

Accessing Urgent Care Torbay & South Devon

Directory of Services (DOS)

Date	Version	
March 2025	1.0	
Accountabilities		
Author:		
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Approved by:		
Dr Catherine Blakemore		
Links to other documents		

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1	Guideline created
Last Approval	Due for Review
	September 2025

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Emergency Department
Urgent Treatment Centre Newton Abbot
Minor Injuries Unit Totnes Community Hospital
Minor Injuries Unit Dawlish Community Hospital
Acute Medical Unit (AMU)
Surgical Receiving Unit SRU (SRU
Short Stay Paediatric Assessment Unit (SSPAU)
Medical Admissions Avoidance Team (MAAT) Antibiotic Therapy, DVT & PE
Paediatric Inpatients
Breast Care
Cardiology
Dermatology
Diabetes & Endocrinology (D&E)
Ear, Nose & Throat (ENT).
Gastroenterology
General Surgery
Haematology
Healthcare of Older Person (HOP)
Maternity
Neurology
Obstetrics & Gynaecology
Oncology (Non-Surgical Cancer).
Oral & Maxillofacial Surgery (OMFS)
Orthodontics
Ophthalmology
Paediatric Outpatients
Respiratory
Rheumatology
Stroke
Trauma & Orthopaedics
Urology
Vascular
Virtual Wards
Devon Social Care
Torbay Social Care
Home Care Providers
Urgent Community Response (UCR)

Emergency	^y Department Torbay Hospital
Purpose	At Torbay Hospital, a full emergency service is provided for residents and visitors to Torbay and South Devon who have suffered a significant injury. We are a type 1 Emergency Department including Trauma, seeing an average of 200 attendance per day. We work in close partnership with other trusts within the Southwest and our department consists of a minor injury unit which is led by emergency nurses and paramedic practitioners, with consultant led support. Five bedded resus, rapid assessment area, 16 bedded majors' area, 5 ambulatory assessment cubicles, 8 ambulatory seated area, a mental health suite and a 7 bedded children's area which includes its own children's waiting area. An emergency is a "critical or life-threatening situation" Examples are a loss of consciousness, chest pain, severe bleeding or major trauma. More conditions and information can be found on our NHS website. The Emergency Department has a dedicated phone line which operates 24/7 which is available to NHS healthcare professionals which is run by senior clinicians in the department. We are driving towards same day emergency care (SDEC) delivering effective care at the right time at the right place for our patients.
Address	Emergency Department Level 3, Lowes Bridge Torbay Hospital TQ2 7AA
Contacts	Clinical Service Lead – Amy Jones, ED Consultant Clinical Service deputy – Marios Petsios ED Consultant Matron – Melody Andrew Operational Manager – Sarah Wilson Operational Support Manager – Kerry Mitchell
Contact numbers	Reception – 01803 654003/654008 Information Desk – 01803 654007 Secretary – 01803 654010 Nurse Coordinator - 01803 656021 Consultant line – 01803 654015
About us	We are a multi-disciplinary team of medical consultants, general practitioners, junior doctors, physician's associates, speciality associate nurses, healthcare support workers, physiotherapists, occupational therapists, management and administrative staff who all work together to provide a safe, effective and caring environment to mee the medical needs of the local population. We have an ED consultant 7 days a week covering between the hours of 8:00 and 22:30 in the department and on call provision 22:30-08:00. We have a silver nurse coordinator covering 24 hours a day 7 days a week.

Roviewod	Sarah Wilson, Operational manager
by	Kerry Mitchell, Operational support manager
	19/11/2024

Urgent Treatmo	ent Centre - Newton Abbot	
Purpose	Urgent Treatment services are for people who have a problem that needs attention the same day but is not life threatening or life changing. This can be provided by our <u>Urgent Treatment Centres</u> .	
Address	Newton Abbot Community Hospital UTC, West Golds Road, Jetty Marsh, Newton Abbot, TQ12 2SL	
Contact Number	01626 324500	
Opening Hours	8am – 8pm 7 days a week, including bank holidays	
X-ray	 9am – 5pm, 7 days a week, including bank holidays (closed Christmas Day). Please call before attending to confirm service is operating. Inclusions: fingers, thumb, hand, scaphoid, radius/ulna, elbow, humerus, shoulder, clavicle, knee, tibia, fibula, ankle, foot/toes. Exclusions: Under 2 years of age, hip, femur, pelvis, skull, facial bones, spine, chest and abdomen The UTC is not able to request any CT, MRI, or ultrasound service 	
Facilities	Accessible toilets; Blue Badge parking; Car parking (free parking for registered carers); Cycle parking; Induction loop; Motorcyc parking; Step free access; Vending machines for hot and cold drink and confectionery; Wheelchair access.	
Referrals for	 Inclusions: Wounds (including those which need closure), bites, skin tears, lacerations. Closed fractures Dislocation of phalanges and shoulders (x-ray hours only) Infected wounds Soft tissue injuries including removal foreign bodies Minor, non-penetrating eye injuries Minor ENT injuries, including mild epistaxis Minor head injuries (no LOC, no anticoagulation, no alcohol) Minor burns and scalds Mild symptoms of infection Sprains/strains Minor illnesses 	

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	 Exclusions: Head injuries under 1 or over 65 years of age, loss of consciousness / amnesia, bleeding / clotting disorder, anticoagulant. Drug or alcohol intoxication. Male UTI Routine wound care Repeat prescriptions Failure of first line antibiotics Chronic disease management 			
Referrals accepted	ED	x	GP	✓ after discussion with UTC
from:	SWAST	✓ with restrictions	Other	√ 111
Urgent	Professional Line: 01626 324599 Practitioner in charge: 07798 810506			
Requiring IP admission	No			
Same Day Emergency Care (SDEC)	N/A			
Virtual Ward	N/A			
Outpatient Services	N/A			
Specific Pathways	N/A			
Reviewed	Dr Ruth Bath, Clinical Lead Sarah James, ACP Lead 01/10/24			

Minor Injuries Uni	it – Totnes Community Hospital		
Purpose	The MIU at Totnes Community Hospital has an 'appointment-priority' service. Bookings will only be taken for the same day. To book an appointment, please call 01803 862622 and select option 1. The unit supports walk-in visitors, but appointments will be prioritised. If the service is at capacity, the walk-in may be redirected or called back at an alternative time.		
Address	Totnes Community Hospital MIU, Coronation Road, Totnes, TQ9 5GH		
Contact Number	01803 862622		
Opening Hours	8am – 5pm, 7 days a week, including bank holidays		
X-ray	Monday - 9am – 5pm Tuesday & Wednesday's 9am – 1pm <i>(excluding Bank Holidays)</i> <i>Please call before attending to confirm service is operating</i>		
Facilities	Braille translation service, car parking (free parking for registered carers), Cycle parking, Disabled parking, Disabled WC, Induction loop, Wheelchair access, Step free access, Signing service, Shopping facilities within walking distance.		
Referrals for:	 Soft tissue injuries Limb injuries (shoulder to finger, knee to toe) Low risk head injuries (note: patients on anticoagulants must be referred to the emergency department) Soft tissue infections Wounds including bites, lacerations, abrasions, bites and stings and wounds requiring sutures or glue Wound infections not requiring second line antibiotics Foreign bodies in eyes and ears Some ophthalmic issues such as conjunctivitis Minor illnesses such as tonsillitis, ear infections and female UTIs 		
Reviewed by:	Dr Ruth Bath, Clinical Lead Sarah James, ACP Lead 01/10/24		

Minor Injuries Un	it – Dawlish Community Hospital			
Purpose	The MIU at Dawlish Community Hospital has an 'appointment-priority' service. Bookings will only be taken for the same day. To book an appointment, please call 01626 895203. The unit supports walk-in visitors, but appointments will be prioritised. If the service is at capacity, the walk-in may be redirected or called back at an alternative time.			
Address	Dawlish Community Hospital MIU,			
Contact Number	Barton Terrace, Dawlish, EX7 9DH 01626 895203 Please listen to the pre-recorded message before being transferred to booking			
Opening Hours	8am - 5pm Monday - Friday Closed Christmas Day and Boxing Day			
X-ray	No x-ray provision at Dawlish			
Facilities	Accessible toilets, Blue Badge parking, induction loop, step free access			
Referrals for:	 Soft tissue injuries Limb injuries (shoulder to finger, knee to toe) Low risk head injuries (note: patients on anticoagulants must be referred to the emergency department) Soft tissue infections Wounds including bites, lacerations, abrasions, bites and stings and wounds requiring sutures or glue Wound infections not requiring second line antibiotics Foreign bodies in eyes and ears Some ophthalmic issues such as conjunctivitis Minor illnesses such as tonsillitis, ear infections and female UTIs 			
	 Head injuries under 1 or over 65 years of age, loss of consciousness/amnesia, bleeding/clotting disorder, anticoagulant Drug or alcohol intoxication Male UTI Routine wound care Repeat prescriptions Failure of first line antibiotics Chronic disease management 			
Reviewed by:	Dr Ruth Bath, Clinical Lead Sarah James, ACP Lead 01/10/24			

