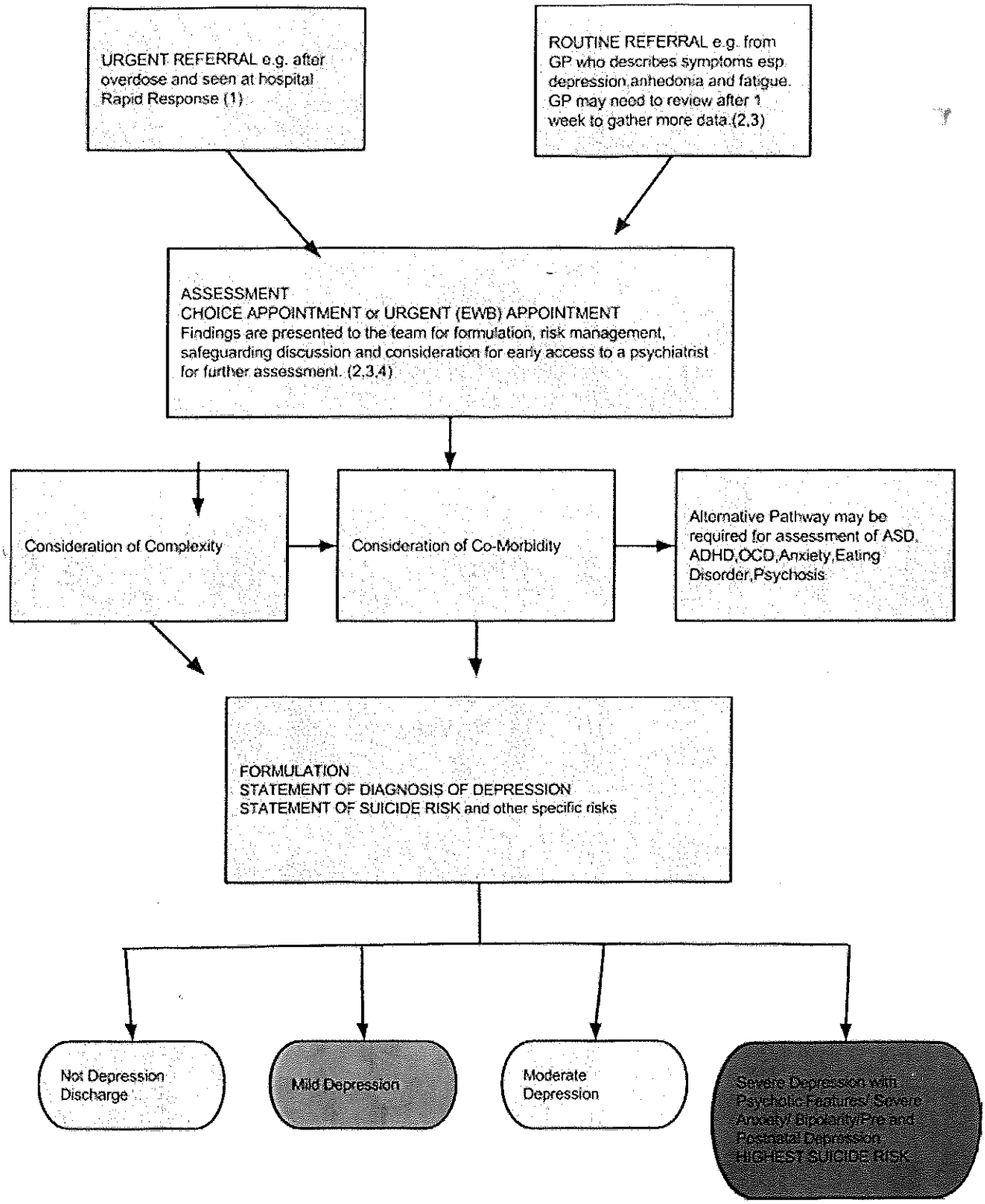
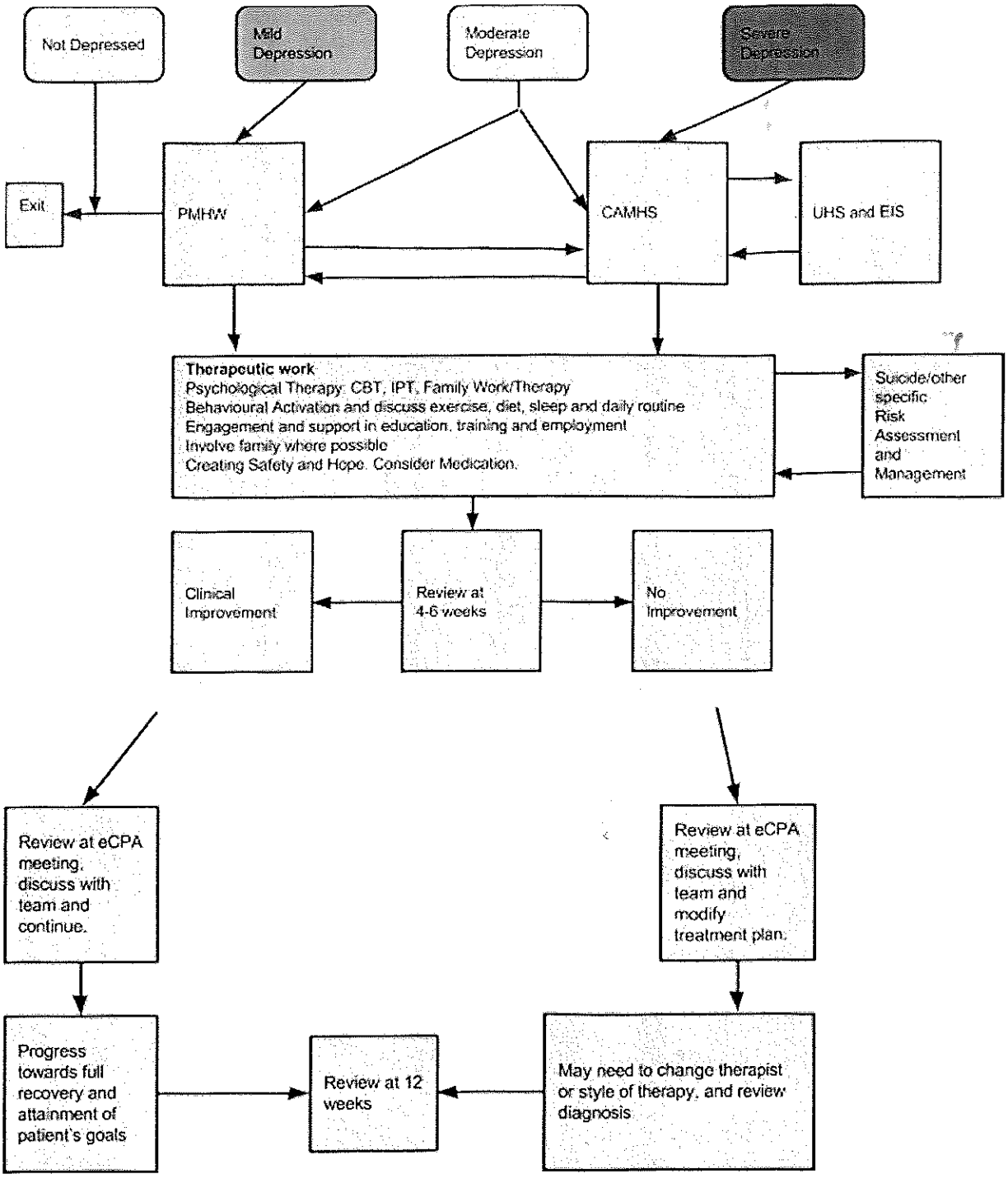
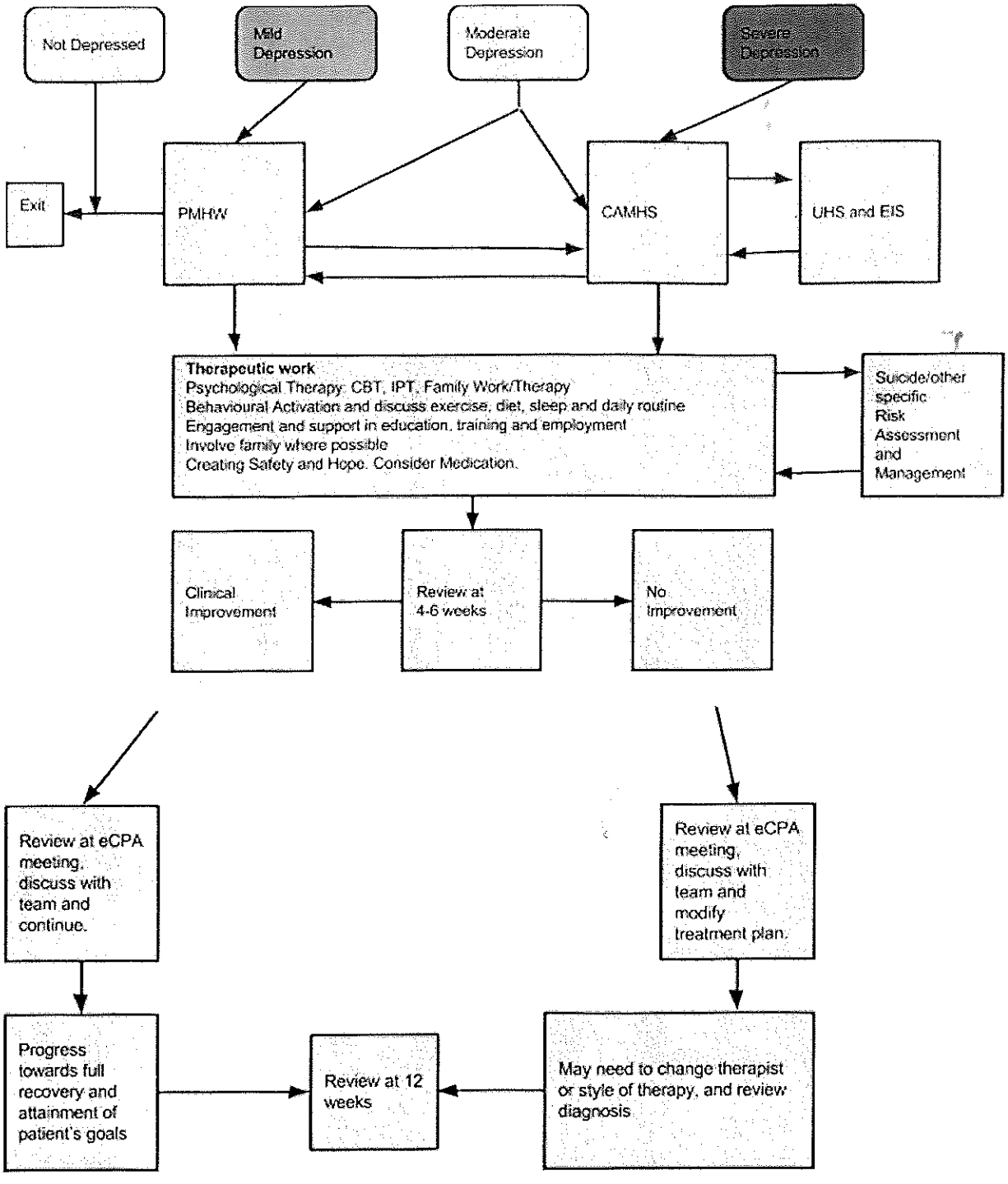

URGENT REFERRAL e.g. after overdose and seen at hospital Rapid Response (1)
ROUTINE REFERRAL e.g. from GP who describes symptoms esp. depression,anhedonia and fatigue. GP may need to review after 1 week to gather more data.(2,3)
ASSESSMENT
CHOICE APPOINTMENT or URGENT (EWB) APPOINTMENT
Findings are presented to the team for formulation, risk management, safeguarding discussion and consideration for early access to a psychiatrist for further assessment. (2,3,4)
Consideration of Complexity
Consideration of Co-Morbidity
Alternative Pathway may be required for assessment of ASD, ADHD,OCD,Anxiety,Eating Disorder,Psychosis
FORMULATION
STATEMENT OF DIAGNOSIS OF DEPRESSION
STATEMENT OF SUICIDE RISK and other specific risks
Not Depression Discharge
Mild Depression
Moderate Depression
Severe Depression with Psychotic Features/ Severe Anxiety/ Bipolarity/Pre and Postnatal Depression
HIGHEST SUICIDE RISK


Not Depressed
Mild Depression
Moderate Depression
Severe Depression
Exit
PMHW
CAMHS
UHS and EIS
Therapeutic work
Psychological Therapy: CBT, IPT, Family Work/Therapy
Behavioural Activation and discuss exercise, diet, sleep and daily routine
Engagement and support in education, training and employment
Involve family where possible
Creating Safety and Hope. Consider Medication.
