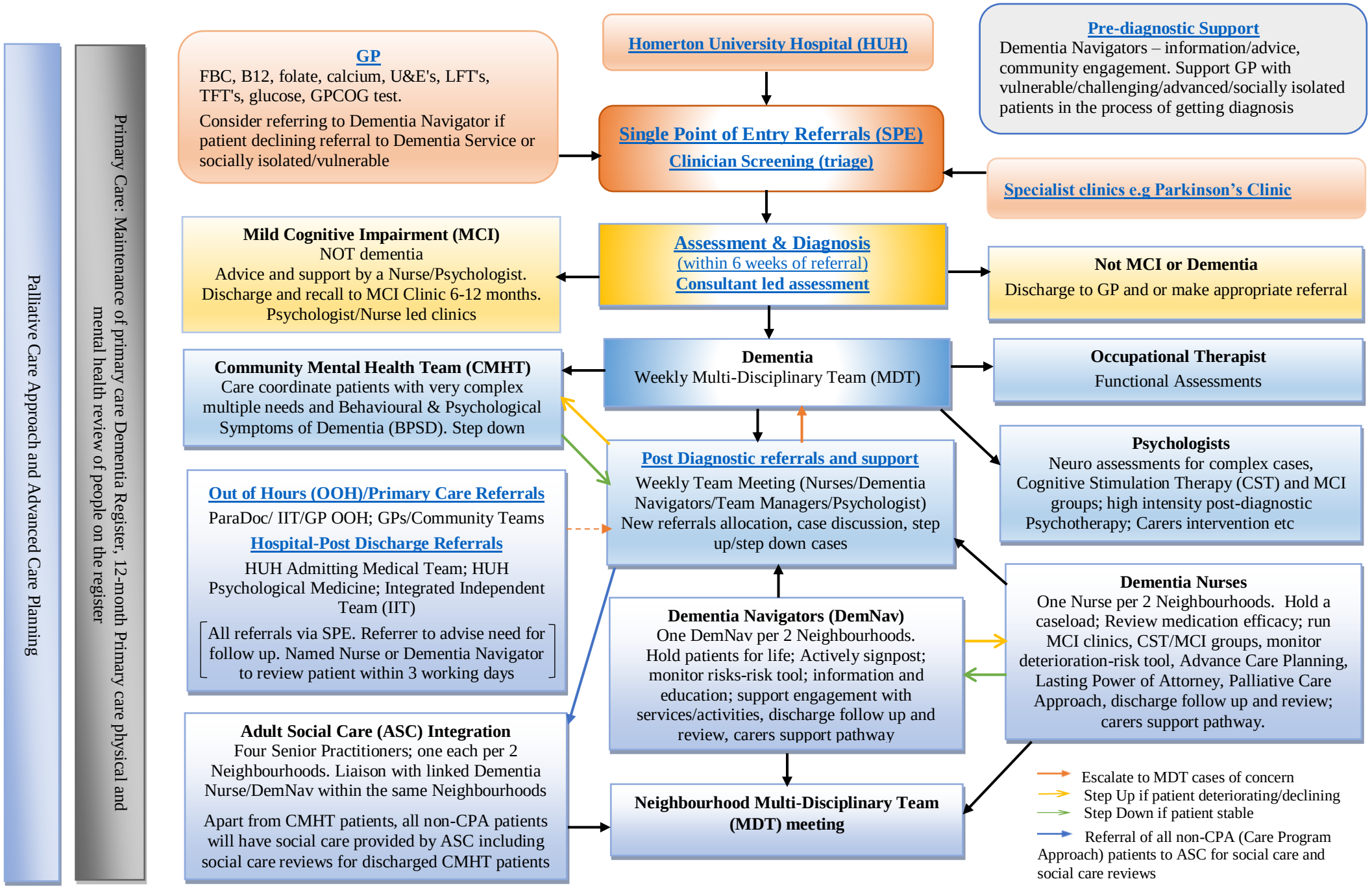
City and Hackney Dementia Care Pathway v6.1- July 2020



1. Pre-Diagnostic Referral and Support to GPs	**1.1 GP Referrals to Dementia Navigators** • Each GP practice has a named Dementia Navigator (see appendix 1 for details) to work with and refer patients directly to for support and engagement • Use the Dementia Navigators Support Referral form (see appendix 2) • GPs to refer patients for whom there is a concern of memory problems but who - are challenging and not engaging with the GP - have declined referral to the Dementia Service (formerly Diagnostic Memory Clinic) or have reservations • Dementia Navigators to work with the patients and their carers/relatives where possible to fact find - listen to patients/carers/relatives' concerns to understand the main issues/challenges necessitating non-engagement - explain the process of screening/diagnosis and answer any questions where possible - give advice and information about dementia - jointly work up an intervention plan - if patient declines to engage, leave contact details and let them and their carers/families know the support is always available whenever they are ready to make contact. - if findings are more system related and beyond the remit of dementia navigator to intervene, refer findings to the Dementia Alliance • Dementia Navigators to feedback outcome to the GP
2. Single Point of Entry (SPE) Referral to the Dementia Service All referrals to the Dementia Service via the Single Point of Entry (*e-referral - GPs*) **SPE contacts:** - Email: elt-tr.mhcop.duty@nhs.net - Telephone: 0203 222 8500	**2.1 New Referrals for suspected Dementia** • Referrals accepted from: - GPs or community matrons (GP completes dementia blood screening and GPCOG Test) - Homerton University Hospital (e.g. patient has been inpatient or has been seen in a specialist clinic) - Other specialist clinics e.g Parkinson Clinic • Referral to include: - Medical history and medication - Description of symptoms/functional impairment - Whether an interpreter is needed, - Details of a carer or Next of Kin if there is one, - copy of results of blood tests • GPs can now refer via e-referral. • All referrals received triaged by Duty • GPs can email Consultant (emma.teper@nhs.net) for advice to discuss, especially for <65 patients where, unsure if memory assessment indicated **2.2 Referrals of Patients with a diagnosis of dementia** • Referral can be from any service or professional • Referrals from ParaDoc, IIT, GP OOH, HUH Admitting Medical Team, Homerton Psychological Medicine, • When referring, please advise if follow up is required. If urgent or where follow up is required, patient's named care professional (nurse or Dementia Navigator) will make contact and arrange F2F with patient within 3 working days of receiving the referral