Acute Medicine Unit (A	MU)				
Clinical Service lead	Dr Katherine Mellor				
Operational lead	Nick Rowe				
Purpose	The initial assessment, investigation, diagnosis and management of adult patients with an urgent medical presentation				
Referrals for:	Adult patients > aged 17 For acceptance within AMU, patients must be clinically stable , and presentations may include, but are not limited to, the following: • Cardiac-sounding chest pain (not STEMI) • Pleuritic chest pain • Cellulitis likely to require admission • Symptomatic AF • Lower respiratory tract infection or pneumonia • COPD • Asthma • Acute headache without focal neurology If you are unsure about the most appropriate service for your patient, please call us for a clinical discussion and we will offer advice.				
Access (Details, operatin	Access (Details, operating hours and contact numbers)				
Deferrele eccented	ED	\checkmark	GP	\checkmark	
Referrals accepted from:	ED SWAST	✓ ✓	GP Other	Specialties within the ICO	
-	SWAST GP phon 01803 65	e – contact via AM 54140 - Friday 8am - 7pm	Other U Ward Cl	within the ICO	
from:	SWAST GP phon 01803 65 Monday	54140 <u>- Friday 8am - 7pm</u> rel 3 – 24 Beds	Other U Ward Cl	within the ICO	
from: Urgent Requiring IP	SWAST GP phon 01803 65 Monday AMU Lev	54140 - Friday 8am - 7pm /el 3 – 24 Beds 12 Beds	Other U Ward Cl	within the ICO	
from: Urgent Requiring IP admission Same Day Emergency	SWAST GP phon 01803 65 Monday AMU Lev EAU4 – 1 AMU- Le	54140 <u>- Friday 8am - 7pm</u> rel 3 – 24 Beds 1 <u>2 Beds</u> vel 2	Other U Ward Cl	within the ICO	
from: Urgent Requiring IP admission Same Day Emergency Care (SDEC)	SWAST GP phon 01803 65 Monday AMU Lev EAU4 – 2 AMU- Le MAAT	54140 <u>- Friday 8am - 7pm</u> rel 3 – 24 Beds 1 <u>2 Beds</u> vel 2	Other U Ward Cl	within the ICO	
from: Urgent Requiring IP admission Same Day Emergency Care (SDEC) Virtual Ward	SWAST GP phon 01803 65 Monday AMU Lev EAU4 – 2 AMU- Le MAAT Via MAA ^T Via MAA ^T No GP referr via AMU	54140 <u>- Friday 8am - 7pm</u> rel 3 – 24 Beds 12 Beds vel 2 T T T Tals – accepted Mo Ward Clerk 01803 AT DoS for specific	Other U Ward Cl n n - Fri 8am 654140.	erk –	

speciality. Referrals coming from GP have their own

direct line.

Surgical Receiving Unit (SRU)			
Clinical Service Lead	Mr Timothy	Platt		
Operational Lead	Emma Broc	oks		
Purpose	 The purpose of SRU is to: Assess Diagnose Start of treatment Avoid admission when possible Offer patient returning service Monitoring Imaging Complex wound care Emergency surgery on a different day. Discharge pathway Discharge pathway Dispense own TTAs Place of reference for urgent and GP referrals. Reduce waiting times for treatment Out of hours clinics: Ophthalmology / ENT room equipped 			
Referrals for:	Adults requiring surgical investigations, treatment and/or surgery. We cover these specialities • General surgery • Colorectal surgery • Upper GI surgery • ENT • Maxfac • Obstetrics and Gynaecology • Urology Trauma and orthopaedics			
Access (Details, operating	hours and c	ontact numbers)		
	ED		GP	
Referrals accepted from:	SWAST	with restrictions	Other	Clinics Minor Injuries
Urgent	Yes			
Requiring IP admission	Yes			
Same Day Emergency Care (SDEC)	Yes			
Virtual Ward	No			
Outpatient Services	Yes			
Spacific Pathways	to be accept	multiple specialition oted by senior cli deferrals coming f	nicians fr	om their own

Specific Pathways

	All bleeps via Switchboard 01803 614567
	 UGI / colorectal / general surgery / urology Bleep SHO 302 Bleep SPR 756
	 Gynae Bleep SHO 712 Bleep SPR 734
	 Maxfac Bleep #6313 ENT
	 07788 228123 Trauma and orthopaedics 07385 384562
	 GP referrals 07900 167062 On https://www.security.com/
	 Ophthalmology Through switchboard.
	Patients will need to be accepted by one of the above specialities and meet the admission criteria for SRU.
Reviewed	09/08/24 Natalia Gomez Borrego

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	Referra from:
	Urgent
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Short Stay Paediatric As	ssessmen	t Unit (SSPAU)				
Clinical Service lead	Dr Yahya Mubashar					
Operational lead	April Hop	April Hopkins				
Purpose	The unit provides a short stay service for the assessment, observation and treatment of children & young people (C&YP) in a timely manner in a child focused environment to prevent unnecessary inpatient admissions and reduce length of stay.					
Referrals for	Children with medical conditions e.g. breathing difficulties (bronchiolitis, asthma), croup, viral illness, rash, diarrhoea, vomiting, febrile convulsions, head injuries, deliberate overdose, known diabetics (not in DKA) or other medical conditions likely to need a short period of treatment and / or observation					
Access (Details, operatin	g hours ar	nd contact numbe	ers)			
Referrals accepted	ED V GP V					
from:	SWAST	No – via ED	Other			
Urgent	Monday-Friday 9am – 9pm, Consultant on-call via Switchboard Paediatric Acute Consultant Phone - 07584 272641					
Requiring IP admission	N/A					
Same Day Emergency Care (SDEC)	Yes					
Virtual Ward	N/A					
Outpatient Services	N/A					
Specific Pathways	See refer	ral information al	bove			
Reviewed	09/08/24					

Clinical Service lead	Elaine Preston				
Operational Lead	ТВС				
Purpose	To facilitate early discharge and to prevent hospit admission for patients				
	Outpatient Parenteral Antibiotic Therapy (OPAT				
Referrals for	 Patients requiring once daily I.V antibiotics 24-hour Tazocin / Flucloxacillin infusion via a elastomeric pump. Treatment for: Cellulitis, ESBL's, UT Endocarditis, Discitis, Osteomyelitis, Sep Arthritis, Bursitis, Joint infections, Meningit various wound infections. All referrals to be discussed with and accepter by the Microbiology team Treatment and duration plan implemented f all patients Patient referred to MAAT and appointmermade for treatment. MAAT to home visit if patient is considered be house bound Weekly MDT and blood monitoring for a patients during treatment Post discharge a summary of care will be set to G.P Direct GP Referrals for patients requiring I antibiotics G.P to contact on call microbiologist to discurpatient via switchboard Microbiologist to inform MAAT of referral at will prescribe the daily antibiotic on a druchart MAAT will contact patient and arrange appointment for treatment Post discharge, MAAT will email summary of care direct to G.P Nurse-led DVT Service Referrals accepted via email: mat.sdhct@nhs.net or phone: 01803 655776 For outpatient use only-no inpatient referrals Referrers to provide information on DVT referral form including past medical history, reason for referral, list of currer medications All referrals are triaged and booked into the next available U/S appointment. 				

