ESD Pathway

* Referred via One Call using ESD paperwork
* Referral brought in by coordinators and sent to daily triage lead
* Band 7 to triage and confirm which option (see below). Band 7 to discuss with RS coordinators re capacity.
* If capacity- RS to map in for care and initial including setting up ESD care plan
* If RNS only- RS to discharge and refer to RNS

Possible options from triage

1. RS therapy only
2. Neuro therapy only
3. RS therapy and RS reablement
4. Neuro therapy and RS reablement
5. RS OT/PT, Neuro SLT, +/- reablement
6. Not ESD

Pathway for QDS stroke- classed as non-ESD. Agreed with CCG and WSCC

1. Stroke Referral form to go to Hospital Social worker team for triage of care needs direct from ward
2. Hospital social workers will refer on to CPST for POC and copy in SCFT therapy leads .
3. Hospital Social worker to refer for assessment of long term need in community
4. SCFT therapy leads will notify One Call of acceptance/referral (internal SCFT pathway)
5. CPST to source POC. Please note that care start date cannot be confirmed until initial therapy assessment has been confirmed
6. Social worker to liaise with ward and SCFT therapy for discharge date