Suicide/other specific Risk Assessment and Management
Clinical Improvement
Review at 4-6 weeks
No Improvement
Review at eCPA meeting, discuss with team and continue.
Review at eCPA meeting, discuss with team and modify treatment plan.
Progress towards full recovery and attainment of patient's goals
Review at 12 weeks
May need to change therapist or style of therapy, and review diagnosis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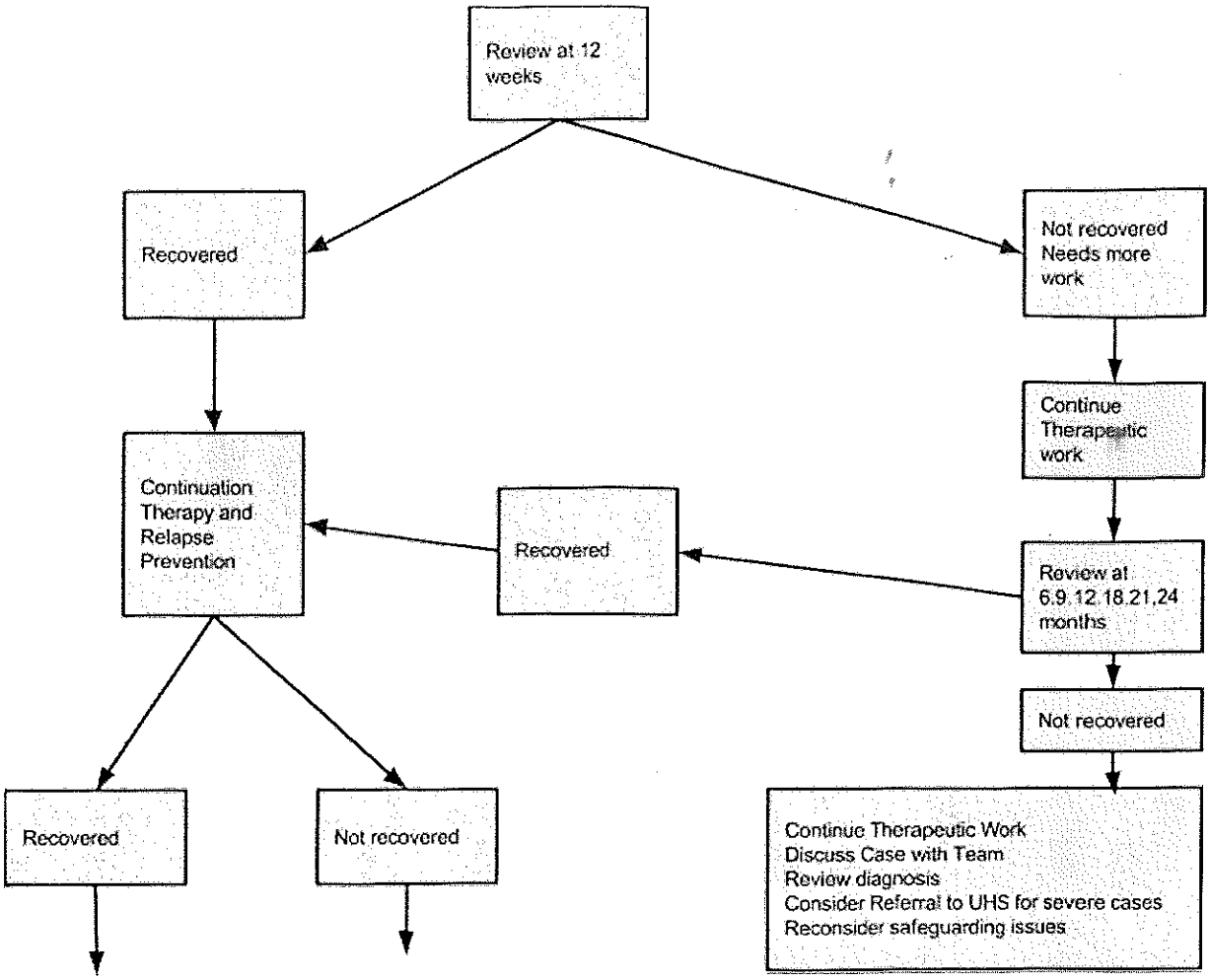
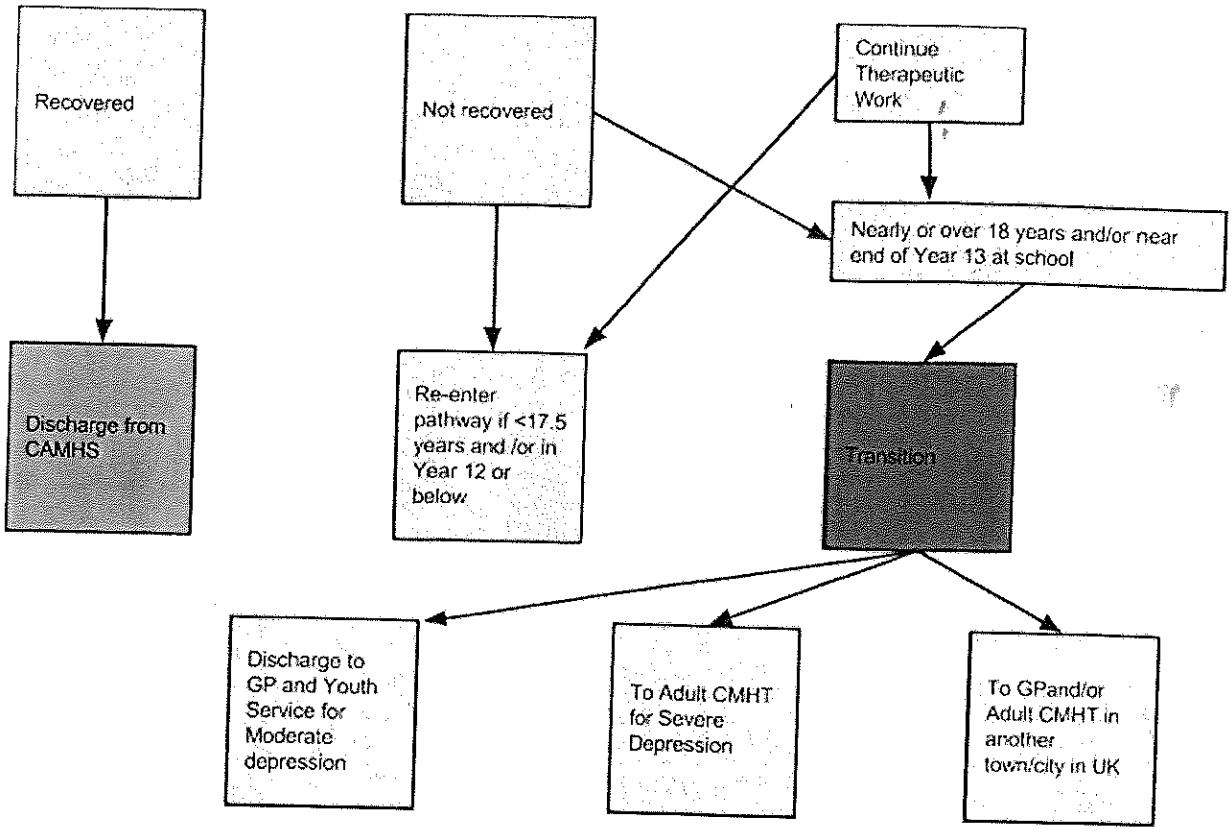

Review at 12 weeks
Recovered
Not recovered Needs more work
Continue Therapeutic work
Continuation Therapy and Relapse Prevention
Recovered
Review at 6,9,12,18,21,24 months
Not recovered
Recovered
Not recovered
Continue Therapeutic Work
Discuss Case with Team
Review diagnosis
Consider Referral to UHS for severe cases
Reconsider safeguarding issues


Recovered
Not recovered
Continue Therapeutic Work
Nearly or over 18 years and/or near end of Year 13 at school
Discharge from CAMHS
Re-enter pathway if <17.5 years and /or in Year 12 or below
Transition
Discharge to GP and Youth Service for Moderate depression
To Adult CMHT for Severe Depression
To GPand/or Adult CMHT in another town/city in UK