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Positive Ileo-femoral DVT's or any suspected
P. E's to be referred to on-call medical team
on AMU for review as per protocol
 Communicate with GP's regarding the plan of
treatment
 Outside of MAAT working hours, please leave
messages on answerphone or on email as
above.
Ambulatory Pulmonary Embolism Pathway
All patients discharged under this pathway
must be seen and accepted by the on-call
medical team
• All patients must be clinically stable prior to
discharge
All patients require a chest x-ray, a CTPA form
to be completed via ICE and a 3/7 supply of
anticoagulation therapy prior to discharge
Message left for MAAT via phone or email
informing them of referral
 Patient's medical notes to be left in MAAT box on AMU or E.D
 MAAT to contact patient to arrange CTPA
MAAT to review CTPA result and continue
treatment as appropriate
MAAT to inform GP and referring medical
consultant of CTPA findings and treatment
plan
Management of anticoagulation therapy for
patients pre & post planned procedure
Patient are referred to MAAT with a completed
pre-operative form detailing the date of
procedure
 MAAT to contact patient to advise on date to discontinue Warfarin therapy and arrange
appointments for INR monitoring and
injections of Inhixa pre procedure
 MAAT to home visit patient if house-bound
 MAAT to reload patient back onto
anticoagulation therapy if required
MAAT to email GP's a summary of care on
discharge once patient is back within target
range
Management of anticoagulation therapy for
patients new to Warfarin and patients that are
sub-therapeutic
Refer patient to MAAT via phone detailing
reason for referral including all relevant
medical history
 MAAT will arrange to see patient either in clinic or at home for their treatment
clinic or at home for their treatment

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	 MAAT to discharge patient back to G.P when INR IS within target range and to email a summary of care Patients requiring a same day infusion 					
	 Referrals to MAAT via email or phone for patients requiring short term infusions - I.V Methylprednisolone, Sotrovimab, Iron. MAAT will contact patient and arrange appointment for treatment MAAT to email G.P a summary of care on discharge 					
Access (Details, operating h						
	ED	\checkmark	GP	\checkmark		
Referrals accepted from:	SWAST	No	Other	✓ IP wards		
Urgent	Service Hours 9am – 5pm Monday to Sunday 01803 655776 mat.sdhct@nhs.net					
Requiring IP admission	For read	lmission if any clir	nical conce	erns		
Same Day Emergency Care (SDEC)	Yes					
Virtual Ward	Supports Cardiology Heart failure Virtual Wards OPAT service					
Outpatient Services	Yes					
Specific Pathways	 Ref:1264 - OPAT Ref:1230 - pre-operative management of anticoagulation and anti-platelet therapy Ref:1765 - U/S Doppler of the leg to exclude a suspected DVT Ref:0018 - Diagnosis and management of suspected PE 					
Reviewed	16/08/24					

Torbay and South Devon NHS Foundation Trust

Paediatric Inpatients							
Clinical Service lead	Dr Yahya Mubashar						
Operational lead	April Hopkins						
Purpose	Provide A	Acute Medical Wa	rd for Child	ren 0-17			
Referrals for	Acutely u	nwell Children					
Access (Details, operating hours and contact numbers)							
Referrals accepted	ED	\sim	GP	\checkmark			
from:	SWAST	No – via ED	Other	Health Visitor / Midwife			
Urgent	For referrals or acute advice: Paediatric acute phone held by consultant / senior decision maker 07584 272641 - 24 hours a day						
Requiring IP admission	See Above						
Safeguarding / Neonatal Care	Consultant advice about safeguarding / neonatal care 07775 403508 – 8.30am – 4.30pm						
Child and Family Health Devon including CAMHS	Single Point of Access Team 0330 0245 321 <u>CFHD.DevonSPA@nhs.net</u>						
Virtual Ward	N/A						
Specific Pathways		c HDU space c Young Persons	Unit				
Reviewed	29/09/24	 updated by Dr I 	Rowan Ker	r-Liddell			

Breast Care						
Clinical Service lead	Donna Egbeare					
Operational lead	Sandie H	leyworth				
Purpose	Breast Ca	are				
Referrals for	Breast sy	/mptoms				
Access (Details, operating	hours and	contact numbers)			
Deferrels accented from	ED V GP V					
Referrals accepted from:	SWAST	No – via ED	Other			
Urgent	 All bleeps via Switchboard 01803 614567 302 Bleep on-call General Surgical SHO via switchboard 756 Bleep on-call General Surgical REG via switchboard 					
Requiring IP Admission	As above					
Same Day Emergency Care (SDEC)	Breast Care Nurse of the Day 07825 735161					
Virtual Ward	N/A					
Outpatient Services	Torbay Hospital Breast Care Unit					
Specific Pathways	Suspected Breast Cancer Family History Breast Pain					
Reviewed	17/06/202	24				

Cardiology						
Clinical Service lead	Dr Usman Sheikh					
Operational lead	Charlotte Webber					
Purpose	Adult Cardiology					
Referrals for	Adult Cardiology					
Access (Details, operating hours and contact numbers)						
Referrals accepted from:	ED	\checkmark	GP	\checkmark		
	SWAST	No – via ED	Other			
Urgent	COW phor	ne: 07917 6256	32 (24/7)			
Requiring IP admission	COW phone: 07917 625632					
Same Day Emergency Care (SDEC)	COW phone: 07917 625632					
Virtual Ward	Yes, Heart Failure Virtual Ward 07827 234879 Monday - Friday 8am -6pm					
Outpatient Services	Yes					
Specific Pathways	Heart Failure: 07824 582468 Monday - Friday 9am - 5pm Arrhythmia: 07775 017559 Monday - Friday 9am - 5pm Chest Pain: 07766 690985 Monday - Friday 8am – 8pm Cardiac Rehab: 01803 527062 Monday - Friday 9am – 5pm					
Reviewed	17/05/2024	1				

Dermatology					
Clinical Service lead	Hannah Cookson				
Operational lead	Elizabeth Blackshaw				
Purpose	Dermatol				
Referrals for		ogy symptoms			
Access (Details, operating I)		
Referrals accepted from:	ED	\checkmark	GP	\checkmark	
Referrais accepted from.	SWAST	No – via ED	Other		
Urgent	For ED/AMU/Inpatients – White slip referral – same day/within 24hrs For inpatient A&G use <u>sdhct.dermatology@nhs.net</u> For GP Urgent review use <u>sdhct.dermatology@nhs.net</u> For GP Urgent advice use A&G portal. No out of hours on call service . White slip referrals, emails and A&G are reviewed daily Monday to Friday.				
Requiring IP admission	ED / AMU review.				
Same Day Emergency Care (SDEC)	No				
Virtual Ward	No				
Outpatient Services	Yes				
Specific pathways	NA				
Reviewed	20/11/202	24			

Clinical Service lead	Dr Chris Redford					
Operational lead	Vacant P	ost / Catherine	Trust			
Purpose	Diabetes	and Endocrino	logy			
Referrals for	Adult Dia	betes and End	ocrinology			
Access (Details, operati	ng hours a	nd contact num	bers)			
Referrals accepted	ED Yes GP Yes					
from:	SWAST	No	Other	Secondary to secondary referrals		
Urgent	Urgent advice available Monday to Friday 9am to 5pm via endocrinology, consultant mobile accessed via switchboard or 07900 303338					
Requiring IP admission	Via medical secretaries 01803 654923					
Same Day Emergency Care (SDEC)	Via medical secretaries 01803 654923					
Virtual Ward	No					
Outpatient Services	Yes					
Specific Pathways	 Lipid service Weight management service Joint Thyroid service Thyrotoxic Hypertension service 					
Reviewed	18/06/2024					

Clinical Service Lead	Mr James Powles				
Operational Lead	Harriet R				
Purpose	services.			0	
Referrals for	Head & N	al adult & paedia leck cancer diag	nosis & trea		
Access (Details, operating	hours and	contact numbers	s)		
Referrals accepted	ED	\checkmark	GP	\checkmark	
from:	SWAST	No – via ED	Other	C2C	
Urgent	07788 228123 On call team (phone via switch)				
Requiring IP admission	07788 228123 Decisions to admit patients will be made through the on-call team.				
Same Day Emergency Care (SDEC)	Ambulatory emergency patients can be seen by being booked through the emergency ENT clinic on Level 2 (via the on-call team)				
Virtual Ward	No				
Outpatient Services	Outpatient referrals via Choose & Book. Outpatien clinics run at Torbay Hospital, Newton Abbot Hospita Teignmouth Hospital & Totnes Hospital – b appointment only				
Specific Pathways					
Specific Fallways	08 July 2024				

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Purpose
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Gastroenterology					
Clinical Service Lead	Dr Richard J	ohnston			
Operational Lead	Emma Brool	Emma Brooks / Joshua Ford			
Purpose					
Referrals for		Gastroenterology			
Access (Details, operating h	ours and con	tact number	s)		
	ED		GP	\checkmark	
Referrals accepted from:	SWAST	No – via ED	Other		
Urgent	SWASI				
Requiring IP admission	GP – Refer into AMU Outpatient – Nursing Staff on Hutchings Ward contact bed manager. ED – Consultant review by GOD.				
Same Day Emergency Care (SDEC)	Not Applicable				
Virtual Ward	Not Applicab				
Outpatient Services	Not Applicable There is a pathway for urgent, potential admissions to be seen in a hot clinic to avoid admission. The decision to book into these slots will be made by the gastro clinical team. There are hot clinics which take place on a Wednesday and Thursday (GASTRO/HT), however there is also capacity for urgent gastro /				