3.	**Assessment and Diagnosis**	**CH Dementia Service Diagnostic Team** • Consultant led assessments • Assessment and diagnosis within 6 weeks of referrals • Doctors complete initial assessments and MCI feedback if dementia is suspected • MDT - initial assessments and MCI - more complex cases and refer for neuropsychological assessment - cases of concern etc.
4.	**Post Diagnostic Referral and support**	**CH Dementia Service Review Team** • Nurse led working alongside Dementia Navigators • Weekly team meeting chaired by Team Leader • Allocation of new referrals by neighbourhood • Case discussions including step up /step down cases • Post diagnostic follow up by nurses and dementia navigators - Telephone contact within 2 weeks of referrals - Face to face contact within 6 weeks - Risk stratification tool - Nurses to initiate conversion on ACP and LPA - Nurses -MCI recalls-run MCI Clinics • Each patient has a named Dementia Nurse or Dementia Navigator depending on complexity • The named nurse and dementia navigator are also the named practitioners for each of the GP practices within the neighbourhood • Attend respective Neighbourhoods MDT • The nurse is the lead practitioner for the neighbourhood • Nurses hold patients starting on medication and who are complex for a minimum of 3 months and when stable step down to dementia navigators or step up to CMCHT if becoming high risk and meet the criteria • Dementia navigators hold patients for life and review the majority of patients - stable and non-complex. Step up to neighbourhood nurse if patient is declining
5.	**Specialist Support**	**Consultant Psychiatrist** • Assessment & Diagnosis • Initial Prescribing • Clinical Lead and advice to GPs • Medical input into team
		Psychologist • Cognitive Stimulation Therapy • Memory and Wellbeing Group (for MCI) • MCI recall-run MCI clinic • Neuropsychological assessment • Carers intervention • Training, education and consultation to the team
		Occupational Therapist • Functional assessments to support diagnosis • Assessment & Support for dementia-related challenges in activities of daily living

6. LBH Adult Social Care Contacts Details Information and Assessment Duty (the Front Door): 0208 356 6262 access@hackney.gov.uk Long Term Team (Community case management team): 0208 356 2227 duty@hackney.gov.uk Safeguarding Direct Line 0208 356 6262 adultprotection@hackney.gov.uk Occupational Therapy Duty 0208 356 5533 / ot@hackney.gov.uk CHAMRAS - Mental Health Team 0203 222 8000 MHCOP - Mental Health Older people: 0203 222 8500 Adults Social Work Out of Hours 0208 356 2300	• CPN/dementia navigator to work with linked senior practitioner within their respective neighbourhoods • Refer to ASC all patients for social care including social care reviews of stepped down CMHT patients • For urgent cases call to discuss first with Duty • For carers where there is a breakdown refer to ASC for carers assessment. All other cases follow referral pathway to Carers First (Tel: 0300 303 1555 and email: info@carersfirst.org.uk)

7. Appendix 1: CH Dementia Service- Linked Neighbourhoods Practitioners

Neighbourhoods	Neighbourhoods Dementia Nurse (Lead Practitioner)	Neighbourhoods Dementia Navigator	PCN Aligned Care Home
Clissold Park	Alain Michel Nana alain.michelnana@nhs.net	**Ana De Genova** **ana.degenova@nhs.net** Cilla Weekes Cilla.Weekes1@nhs.net	Beis Pinchos
Woodberry Wetlands			St Annes
Hackney Downs	Diana Okoukoni Diana.Okoukoni@nhs.net	**Siobhan Cronin** **Siobhan.Cronin1@nhs.net** **Amy Claringbol** **Amy.claringbold@nhs.net**	
Springfield Park			
Hackney Marshes	Vacant	Claire Wheeler Claire.wheeler@nhs.net	Acorn Lodge
Wells Commons			Lookahead - Clarence Road
London Fields	Christabel Kapochina Christabel.Kapochina2@nhs.net	Carol Feldon Carol.feldon@nhs.net Joyce Tomlinson Joyce.Tomlinson1@nhs.net	Lookahead - Felstead Street
Shoreditch Park and City			Queen Elizabeth II Infirmary (The Charterhouse)

Note: the 8 Neighbourhoods have been paired. Each pair has a link Dementia Nurse (Lead Practitioner) and Dementia Navigator (s) who are the named care professionals for patients and GP practices within the neighbourhoods.

Telephone contacts

1. Nurses (For Dementia related clinical issues and support): **020 3222 8500**
2. Dementia Navigators (for Community Support, advice, and information): **020 8533 0091**

8. Appendix 2: Alzheimer's Society Dementia Navigators Support Referral Form

New Dementia Navigators Support