



Brighton and Sussex
University Hospitals
NHS Trust

Community Cards

*Connecting care between the
community and the acute floor*

Acute Floor



BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST



Community Cards can be used by all members of the
Acute Floor multidisciplinary team

***They summarise key resources to link acute and
community care for patients, and offer alternatives
to admission or emergency attendance.***

***Email bsuh.acutefloorproject@nhs.net with any
comments or additions***

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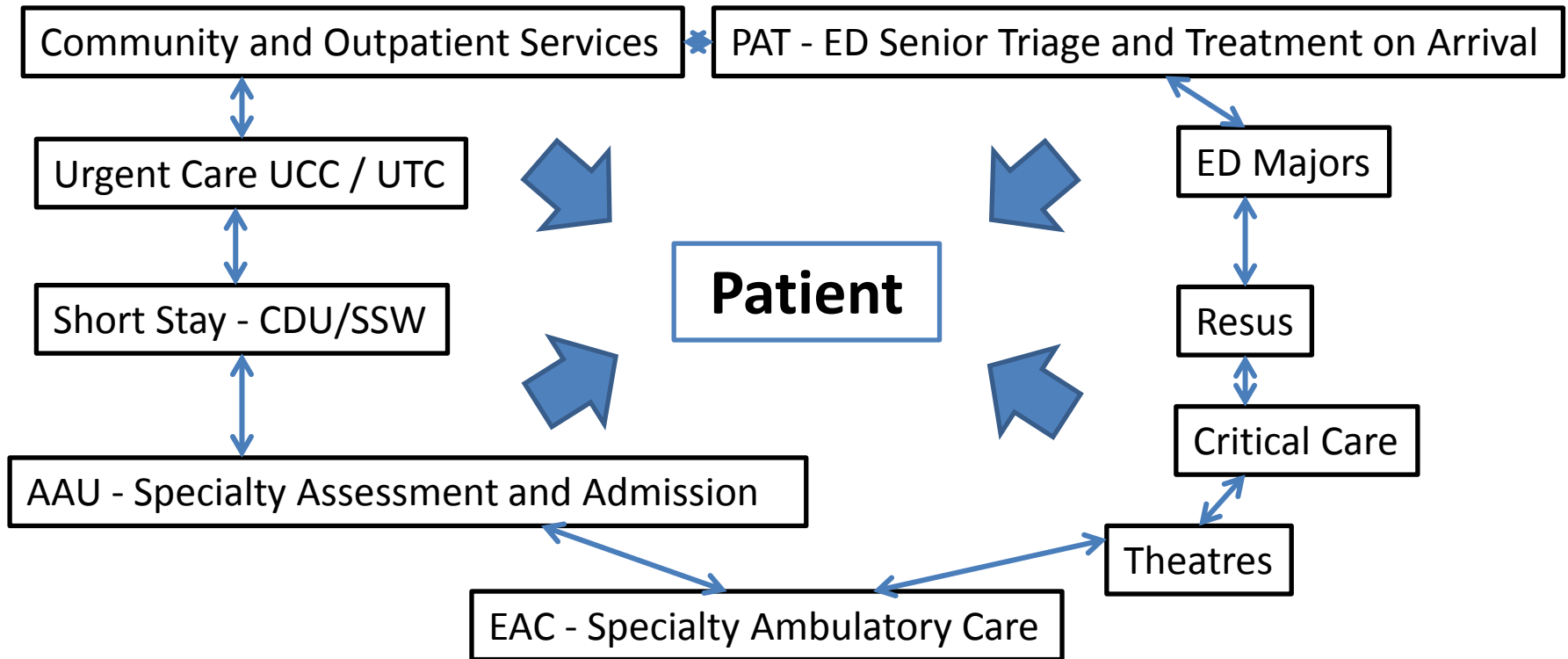


BRIGHTON AND SUSSEX UNIVERSITY HOSPITALS NHS TRUST



The Acute Floor: The Right Care from The Start

Our Integrated Front Door Services



Acute Floor



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Community Cards: 1

Ambulatory Care



Think Ambulatory!

Ambulatory Care is default option for seeing ambulant urgent and emergency care patients needing specialty team input.

Only admit if meet specific admission criteria. Document these.

Consider ambulatory care for all appropriate medical and surgical patients.

“Reduce time spend in ED” “Improve patient experience”

“Improve flow”

“Enable rapid senior specialty led review within the next few days”

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Community Cards: 1

Ambulatory Care

Use when...

Review of response to initial treatment if community care not available

Ongoing IV antibiotics

Essential follow up blood tests

Schedule a drain or procedure

Blood product transfusion or lengthy infusion

Urgent surgical/medical review with imaging

Referral



EACU
(RSCH)

Same day

Medical + Surgical - refer as normal to on call specialty. If accepted phone EAC coordinator on **62073** to see if capacity and arrange transfer.

Next day (s)

Via **Panda**: access via BSUH Applications / Symphony / Whiteboard

Medical – refer online directly.