Spacific Dathwaya
Specific Pathways
Reviewed

endoscopy clinics to be seen every day of the week if required. There is a A&G telephone service that patients can access through the IBD specialist nurses. Telephone: 01803 655111 or Email: <u>ibdtorbay.sdhct@nhs.net</u>
Gastroenterologist of the Day (G.O.D.) - Phone operational 2pm – 4pm, Monday - Friday on normal working days #6003 via Switchboard IBD Nurse Contact: 01803 655132 Upper GI CNS Contact: 07785 556652 Endoscopy Co-ordinator Enquiry: 01803 654863 Allerton Ward: 01803 655918 / 01803 655503 Hutchings Ward / GI outpatients: 01803 655918 / 01803 656868 Hutchings Ward Co-ordinator: 07387 120360
08/01/25 – Dr Richard Johnston

General Surgery				
Clinical Service Lead	Adam Kir	mble		
Operational Lead	Emma Brooks			
Purpose	Upper GI and Lower GI			
Referrals for	Upper GI and Lower GI			
Access (Details, operating I)	
Referrals accepted from:	ED	\checkmark	GP	\checkmark
	SWAST	No – via ED	Other	
Urgent	Bleep Re	g 67-756	a Switch 614567	iboard
Requiring IP admission	Bleep Re	IO 67-302 g 67-756 IO 67-302		
Same Day Emergency Care (SDEC)	Bleep Reg 67-756 Bleep SHO 67-302			
Virtual Ward	Not applicable			
Outpatient Services	Bleep Reg 67-756 Bleep SHO 67-302			
Specific Pathways	Bleep Reg 67-756 Bleep SHO 67-302			
Reviewed	09/04/24			

Clinical Service Lead		lackson			
	, , , , , , , , , , , , , , , , , , ,	Dr Barry Jackson			
Operational Lead	Amy McE				
Purpose	Haemato	logy			
Referrals for	Adult malignant, non-malignant, liaison ar laboratory haematology Paediatric non-malignar liaison and laboratory haematology (via paediatr team)				
Access (Details, operating I	hours and	contact numbers)		
	ED	\checkmark	GP	\checkmark	
Referrals accepted from:	SWAST	No – via ED	Other		
Urgent		logist of the Wee ard or 07879487	· · · · ·		
Requiring IP admission	admissio Via AMU	for emergency a er Ward if bed av e AMU ard	dmission		
Same Day Emergency Care (SDEC)	No				
Virtual Ward	No				
Outpatient Services	Torbay H	ospital and Newt	on Abbot	Hospital	
Specific Pathways	No				

				NHS Four
Healthcare of Older Perso	n			
Clinical Service lead	Jonny Hacon / Julia Bell			
Operational lead		/ade / James Hot		
Purpose	Inpatient services for patients over the age of 65 presenting with complex comorbidities requiring specialist geriatrician input. Plus Orthogeriatric, Parkinson's Disease and Movement Disorder and Virtual ward			
Referrals for		apid Access Clini		
Access (Details, operating	hours and	contact numbers	;)	
	ED	\sim	GP	\checkmark
Referrals accepted from:	SWAST	No – via ED	Other	AMU or White slip referrals from other clinicians
Urgent	Rapid Ac	cess Clinic – We	dnesday	y 1pm - 4pm
Requiring IP admission	 Two 28 bedded wards, Cheetham Hill and Simpson. Orthogeriatrics on Ainslie ward. We also manage 16 beds at Totnes Community Hospital. 			
Same Day Emergency Care (SDEC)	No			
Virtual Ward	See Frail	ty Virtual Ward		
Outpatient Services	 Rapid Access Clinic via Choose and Book and white slip referrals. Parkinson's Disease and Movement Disorder – via Choose and Book and white slip referrals. Tilt Table testing via Choose and book and white slip referrals. 			
Specific Pathways	 Orthogeriatric – Inpatient care for older patients presenting with a fractured hip. These patients are predominantly seen on Ainslie ward. Service runs Monday to Friday. Tilt table testing. GP and white slip referral. 			
Reviewed	12/12/24			

Maternity
Clinical Service lead
Operational Lead
Purpose
Referrals for
Access (Details, operating
Referrals accepted from:
Urgent
Requiring IP admission
Virtual Ward
Specific Pathways
Reviewed
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Maternity				
Clinical Service lead	Katie Cresswell			
Operational Lead	Debbie Honeywill			
Purpose	Maternity	^v Care		
Referrals for	Labour / Birth / Maternity Complications either antenatal or postnatal			
Access (Details, operating	hours and	contact numbers	s)	
Referrals accepted	ED	\checkmark	GP	\checkmark
from:	SWAST	\sim	Other	Health Visitor / Midwife
Urgent	All bleeps via Switchboard 01803 614567 Bleep on-call Registrar - 734			
Requiring IP admission	Bleep on-call Registrar - 734 Also discuss with Labour Ward Coordinator – 01803 654604 or Bleep - 328			
Virtual Ward	Not applicable			
Specific Pathways	Labour / Birth / Maternity Complications either antenatal or postnatal			
Reviewed	30/09/24 Mair Davies			

Torbay and South Devon NHS Foundation Trust

	Neurol
	Clinica Operati
	Purpos
	Referra
	Access
	Referra from:
	Urgent
	Requiri
	Same D Care (S
	Virtual
2	Outpati
	Specifi

Neurology					
Clinical Service lead	Dr Williar	Dr William Knight			
Operational lead	Gaynor S				
Purpose	Neurolog	у			
Referrals for	Adult Neurology • Epilepsy • MS • Headache • Neuro-inflammatory • Cognitive • Dementia				
Access (Details, operating	ED		GP		
Referrals accepted from:	SWAST	Advice only No – via ED	Other	•	
Urgent)7750 available – Friday 9am – 4.	30pm		
Requiring IP admission	07341 09	97750			
Same Day Emergency Care (SDEC)	No				
Virtual Ward	No				
Outpatient Services	Outpatient referrals via Choose & Book. C2C referrals via email: <u>sdhct.neurology@nhs.net</u> Outpatient clinics run at Torbay Hospital, Newton Abbot Hospital and Teignmouth Hospital – by appointment only. Appointments held Face to Face, Telephone & Video.				
	Nu • To Sp	urse Specialist: rbay Community pecialists: 0180	01803 6 Parkinso 3 32066	on's Disease Nurse 9	
Specific Pathways	Di • To 01 • To 01	sease Nurse Spe rbay Hospital E 803 320669 rbay Hospital MS 803 656195	cialist: Epilepsy	Nurse Specialist:	
Reviewed	18/06/202	24			

				NH5 Found	
Obstetrics & Gynaecology	У				
Clinical Service lead	Morven Leggott				
Operational lead	Debbie Honeywell				
Purpose	Obstetric	Obstetrics & Gynaecology			
Referrals for	Obstetric	s & Gynaecology			
Access (Details, operating	ng hours and contact numbers)				
Referrals accepted	ED	\checkmark	GP	\checkmark	
from:	SWAST	No – via ED	Other		
Urgent		All bleeps via 01803	a Switchk 614567	ooard	
	Bleep Re Bleep SH	•			
Requiring IP admission	Bleep Reg -734 Bleep SHO -712				
Same Day Emergency Care (SDEC)	Bleep Reg -734 Bleep SHO -712				
Virtual Ward	N/A				
Outpatient Services	Bleep Reg -734 Bleep SHO-712				
Specific Pathways	Bleep Reg -734 Bleep SHO -712				
Reviewed	10/04/24				

