



**Integrated Neighbourhood Teams**  
Working with frail elderly people in Coventry

**How our service works**

# Pathway To Better Health At Home

Referral criteria for the Your Health at Home service:

- **Aged 60+**
- **Living in Coventry**
- **Registered with a Coventry GP**

Referrals can be made to the service by:

- A GP
- A Matron
- A hospital team

The referral will be sent to an Administrator and then triaged by a Care Navigator who will decide the appropriate level of support required.

**If a patient does not meet the criteria:** The referrer will be contacted and re-directed to an appropriate service.



## Level 1

Patients who feel lonely or isolated may find this level of care most beneficial.

Suitable for people who require informal support within the community. Support may include signposting people to community activities or a befriending service.

**This service is provided by Age UK.**

## Level 2

Patients are triaged to Level 2 if they require Level 1 services, plus the input of other statutory services.

Patients will be allocated a Key Worker to guide them through the appropriate services following discussion with the patient.

Support may also include sourcing equipment to help people remain independent in their own homes.

## Level 3

Patients are triaged to Level 3 if they have complex health needs that may require the input of more than one of the following:

- Community Matron
- Community Mental Health Nurse
- Occupational Therapist
- Physiotherapist
- Social Worker
- Care Navigator

Patients will be allocated a Key Worker who will guide and support the patient whilst they are receiving care.

# What happens next?



**Integrated Neighbourhood Team**

Patient goals will be agreed with the patient at all levels with the aim to improve quality of life and maintain independence.

Once patient goals have been achieved they will be discharged from the service.

If ongoing supportive services are required, this will be arranged by the Integrated Neighbourhood Team.