Surgical – speak to specialty senior first, then refer online

RAMU
(PRH)

All patients – speak with relevant specialty and RAMU nursing team
Then add details and date coming in to Whiteboard

Community Cards: 2

Homeless Team

Mon-Fri In Hours:

Our hospital homeless team - Contact Gregg Lock gregg.lock@nhs.net, Katie Carter katie.carter1@nhs.net Call **07884195417** (mobile) **01273 523166** (office)

Otherwise, provide resources to the following:

- **First Base Day Centre** – hub for plethora of resources and support
 - **Offices close:** 3.30pm but can advise person to attend next day
 - **Contact details:** St Stephen's Hall, Montpelier Place, BN1 3BF, **01273 326844** <https://www.bht.org.uk/services/first-base-day-centre/>
- **Arch Healthcare GP Practice– Morley Street** – Support your patient to register / contact for follow up: <http://www.archhealthcare.uk/> **01273003930**
- **Street Sheet** - Combined map and list of resources of all relevant services including food and shelter for homeless people in Brighton and Hove. Available in UCC / CDU / SSW as leaflets to give out.
- **Street Link** - Add person with consent: <http://www.streetlink.org.uk/tell-us-about-a-rough-sleeper> St Mungo's charity will then provide community outreach

Community Cards: 3

Pavilions Drug and Alcohol Liaison

Offer referral to all those from Brighton and Hove with drug or alcohol related problems

If in hospital needing to see Pavilions Liaison Nurse– Mon-Fri 9am-5pm :

Phone: ext **67826** or **mobile:** *Mim* (Mon and Tues – **07833403688**),
Vicky (Thu and Fri - **07833057049**) and *Tim* (Fri – **07833201858**)

If out of hours / not needing to see Pavilions Liaison Nurse:

Online Referral Form, takes 2 minutes: [Click here to download the referral form](#)

Or phone duty team - Tel: **01273 731900** / Email: referrals@pavilions.org.uk

Helpline

Anyone can call Pavilions main office on **01273 731900** or **0800 014 9819** for information and advice 9-5pm Monday to Friday, 9-7pm Thursdays & 10-1pm Saturdays. Outside of these hours, a comprehensive voice message will give details of out of hours services

Opioid Overdose/Risk ?

Discharge with Prenoxad (naloxone) minijets – in 2b clinical room + note patient ID in the book there

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Community Cards: 4

RACOP

Rapid Access Clinic for Older People

Patients can be referred to RACOP if they would benefit from:

- Rapid outpatient comprehensive geriatric assessment
- Outpatient complex care/frailty assessment
- Follow up of outpatient investigations in context of the above

Rapid outpatient comprehensive
geriatric assessment

Patients aged 70 or over
(Or <70 with complex geriatric
needs)

Aim to see patient
within 72 hours

RACOP will aim to see patients within 72 hours (capacity dependent)

- Please do not promise a date and time for appointment – RACOP will contact patient with further details.

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Community Cards: 4

RACOP

Referral Criteria:

- Aged **70 or over** (or complex geriatric needs if under 70).
- Reasonably mobile and can transfer with 1 (patients requiring hoisting or heavy transfer with 2 are not suitable)
- Can be easily managed within the community

How to refer:

- Online via Intranet in Elderly Care section
- For advice regarding referrals contact:
 - Elderly Care on call Consultant on **62011** (available within working hours 7 days a week)
 - RACOP Clinic coordinator on extn. **63045** (Mon-Fri 8am – 4.30pm)

Note: Please DO NOT refer patients with new suspected malignancy via this pathway.

Community Cards: 5

Possability People – Link Back

- **Link Back** - Is a free service for anyone over 55 who has had a recent hospital attendance/admission.
- Aims to link people to the community, voluntary and private sector services that can enhance their independence and day to day lives on their return home.

Possability
People

Information and advice needed to
reduce loneliness and social isolation
in those over 55 leaving hospital

- **Examples of support the service can link patient to:**
 - Befriending support at home
 - Social activities including lunch clubs and day centres
 - Disability and welfare benefits advice and advocacy
 - Mental health peer support and advice
 - Short term re-ablement support
 - Local paid for in-home services (eg. Hairdressers, gardeners, handymen etc.)

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Community Cards: 5

Possability People – Link Back

- **Referral criteria:**

- Aged 55+ and have had a recent hospital admission at RSCH or a local health facility (Craven Vale, Knoll House, RACOP)
- Have capacity to engage with the service or have a carer with whom we can engage with on their behalf
- Do not have a complex mental health condition/substance misuse issues
- Are a resident of Brighton and Hove
- Give consent for the referral
- Are medically ready for discharge

Possability
People

- **How to refer:**

- [Referral form](#) available on Microguide – in Community Services Guide
- Return completed forms to linkback@possabilitypeople.org.uk
- For more info please contact Rupert, Rosie or Gwyn on 01273 069851.

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Community Cards: 6

Responsive Services

- **Multidisciplinary team** - visit patients in their own home (including care homes or temporary accommodation) providing short term health support to help people recover and remain in their own home.
- Short-term **Nursing, physiotherapy** and **occupational therapy** assessment and support.
- Responsive services can arrange:
 - Respite care
 - Home care assistance
 - Intermediate care at home or residential
 - Falls prevention and/or nursing intervention

Short term health
support to help people
recover and remain in
their own home

How to refer:

- Via Professional support line (PSL) – call **0300 1303045** (8am-8pm) and they will set up a conference call with Responsive Services.