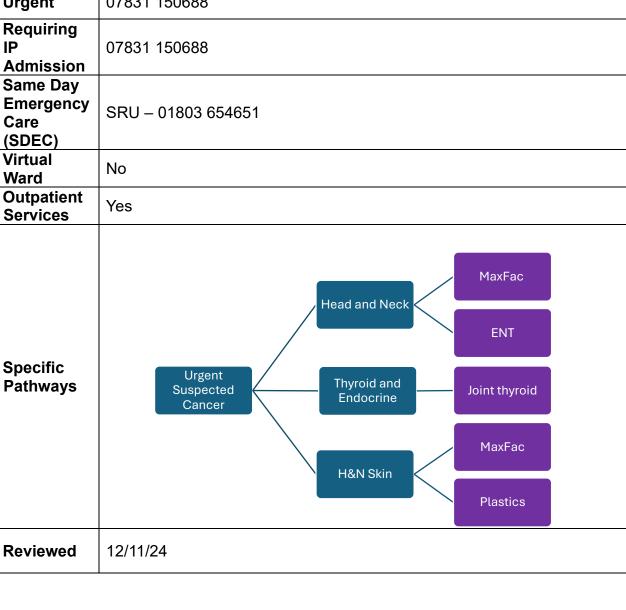
Oncology (Non-Surgical C	ancer)			
Clinical Service lead	Nicole Dorey			
Operational lead	Amy Coats			
Purpose	Non-Surg	jical Cancer Serv	vices	
Referrals for	Non-Surg	jical Cancer Serv	vices	
Access (Details, operating I	nours and	contact numbers)	
Referrals accepted from:	ED	\checkmark	GP	No
•	SWAST	No – via ED	Other	No
Urgent	Acute Oncology Service (AOS) team 07435 980310 8am - 6pm Monday to Friday Acute Oncology Registrar 9am -5pm Monday to Friday 07767 300979 On-call consultant oncologist contacted via the switchboard Monday - Friday 5pm – 11pm Weekends/Bank Holidays 9am – 11pm			
Requiring IP admission	Acute Oncology Service (AOS) team 07435 980310 8am – 6pm Monday to Friday (No dedicated Beds, admission via AMU/ED)			
Same Day Emergency Care (SDEC)	No			
Virtual Ward	No			
Outpatient Services	Acute Oncology Service (AOS) team 07435 980310 8am – 6pm Monday to Friday			
Specific Pathways				
Reviewed	23/12/24			

 \checkmark

GP

Other

	xillofacial Surgery		
Clinical	Mr Rupert Scott		
Operational	Harriet Rae		
Purpose	To treat a range o	of Maxillofacial condit	ions
Referrals for	Skin cancer surg	sorders oral surgery definition surgery ery	
Access (Deta	ails, operating hou	rs and contact numbe	ers)
Referrals accepted	ED	\checkmark	
from:	SWAST	No – via ED	
Urgent	07831 150688		
Requiring IP Admission	07831 150688		
Same Day Emergency Care (SDEC)	SRU – 01803 654	4651	
Virtual Ward	No		
Outpatient Services	Yes		
Specific Pathways	Urgent Suspecte Cancer	d Head and Thyroid Endoc	land



Outhederation				in stour
Orthodontics	lus auri d. O a			
Clinical Service lead	Ingrid Co			
Operational lead	Tracy Bro	own		
Purpose	Orthodon	itics		
Referrals for	Orthodon	tics Department		
Access (Details, operating I	nours and	contact numbers)	
Referrals accepted from:	ED	No	GP	\checkmark
	SWAST	No	Other	GDP
Urgent	07831 15 01803 65	0688 6241/ 56237		
Requiring IP admission	Yes - 07831 150688 01803 656241/ 56237			
Same Day Emergency Care (SDEC)	No			
Virtual Ward	Not applicable			
Outpatient Services	Yes			
Specific Pathways	Referrals accepted from GPs, GDPs, other hospital specialities, triaged at Torbay by Consultant Orthodontist, new patients seen in consultant clinics within a few months from referral			
Reviewed	15/05/24			

Ophthalmology				
Clinical Service lead	Miss Tahrina Salam			
Operational lead	Sandie Heyworth / Charlie Harding / Nicki Spalding			
Purpose	High volutions services	High volume outpatient, day case Ophthalmology		
Referrals for	 General Ophthalmology Macula / Medical Retina Minor Ops Plastics / Lids Surgical Retina Glaucoma Uveitis Corneal Orthoptics Cataract Paediatrics Strabismus Intravitreal injections Laser treatments 			
Access (Details, operating I				
	ED	\sim	GP	
Referrals accepted from:	SWAST	No – via ED	Other	Opticians, C2C
Urgent	Telephone call to Urgent referral nurses Telephone 01803 654926 (for GP's and Opticians only)			
Requiring IP admission	Admitted via ED and allocated Surgical bed. Ophthalmology have no dedicated inpatient beds			
Same Day Emergency Care (SDEC)	N/A			
Virtual Ward	Not appli	cable		
Outpatient Services	 Outpatient referrals via e-Referral service. C2C referrals via email: <u>sdhct.ophthalmology@nhs.net</u> Outpatient clinics at Torbay Hospital and Newton Abbot Hospital for Ophthalmology Outpatient clinics at Torbay Hospital, Newton Abbot Hospital Paignton Hospital, Brixham Hospital, Totnes Hospital, Teignmouth Hospital, Dawlish Hospital and special schools for Orthoptics 			
Specific Pathways	•	hrough pathway or Ops via e-Ref		
Reviewed	06/06/202			

Paediatric Outpatients					
Clinical Service lead	Dr Yahya Mubashar				
Operational lead	April Hopkins				
Purpose	Outpatient Paediatric Service				
Referrals for	Patients under 18 years old				
Access (Details, operating hours and contact numbers)					
Referrals accepted	ED	No – via ED	GP	\checkmark	
from:	SWAST	No – via ED	Other	Various	
Urgent	Rapid Access Clinics available weekly for referrals marked urgent.				
Requiring IP admission	N/A				
Same Day Emergency Care (SDEC)	No				
Virtual Ward	Not appli	cable			
Outpatient Services	Outpatient clinics run at: Torbay Hospital Newton Abbot Hospital Brixham Hospital Paignton Hospital Dartmouth Hospital Teignmouth Hospital Totnes Hospital By appointment only GP Outpatient referrals received through Devon Referral Support Service (DRSS).				
Specific Pathways	Acute PaediatricsCardiologyHaematologyChronic FatigueGastroenterologyDiabetesEndocrineEpilepsyRheumatologyPain ClinicNeurologyUrologyUrologyRespiratoryAllergyNeonatologyCommunity Paediatrics (Neurodiversity Inc ADHD)Child ProtectionLooked after Children (Children in Care)				

	Linked pathways with Bristol Children's Hospital Paediatric Surgery Rheumatology Endocrine Neurology Epilepsy Urology Haematology Gastroenterology Respiratory Cardiology <u>MDT Pathways with Specialist Nursing Support</u> as part of the main referral pathway Allergies Cardiac care Eating disorders Endocrinology Epilepsy Neonatal care Respiratory Rheumatology Sleep Studies
Reviewed	03/12/24 – Simon Dunn

Respira Clinical Operation
Purpose
Referra
Access
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Specific

Respiratory				
Clinical Service lead	Dr Simon Rolin			
Operational lead	Julie Clark			
Purpose	•	ime outpatient, in ory services.	patient a	and diagnostic
Referrals for	 Asthma Bronchiectasis Chronic Obstructive Pulmonary Disease (COPD) Dysfunctional breathing Interstitial Lung Disease (ILD) Lung Cancer Obstructive Sleep Apnoea (OSA) Pleural Effusions Pneumonia Pulmonary nodules Tuberculosis 			
Access (Details, operating h	nours and	contact numbers)	
Referrals accepted from:	ED	\checkmark	GP	\checkmark
	SWAST	No – via ED	Other	C2C
Urgent	Urgent advice available Monday to Friday 9am to 5pm via Respiratory on-consultant mobile accessed via switchboard or 07900 262423			
Requiring IP admission	The Respiratory services comprise of 26 inpatient beds located on Midgley Ward, Torbay Hospital.			
Same Day Emergency Care (SDEC)	No			
Virtual Ward	The Respiratory Virtual Ward is accessible Monday to Sunday 8am – 6pm via the Virtual Ward Nurses – 07544 15659 / 01803 655199 tsdft.adminvirtualward@nhs.net			
Outpatient Services	Outpatient referrals via Choose & Book. C2C referrals via email: <u>sdhct.respiratorymedicine@nhs.net</u> Outpatient clinics run at Torbay Hospital, Newton Abbot Hospital and Dawlish Hospital – by appointment only			
Specific pathways	OP pleural effusion pathway accessed via referral to Respiratory Team – pleural contact 074719 65929 or email sdhct.respiratorymedicine@nhs.net			
Reviewed	14/05/24			

