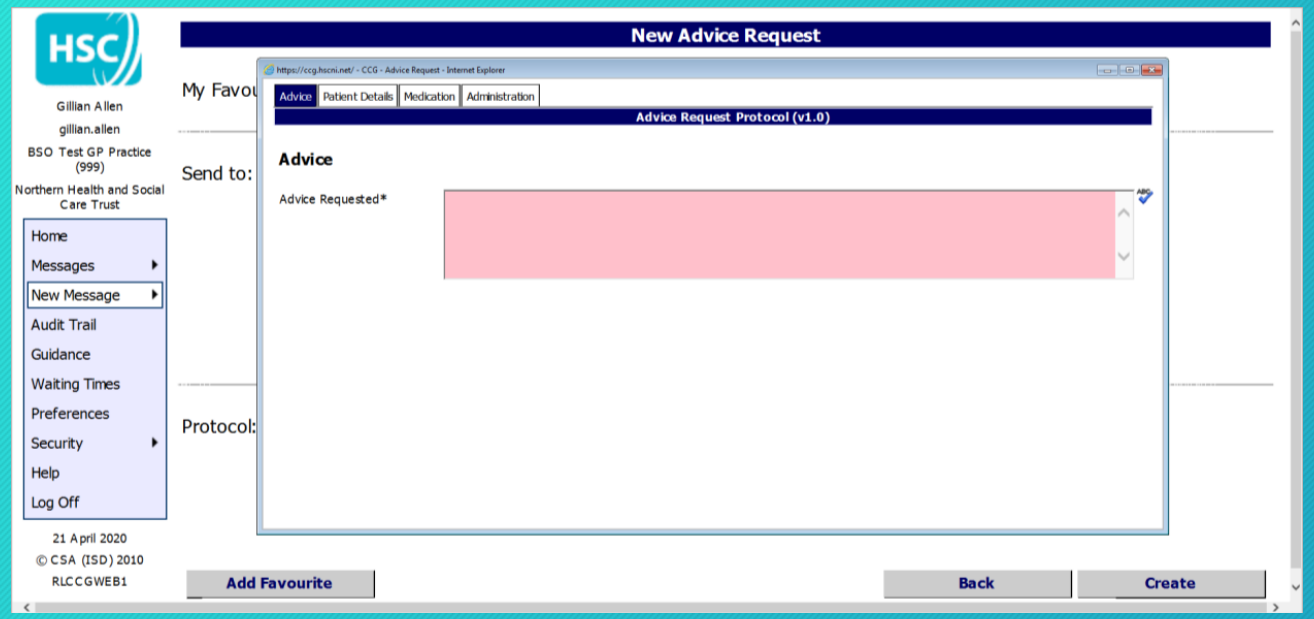
This service does not replace referrals for urgent or emergency assessments