Community Cards: 7

Professional Support Line (PSL)

- PSL is available to support clinicians organise a range of community services

Phone: **0300 130 3045**

08:00-20:00, 7 days a week, 365 days a year (including bank holidays)

- Services PSL can provide access to include:
 - Community Rapid Access Respiratory Clinic
 - Responsive Services
 - IV therapy team
 - Roving GP service
 - Health and Social Care Connect (HSCC)
 - Patient Transport Service (PTS)

The Acute floor can use PSL to refer to PTS and arrange urgent GP follow-up

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Community Cards: 8

Transport

Patients should be expected and encouraged to make their own way back when possible. If not possible the following options are available:

Red Cross

Phone: 01273 326 089

The Red Cross team can take suitable patients home, and ensure they are comfortable. They can check that lights and heating are working and that the fridge is cleared and restocked, for example.

They offer two follow-up home visits, helping with practical tasks, companionship and signposting to other helpful organisations

Impulse Crew

Contact the Clinical Site Manager on 62005 for assistance

Community Cards: 9

Mental Health

Mental Health Liaison Team (MHLT)

This is a 24 hour face to face mental health nurse led service available at RSCH

Ph: **01273 696955** ext **4248**, Bleep **8484**

Mental Health Rapid Response Service (MHRRS)

This is a 24 hour, 365 day a year service for people in Brighton and Hove requiring urgent mental health support

Ph: **0300 304 0078**

Community Cards: 10

Brighton and Hove

Urgent Care Services Directory

This directory provides a comprehensive overview of many of the key services linking acute and community care across Brighton and Hove

The Directory is accessible and downloadable via the BSUH Microguide, within the Cross Specialty Guide if using as an app, or via the weblink [here](#)

Community Cards: 11

Emergency Dentist

Emergency Dental Service

Emergency dental advice and treatment appointments out of hours for temporary and urgent treatment

Only when daytime dental practices are closed.
Appointment must be made – not a walk-in service.

Phone: **0300 024 2548**

Open:

17:30-22:30, M-F

09:00-17:00, W/E

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Community Cards: 12

Community Palliative Care

Holistic care for people living with and dying from life limiting illness

Hospice@Home

Visiting service Monday to Sunday. 08:00 – 21:00 Ph: 01273 964164

In Hours Advice

Ph: 01273 964164, Fax 01273 273450

Phone advice: 08.30- 16.30, M-F 08:00 – 16:00, W/E

Out of Hours Advice

Calls out of hours will be transferred to the Hospice.

On call consultant available for telephone support for health care professionals 24hrs

Community Cards: 13

Community Respiratory Service

A multidisciplinary service providing specialist assessment and support for people with respiratory disease

Patient criteria:

- Over 18
- Brighton and Hove GP
- CT or spirometry confirmed diagnosis of interstitial lung disease

Including

- Rapid Response
- Pulmonary Rehab
- O2 Service (respiratory and non-respiratory patients)

Phone: **01273 265593** 08:00-20:00, M-S

Community Cards: 14

Same Day Primary Care Appointments

Access to appointments with a GP or primary care nurse for patients registered with a local GP.

For 2 hour, 6 hours and 12 hour primary care dispositions.

Exclusions:

- Patients must be ambulatory (and able to visit a practice)
- Emergency/life threatening conditions
- Under 75 years
- No home visits

Contact Via NHS111

18:00-20:00 M-F, 08:00-13:00 Sat, 10:00-12:00, Sun & public holidays

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Community Cards: 15

Community Pharmacy

Local community pharmacists can help with many ailments such as coughs, colds, eczema, hay fever, and mild to moderate pain.

Refer patients to use a community pharmacist for the following:

Advice about minor illnesses

Advice on medication

Advice about prescriptions/over the counter medicine

Consultations and medication use review for prescribed medicines

Device counselling e.g. inhaler technique

Provide repeat prescriptions

Morning after pills/pregnancy tests

Lifestyle advice (incl. stopping smoking, weight loss) and support with self-care

Community Cards: 15

Medicines Management Service

Our CCG offers a medicines review service who see the patient at home/care home approx 2-3 weeks after a referral is made.

Adverse events from medications can contribute to some acute attendances.

Patients who may particularly benefit from referral include those on 5 meds or more, struggling to manage their meds, recent meds changes, falls, side effects, general functional decline / frailty, chronic illness with increasing care needs

How to Refer:

Via e-mail to BHCCG.bettercarepharmacists@nhs.net with the following information:

SUBJECT: MEDICATION REVIEW REFERRAL [insert GP Surgery/Care home of Patient in subject line]

1. Patient details
2. Contact details of patient/relative to arrange appointments and any specific communication needs if known e.g. interpreter
3. Reason for referral (attach any relevant documentation e.g. current medication list or recent hospital discharge letter)
4. Confirmation of patient consent for the pharmacist to access GP medical records
5. Contact details of individual making the referral
6. Please specify any known security issues about home visits