Torbay and South Devon NHS Foundation Trust

Operational lead C		erine Gwynne		
	· - +			
Purpose	Catherine Trust			
	Rheumatology service			
Referrals for	 Adult Rheumatology Inflammatory Arthritis Inflammatory spondylarthritis Autoimmune Connective Tissue Disease DXA scanning Complex osteoporosis (including parenteral treatment tracker) Giant Cell arteritis Complex Polymyalgia Rheumatic 			
Access (Details, operating ho	ED		GP	
Referrals accepted from: S	WAST	via White Slip No – via ED	Other	No
liraont	-	CA Phone: 07775 – Friday 9am-5pm		
Requiring IP Admission	Advice and guidance via the GCA Phone 07775407925 or white slip referral Osteoporosis internal advice and guidance via 01803 655603 or osteoporosis.tsdft@nhs.net			
Same Day Emergency Care (SDEC)	Νο			
Virtual Ward No	Νο			
Cutpatient Services	 Rheumatology outpatient referrals via eRS (Primary Care) or white slip/letter for internal Complex osteoporosis referrals via eRS (Primary Care) or white slip/letter for internal DXA scan via referral form/ via eRS Outpatient clinics in Torbay, Paignton, Totnes, Newton Abbot and Dawlish by appointment only. DXA scanner in Paignton (No hoist available) 			
Specific pathways	Giant Cell Arteritis (GCA) via the GCA Phone: 07775407925 (or e mail <u>rheumatology.sdhct@nhs.net</u> out of hours) in addition to ophthalmology referral if needed Early Inflammatory Arthritis (EIA) Pathway- Target to be seen by date = within 3 weeks Patient Initiated Access via Nurse Led Helpline: 01803 654939 or <u>rheumatology.sdhct@nhs.net</u> DXA scanning			
Reviewed C	atherin	e Gwynne 20/11/2	.4	

	Stroke
	Clinical Service lead
	Operational lead
	Purpose
	Referrals for
	Access (Details, operatin
	Referrals accepted
	from:
	Urgent
	Requiring IP admission
2	Same Day Emergency Care (SDEC)
	Virtual Ward
	Outpatient Services
	Specific pathways
	Reviewed

Stroke				
Clinical Service lead	John Fra	nce		
Operational lead	Lesley W	/ade / James Hob	bs	
Purpose	 For patients who have a query or confirmed stroke attending via ED or other emergency care pathway. George Earle is a 28 bedded hyper-acute/acute stroke ward at Torbay Hospital. Templer ward 20 bedded stroke and neuro rehab ward. Early Supported Discharge / Community Neuro rehab service. 			
Referrals for	• TI	yper-Acute Stroke		ion
Access (Details, operating	g hours an	d contact number	s)	
Referrals accepted	ED	\checkmark	GP	\checkmark
from:	SWAST	 ✓ 	Other	Inpatient white slip referrals
Urgent	See TIA service below. Admission to George Earle ward is predominantly via ED. Stroke Coordinator - 07747206464			
Requiring IP admission	George Earle ward will also take admissions for patients admitted with neurological conditions.			
Same Day Emergency Care (SDEC)	TIA Clinic – Monday to Friday 2pm – 5pm. Five slots per day. Torbay Hospital main Outpatients. Patients referred before 11am will be seen the same day or following day. Referral method to TIA clinic: Referral form to be emailed to sdhct.stroke@nhs.net			
Virtual Ward	No			
Outpatient Services	TIA clinic as above. Stroke follow up clinic Tuesday AM 9am – 1pm. For inpatients following discharge from George Earle or Templar wards, new referrals and for people who have suffered a stroke whilst out of area.			
Specific pathways				
Reviewed	19/06/202	24		

Trauma & Orthopaedics					
Clinical Service lead	Joanna Maggs				
Operational lead	Sandie H	Sandie Heyworth / Joanne Washbrook			
Purpose	Trauma &	& Orthopaedics			
Referrals for	Orthopaedic Trauma Soft Tissue Knee trauma				
Access (Details, operating hours and contact numbers)					
Deferrels accented from	ED	\sim	GP	\sim	
Referrals accepted from:	SWAST	\checkmark	Other		
Urgont		All bleeps via 01803	a Switchboa 614567	rd	
Urgent	Bleep on-call SHO - 843 Bone phone - 07385 384562 #6428 – Registrar				
Requiring IP admission	Contact Trauma Coordinator - 07920 870226 to alert re # NOF				
Same Day Emergency Care (SDEC)	No				
Virtual Ward	No				
Outpatient Services	Fracture Clinic Torbay Hospital: Appointments - 01803 656300 Advice – 01803 655136 OOH – 01803 654003 Elective Clinics at Torbay Hospital & Newton Abbot Hospital				
Specific Pathways	#NOF pathway – SWAST / ED to contact Trauma Coordinator 07920 870226			et Trauma	
Reviewed	17/06/20	24			

Urology Clinical Service lead		Zang / Pavel Wo	zniak	
Operational lead	Emma B	rooks		
Purpose	Urology			
Referrals for	Urology			
Access (Details, operating h	nours and	contact numbers)	
Referrals accepted from:	ED	\checkmark	GP	
	SWAST	No – via ED	Other	
Urgent		All bleeps via 01803	a Switchb 614567	oard
	Bleep reo	g on -360		
Requiring IP admission	Bleep reg on -360			
Same Day Emergency Care (SDEC)	Bleep reg on -360			
/irtual Ward	N/A			
Outpatient Services	Bleep reç	g on -360		
Specific Pathways	Bleep reg on -360			
Reviewed	09/04/20	24		

				NHS Fou	
Vascular					
Clinical Service lead	Rob McC	Rob McCarthy			
Operational lead	Emma B	rooks			
Purpose	Vascular				
Referrals for	Vascular				
Access (Details, operating	hours and	contact numbers)		
Referrals accepted	ED	\sim	GP		
from:	SWAST	No – via ED	Other		
Urgent	To RDUH via Switchboard 01392 411611				
Requiring IP admission	To RDUH				
Same Day Emergency Care (SDEC)	To RDUH				
Virtual Ward	N/A				
Outpatient Services	N/A				
Specific Pathways	RDUH				
Reviewed	09/04/2024				

				NHS Four
Virtual Wards				
Clinical Service lead	Dr Mark Roberts - SRO Dr Louise Anning – Respiratory Virtual Ward Dr Katherine Bhatt – Frailty Virtual Ward Dr Lisa Yung – Cardiology Virtual Ward			
Operational lead	Michelle Baker			
Purpose	Virtual wards support people who would otherwise be in hospital to receive the acute care, monitoring and treatment they need in their own home. This includes either preventing avoidable admissions into hospital or supporting early discharge out of hospital.			
Referrals for	Arrhythmia Frailty Heart Failure OPAT (MAAT) Respiratory			
Access (Details, operating h		contact num		
Referrals accepted from:	ED		GP	
	SWAST	No – via ED / AMU	Other	UCR / Community Teams / Care Co
Outpatient Services	As per sp	ecialty instr	uction	
Specific Pathways	Arrhythmia / Heart Failure 07824 582468 tsdft.hfvirtualward@nhs.net Monday - Friday 8am - 6pm Frailty Virtual Ward 07909 576121 tsdft.frailtyvirtualward@nhs.net Monday - Friday 8am - 6pm OPAT (MAAT) 01803 655776 mat.sdhct@nhs.net Monday - Sunday 9am – 5pm Respiratory 07554415659 & 01803 655199 tsdft.respiratoryvirtualward@nhs.net Monday - Sunday 8am – 6pm Virtual Ward Admin Team 01803 654246 / 654259 tsdft.adminvirtualward@nhs.net Monday to Friday 8am – 5pm			
Reviewed	14/11/202	24		

Torbay Social Care	9
Contact Number:	01803 219700 Monday to Friday 9am – 5pm
Torbay Emergency	y Duty Service out of hours
Contact Number:	0300 456 4876 Monday – Thursday 4.30pm – 9am Friday – Monday 4pm – 9am including Bank Holidays
Devon Social Care	– Care Direct
Contact Number:	0345 155 1007
	Monday – Friday 8am – 8pm Saturday 9am – 1pm
Emergency Duty S	Service out of hours
Contact Number:	0345 600 0388

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Devon Social Care – Care Direct				
Contact Number:	0345 155 1007 Monday – Friday 8am – 8pm Saturday 9am – 1pm			
Emergency Duty Set	ervice out of hours			
Contact Number:	0345 600 0388			

Home Care Providers

Abide Care – 01803 852220

Agincare - (Myrna) - 07966 219256

Angel Home Care - 01626 830343

Bay Care - 01803 710002

Bluebird Torbay - 01803 215999 / 07539723191

Bluebird Devon - 01626 335321 / 07884303031

Caretakers Southwest - 01803 294991

Carmel Care – 01803 227979

Devon Home Care - 018503 320023 / 07845 429187

Guardian Home Care – 01803 853198

Guiness Care Devon - 01884 242525

Helps – 0333 733 1213

Help @ Hands – 07415 119559

Homecare 2000 – 01803 311117

Home Instead – 01803 611630

Love2Care - 01803 364000

Plam Tree Care - 07900 571239

Phoenix Care - 01803 214426

Unicare Devon - 01626 355619 / 07411 422799

Your Choice Devon – 01626 830391 / 07375 594338 (OOH)