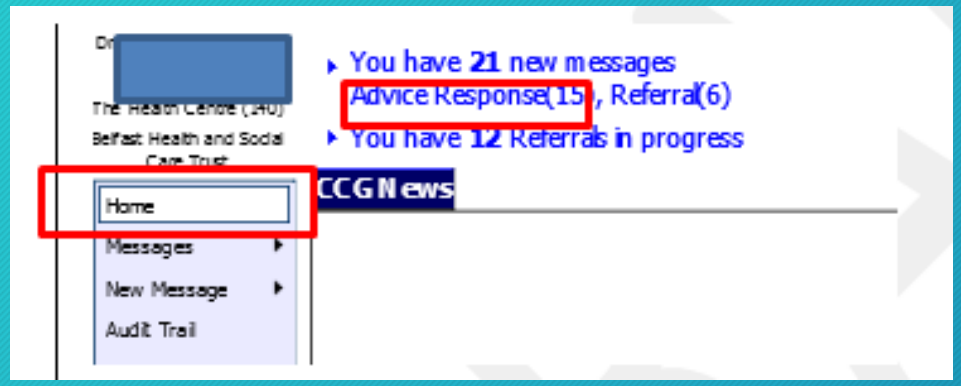
Process of referral





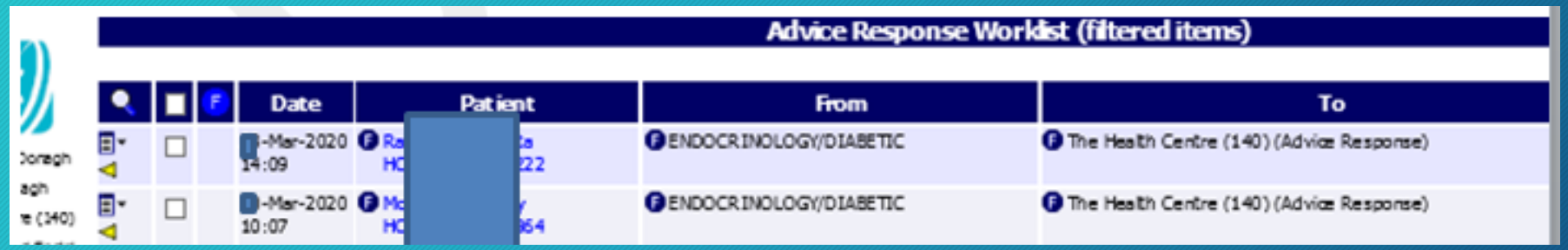
Referrals are responded to within a maximum of three days but normally 24-48 hours





GPs need to look for the reply on CCG.

A copy of the referral and response is on ECR



Referral for Advice Request

(Anonymised example)

Advice Response

22/10/2020 16:58

ADVICE REQUESTED FROM	ADVICE REQUESTED BY
Dr Kathy Lark Mental Health Resource Centre Woodstock Lodge 1-15 Woodstock Link Belfast	

ADVICE REQUIRED:-

Summary of request

Choice of antidepressants associated with ophthalmic issues. Consultant Ophthalmologist suggested the need to change antidepressants. With the co-morbid conditions what would be a good choice in this case.

ADVICE GIVEN:-

Apologies for the delay in getting back to you but I was looking into your interesting query an checking a few details with our pharmacist. In summary the risks regarding raised IOP in term of antidepressants are Lower risk are Agomelatine, bupropion(unlicensed in the UK) and vortioxetine Moderate risk are duloxetine, MAOIs, Mirtazapine, Reboxetine, SSRIS, trazadon and Venlafaxine, It is unfortunate that he has to change his antidepressant having responded w to Fluoxetine. I could not find any Ophthalmology letters on ECR but I would suggest discuss this list of options with the ophthalmologist to ensure they are happy with the alternative lowe risk medications from their point of view. I would be happy to advise how to switch if require and I also have further information about ophthalmic side effects of antidepressants if you wo like me to email it to you. I can be contacted via my secretary on 95043415. Kind regards Kat Lark

The first 3 months-
Survey to GPs who had used the service 20 questionnaires sent 13 returned

How straightforward did you find the process of requesting Referral for Advice?	100% Easy
How was the response time?	100% Very good
How useful did you find the advice received?	70% Really Useful 30% Useful
What would you have done if this service wasn't available?	84% Refer into services 8% Speak to a Psychologist/try to phone 8% Manage myself

The first year

- 127 referrals received.
- These came from 74 GPs and 46% of these used it more than once.
- 47 GP surgeries sent in a referral and 51% of these sent more than one.
- 66% were for medication advice eg hyperprolactinaemia, epilepsy, raised IOP, treatment resistance.
- 75% of RforA were managed without the need for referral into services.

What GPs who had used the service thought

- Very prompt and helpful advice. Very useful to be able to discuss the case doctor to doctor and create a management plan. Hope service keeps going. Many thanks.
- Keep this service as it has been really useful for more complex patients
- Excellent service. Very much appreciated. Efficient – really helpful information. Please Continue!!

Teething problems

- If a patient is known to services but the GP doesn't know what team the Referral for Advice has been used to access this information

  Community Mental Health service Duty Team on

  028 95041327

- If a patient needs to be seen it can be confusing if a referral for advice is sent in at the same time.
- Access by telephone can be time consuming in both directions and arranging a mutual time to talk, difficult.

I would love feedback…

- What can we do to advertise the service to increase utilisation?
- Are there any developments you would find helpful?
- Any other comments

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