Community Hospitals

Brixham - 01803 881381

Totnes - 01803 860846

Teign (Newton Abbot) – 01626 324609

Templar (Newton Abbot) – 01626 324551

Dawlish - 01626 895261

EAU4 - 01803 654139

SRU - 01803 654680

AMU – 01803 654140 Dunlop – 01803 655538 New Forrest – 01803 654266 Midgley – 01803 655519 Cheetham Hill – 01803 655575 Simpson – 01803 655545 George Earle – 01803 655569 McCallum – 01803 655915 Turner – 01803 655503 Cromie – 01803 655503 Cromie – 01803 655505 Warrington – 01803 655507 Ainslie – 01803 655540

Ward Telephone Numbers

Ella Rowcroft – 01803 655510

Intensive Care – 01803655555

CCU/CPU - 01803 655566/654693

John Macpherson - 01803 654604

Delivery Suite - 01803 654631

SCBU - 01803 654602

Louisa Cary – 01803 655526

Paediatric Short stay Unit - 01803 655492

	NHS Four
Urgent Community Re	sponse Pathway
	<u>Coastal</u>
	Alex Pleace - Intermediate Care Lead
	Sarah Bailey – Community Nursing Lead Liam Dawson – Operational Support Manager Rob Spry-Brown – Community Services Manager
	Newton Abbot
	Jess Sheardown - Intermediate Care Lead
	Stacey Tranter – Community Nursing Lead Jo-Ann Jeffrey - Operational Support Manager Natalie Keens – Community Services Manager
Key Service Contacts	Moor to Sea
	Laura Boak – Intermediate Care Lead
	Tom McEwan – Community Nursing Lead Dawn Brumfield – Operational Support Manager Emily West – Community Services Manager
	<u>Torbay</u>
	Sarah Bradley – Associate Director of Operations
	Rebecca Smith – Deputy Clinical Service Manager
	TBC – UCR Lead Paignton & Brixham Jo Taylor – UCR Lead Torquay Natasha Monk – Community Nursing Lead Gina Dockree – Community Services Manager
Purpose	 Urgent Community Response (UCR) is a pathway which provides urgent care to people in their own homes or usual place of residence including care homes, to support admission avoidance. UCR is currently provided through a combination of services across Torbay & South Devon including: Torbay UCR teams (Torquay, Paignton & Brixham) South Devon Intermediate Care Teams (Coastal, Newton Abbot, Moor to Sea)
	Community Nursing (Torbay & South Devon)

	'Referral ir	a' reasons for urg	ent care response	es could be:	
	Acute Infe	ection	Falls (with no apparent injury)		
	Acute catheter care Expelled Suprapubic catheter		Sudden deterioration in function		
eferrals for			Stoma Care		
	Acute con	nfusion	Urgent injection		
	Acute Bo	wel Care			
	Acute Wo	ound Care	Carer Breakdow	/n	
	End of Lit	fe Care	Equipment Failu	ure	
	Breathles	sness	Equipment Provision		
conce (Dotaile, operati	na houre or	od contact numbe	ure)		
ccess (Details, operati	ED		GP		
eferral accepted by:	SWAST		Other	•	
		×	Othor		
		•	days per week ank holidays)		
	8am – 7pm – 01803 654433 7pm – 8pm – 07920081505				
	For direct	team numbers (<i>fo</i>	or internal use onl	y)	
	<u>Torbay</u>				
rgent	Monday to Friday: Paignton & Brixham – 01803 659811 or 01803 697211 Torquay - 01803 657838, 01803 219838 Weekends & Bank Holidays: 01803 697258 or 01803 321149			303 697211	
	South Devon				
	Newton Abbot, Bovey Tracey, Chudleigh – 0300 500 4042 Teignmouth, Dawlish, Surrounding areas – 01803 651666, or 01626 771666 Totnes, Dartmouth, Ashburton 0300 456 9001				
			received by a rar nin and triage cli	-	

Virtual Ward	Patients accessing the virtual ward can use the UCR pathway to support admission avoidance
Specific Pathways	Urgent Community Response Pathway
Reviewed	Katrina Stockton

Internal Professional Standards

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Time standard - how long an in- patient	
intervention which will progress their	responsibility
24 hours – Monday to Friday (potentially longer over weekends)	Associate Medical directors / Clinical leads
Within 72 Hours – In line with Devon ICB Policy For patients listed on central Repat list*	Site Management Team
	Ali Kingdom MCA Act and Liberty Protection Safeguarding Operational Manger
All patients are triaged at point of referral.	Peggy Christie Matron
0	Jayne Yuen Lead Nurse
	Tessa Clark Lead Acute Oncolog and CUP CNS
	Amy Clift Lead Head and Nec CNS
	Caroline Harding Lead Nurse
	Sue Cox Lead Nurse
Within 24 hours *Unless stroke alert.	Lyndsey Harper Advanced clinical practitioner for strok
with very complex conditions, complex	
	can reasonably wait for the intervention which will progress their care 24 hours – Monday to Friday (potentially longer over weekends) Within 72 Hours – In line with Devon ICB Policy For patients listed on central Repat list* >24 Hrs for general enquires for emails Telephone calls will be triaged and acted on appropriately <1 Hour for all Urgent referrals. All patients are triaged at point of referral. >4 Hour for all Urgent referrals. All patients are triaged at point of referral and telephone advise provided to bridge service. >24 hours for urgent reviews (Not weekends) >24 hours for urgent reviews (Not weekends) >24 hours (Not weekends) Within 24 hours following referral. Urgent referrals within 4 hours. (Not weekends) Within 24 hours *Unless stroke alert. Level 1 Urgent Referrals for patients with very complex conditions, complex or life-threatening wounds Contact with the referrer will be within 1 working day from the referral date. Level 2 Non-Urgent Referrals for patients with less complex wounds and conditions Contact with the referrer will be within 2 working days from the referral date. Level 3- Non-Urgent Referrals for patients with chronic longstanding

Erica Dunn

Arrhythmia Nurse	Within 24 hours following referral.
Monday to Friday 8am -4pm	(Not weekends)
Chest Pain Nurse	Within 24 hours following referral.
	(Not weekends currently)
Heart Failure Nurse	Within 24 hours following referral.
Monday to Friday	*Virtual Ward available Monday to
8am -4pm	
Alcohol Care Team	Within 24 hours following referral.
Monday to Friday	(Not weekends)
8am -4pm	. ,
Stoma Team	New stoma patients on the
Monday to Friday	admission pre surgery and
8am -5.30pm	each day afterwards until
•	discharge then reviewed in
Provide ad hoc weekend	 Newly admitted ostomy part
cover dependant on	the same day of admission
number of enhanced	All other referrals within 24
recovery patients	following referral.
Parkinsons	>24 hours initial phone advise
Monday to Friday	(Not weekends)
9am – 4pm	
Palliative Care Team	Within 24 hours following referral.
Monday to Friday 8.30am	-
– 5pm / Saturday	
8.30am -4.30pm	
Vascular Assess Team	Referrals for Midlines or PICCs are
Tuovului moocoo Icalli	via infoflex white slip. Urgent referr
Service limitations	accepted via phone. Triaged at poi
Radiology capacity.	referral for urgency based on clinic
No weekend service.	need.
Currently no Wednesday	
	Threat to life – ASAP, <1 hour
returning to Mon-Fri	Urgent – same day
service once fully	TPN PICC - <24 hours from decision
established.	feed (national standard)
	Cancer treatment – within timefra
	prevent cancer wait breech (nation
	standard)
	Non-urgent - <48 hours
Respiratory Virtual	Within 1 hour following referral.
Ward (THORT)	
Daily	
8am-6pm	
MAAT	IVAB's – referral picked up within 2
Daily	Details checked and discussed wit
9am - 5pm	Microbiology and plan produced w
	hours

Doctor Assistant	<1 Hour from request for job	Michelle Collins
	DVT – triage when referral accessed usually within 24 hours. Booked for next available scan within 72 hours.	
MAAT Daily 9am - 5pm	IVAB's – referral picked up within 2 hours. Details checked and discussed with Microbiology and plan produced within 24 hours.	Senior Sister -
Respiratory Virtual Ward (THORT) Daily 8am-6pm	Within 1 hour following referral.	Kelly Caunter Asthma Nurse Specialist / Respiratory Virtual Ward Nursing Lead
service due to vacancies, returning to Mon-Fri service once fully established.	Threat to life – ASAP, <1 hour Urgent – same day TPN PICC - <24 hours from decision to feed (national standard) Cancer treatment – within timeframe to prevent cancer wait breech (national standard) Non-urgent - <48 hours	
Vascular Assess Team Service limitations Radiology capacity. No weekend service. Currently no Wednesday	Referrals for Midlines or PICCs are made via infoflex white slip. Urgent referrals are accepted via phone. Triaged at point of referral for urgency based on clinical need.	Lee Merry, Clinical Lead Charlotte Davies, Team Manager.
Palliative Care Team Monday to Friday 8.30am – 5pm / Saturday 8.30am -4.30pm		Wendy Browse Lead Clinical Nurse Specialist for Palliative and End of Life Education
Parkinsons Monday to Friday 9am – 4pm	>24 hours initial phone advise (Not weekends)	Louise Trout Acute Nurse
Stoma Team Monday to Friday 8am -5.30pm Provide ad hoc weekend cover dependant on number of enhanced recovery patients	 New stoma patients on the day of admission pre surgery and then each day afterwards until discharge then reviewed in clinic. Newly admitted ostomy patients the same day of admission All other referrals within 24 hours following referral. 	Rae Beeny
Alcohol Care Team Monday to Friday 8am -4pm	Within 24 hours following referral. (Not weekends)	Andy Everett Lead Nurse ACT
Heart Failure Nurse Monday to Friday 8am -4pm	Within 24 hours following referral. *Virtual Ward available Monday to Friday	Erica Dunn
Chest Pain Nurse Monday to Friday 7.30am - 8pm	Within 24 hours following referral. (Not weekends currently)	Erica Dunn
8am -4pm		

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CT scan	Aim to scan <24hrs. However, depends upon urgency, patient prep required, if need a discussion/decision of a radiologist	Tim Simpson
MRI Scan	Aim to scan <48hrs. However, depends upon urgency/priority and if been discussed with Radiologist and if the patient is fit/compliant to be scanned	Tim Simpson
Radiology Procedure	Most IR procedures are agreed with IR consultants and booked accordingly. Aim for <24 - 48 hrs as no f/t IR Consultant Radiologist cover. Fluoroscopic GI studies are agreed with GI consultants and booked either on current appointment lists or slotted in as extras. Generally, 2 lists/week aim <72hrs.	Tim Faircloth
Echo Scan	Aim to scan <24hrs. (Sunday service only at weekends) However, depends upon urgency/priority.	Shinner
Heart Monitor	within 24 hours (Not weekends)	Erica Dunn / David Shinner
Pacemaker Check	Same working day (Not weekends) Within 48 Hours	Erica Dunn / David Shinner Erica Dunn / David
Lung Function /	_	Shinner
Overnight Oximetry	(Not weekends)	
Joint MH Assessment	1hr to ED 24 hours to the Assessment Areas and wards	Tom Manders
Podiatry (Inpatients service provided to those with a diabetic foot ulcer) Monday to Friday 8.30am - 4.30pm	Within 48 Hours (Not weekends)	Denise Walker Head of Service
Dietetics	Priority One (>2 Days)	Liz Wardle
Monday to Friday 9am – 5pm G05221.Dietetic Referral Prioritisatio	 Priority One (>2 Days) Parenteral Nutrition (TPN) Gastro-intestinal obstruction Enteral tube feeding Risk of Refeeding Syndrome Oesophageal Stents Head & Neck Cancer patients Patients requiring modified consistency diet with poor intake Patients admitted due to an eating disorder – adult Liver Disease / Pancreatitis / Inflammatory bowel disease requiring artificial nutrition support Priority Two (>5 Days) Malnourished patients as demonstrated by raised MUST score New coeliac disease Pancreatic disease requiring nutrition support 	

	Driavity Three / Indikaly to be seen in	
	Priority Three (Unlikely to be seen in hospital)	
	New Type 2 Diabetes	
	Cholecystitis	
	 Diverticular disease and 	
	constipation	
	Temporary low fibre/low residue	
	diet for before and after bowel	
	surgery	
	Overweight	
	Hyperlipidaemia	
	• Obesity BMI 40kg/m ² or 35kg/m ²	
	with Diabetes	
SALT (Speech &	Within 48 Hours – all referrals are triaged,	
Language Therapy)	5	Head of SALT
	(Not weekends but provide Bank Holiday	
– 5pm	service)	
OT (Occupational		Lisa Baker – IP
Therapy)	Patients who are medically fit/medically antimized	Therapy Lead
	fit/medically optimised.Patients who could be discharged	
	Patients who could be discharged the same day with / without	
	services / equipment.	
	 End of Life / Fast track patients. 	
	Priority Two (<24 Hours)	
	Patients who are medically	
	fit/optimised or who are likely to	
	become MF within 24 hours, who	
	could be discharged directly home	
	but require essential	
	equipment/services that need to	
	be in place on the day of	
	discharge, but it is unlikely that it	
	will be available on the same day	
	of discharge (such as POC).	
	 If not seen the day that they have been identified as P2, then they 	
	been identified as P2, then they need to become P1 the following	
	day.	
PT (Physiotherapy)		Lisa Baker – IP
	Patients requiring chest	Therapy Lead
	Physiotherapy or that Patients	
	that have been seen by the on-	
	call Physiotherapist	
	 Patients that are MFFD that a 	
	Physiotherapy input / assessment	
	will enable a discharge from	
	hospital	
	 New patients that are therapy 	
	ready that require a	
	Physiotherapy assessment	
	 Priority 2 patients who haven't been seen in >3days 	
	Priority Two (<24 Hrs)	
	 Patients that are rapidly 	
	progressing with Physio input and	
	will expediate a discharge	
		1

Trauma/Ortho therapy	 Known discharges home today with outstanding therapy goals to complete New referrals / patients including Day 1 electives, day 1 # NOF, Hip dislocations or similar with potential for therapy input and Discharge including paediatrics Discharge assessments for patients who are MFFD and potentially going home same day Patients who have not achieved their discharge goals and not MFFD but likely to become MFFD within 24-48 hours Day beds including ASU patients # Clinic bleeps / talipes bleeps Urgent respiratory assessment (deteriorating patient) Priority Two (<24 Hrs) Ongoing rehab patients that have discharge plan in place, but therapy input may change discharge plan Patients whose immediate DC plan is unlikely to change e.g. IC, discharge back to RH who are making slow progress (stand aid/ ReTurn patients, struggling with a particular functional task or stamina), especially NOF patient's according to NOF guidelines 	
Standalone Discharge	Within 24 Hours of request	Locality Community
to Assess – Locality Discharge coordinator	Same Day	service managers
Discharge coordinator (DISCO)	Same Day	Anke Scholey – Operational Manager Inpatient Discharge
Point of referral to	24 hours for DLN's and 48 hours for	Sarah Bradley & The
allocation to Complex	social workers. The referrals are all	Complex Social
Discharge Team	reviewed by the correct profession.	Work Team
(Discharge Liaison	(No Sunday Service)	
Nurses, Social Workers)		
Referral to DC Hub from	Within 72 Hours	Sarah Bradley & The
Complex Discharge		Complex Social
Team/Community Hospital DISCOs following allocation		Work Team

Patient own Home Deep Clean	Referral to provider within 24Hrs.	DISCO/Ward MDT
Pathway 1 Discharge (Return home with new, additional or a restarted package of	1 Day (once referral with the Discharge Hub*)	Sarah Bradley & Discharge Hub
support from health and/or social care.)		
Pathway 2 Discharge (Recovery, rehabilitation, assessment, care planning or short-term intensive support in a 24 hour bed-based setting)	2 Days (once referral with the Discharge Hub*)	Sarah Bradley & Discharge Hub
Pathway 3 Discharge (Require long term bed- based 24 - hour care or EOL care)	3 Days (once referral with the Discharge Hub*)	Sarah Bradley & Discharge Hub
TTAs Monday to Friday: 8.45am – 5pm Saturday: 8.30am 12.30pm Sunday: 9am – 12.30pm An 'on-call' Pharmacist is always available out of hours)	4 hours and 24 hours for blister packs (Acute). 24 hours (Community Hospitals)	Stacey Muscott - Operational Manager
Community Nursing Referrals	With 2 Hours (8am - 5pm) Outside of this the next working day.	Natalie Armstrong Community Nurse Lead Torbay
Transport On the day booking	90 mins if ambulatory / Single person crew, 4 hours for non-ambulatory / two-person crew.	Gavin Lomas Operational Manag for PTS and Transport Services.
Porter	 Emergency (cardiac arrest / major haemorrhage / fire / helicopter / baby abduction) < 5 minutes, Patient move < 20 minutes, Bloods/specimens < 30 minutes Notes < 60 minutes 	