

Long Term Conditions in West Lothian (Asthma, COPD, Diabetes and CHD)

Directory of services 2011/12

Introduction

There is a variety of services/resources in West Lothian to meet the needs of adults and older people who have Long Term Conditions (Asthma, COPD, Diabetes and CHD).

This directory provides General Practice, Primary Care Teams and Secondary Care with an overview of the services available which may be appropriate to refer their patients on to. It contains referral and contact information.

For further details about any particular service please contact the service directly on the number provided.

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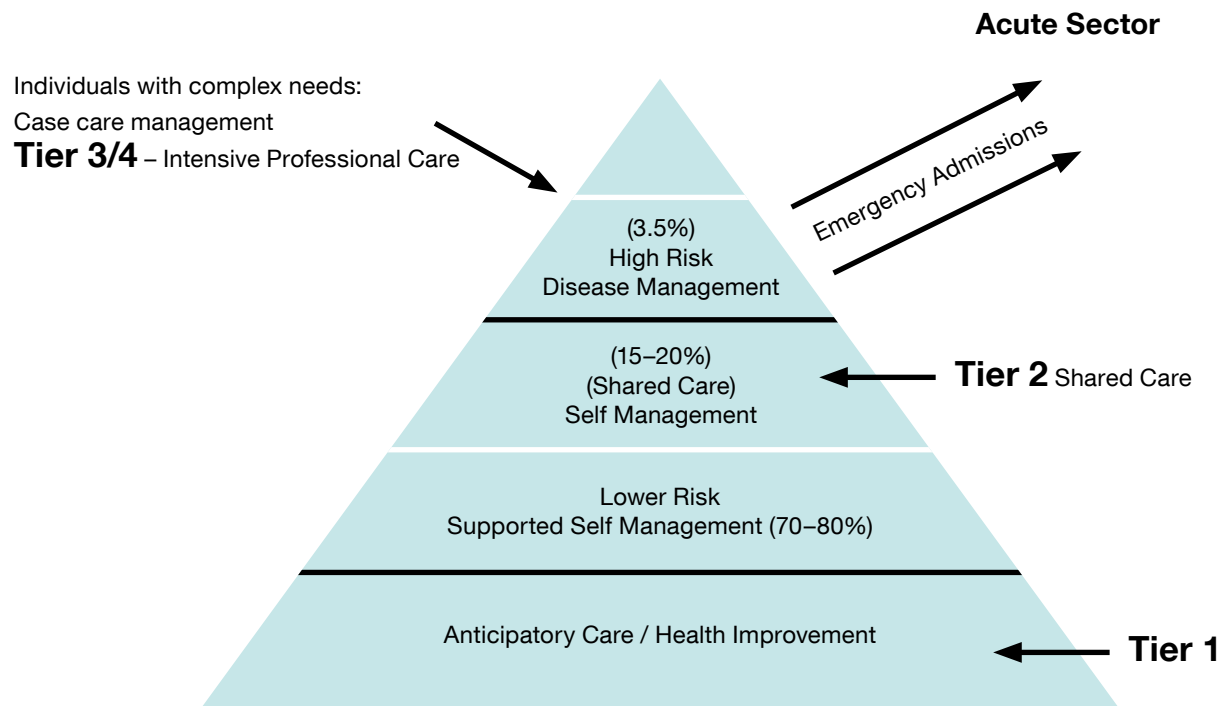
Based on a population management model adapted from Kaiser Permanente which focuses on 4 tiers:

Tier 1: Anticipatory Care/Health Improvement

Tier 2: Supported Self Care

Tier 3: Disease Specific Case Management

Tier 4: Case Management



Tier 1

Anticipatory Care and Health Improvement interventions on both a population wide and targeted basis to prevent LTCs, reduce complications and promote healthier lifestyles.

Tier 2

Supported self management: supporting people to take ownership and an active role in managing their own care, especially in developing approaches that prevent their health deteriorating.

Tier 3

Disease specific management involving the development of multi disciplinary approaches that provide high quality evidenced care using agreed pathways and protocols.


Tier 4

Case management (can also apply to Tier 3 in some cases) involving the proactive identification and active management of 'high risk' individuals whose needs are complex and who are often high intensity users of unplanned secondary care.

Population management involved targeting populations, redesigning processes and measuring the outcome and feedback. This model has been recommended by the Department of Health, is widely recognised and can be adapted to suit local needs and situations.

Long Term Conditions in West Lothian (Asthma, COPD, Diabetes and CHD)

Directory of services 2011/12

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 - Community Specialist Palliative Care Team
 - Joint Equipment Store
 - Respiratory Nurse Specialist Service

Tier 1 Anticipatory Care/Health Improvement

Health Improvement Team

Aim: to integrate health improvement and wellbeing, and address inequalities through the development and implementation of relevant policies and strategies across West Lothian.

Service Cover: all patients living in West Lothian

Referral Criteria:

- West Lothian on the Move/Eat Right
- Community Health Development
- Mental Health & Wellbeing
- Breastfeeding
- Suicide Prevention

Who: NHS staff, CHCP staff, WLC staff, Voluntary organisations and Private organisations (criteria apply)

How: Telephone

Hours:

Contact Details: Health Improvement Team,
Strathbrock Partnership Centre, Broxburn
Telephone: 01506 775 626
Email: hit@westlothian.gov.uk
Website: www.westlothianchcp.org.uk/what/community/hit/

Keep Well

Aim: to reduce health inequality in communities with the greatest health needs through offering cardiovascular risk assessment and follow up for those age 40-64 years.

Service Cover: General Practice

Referral Criteria:

All those age 40-64 years registered at the following practices:
Craigshill/Blackridge/Whitburn/Blackburn/Breich Valley

Who: Anyone can signpost people into Keep Well as long as they fit the criteria for assessment and they are registered with the practice.

How: Telephone general practice to book an appointment with a Keep Well nurse.

Hours: Clinic days and times vary for each practice. Out of hours appointments may also be available upon request.

Contact Details:

Craigshill	01506 445 831
Blackridge	01501 751 238
Whitburn	01501 740 297
Blackburn	08444 770 954
Breich Valley	01501 773 020

Ciara Byrne – Keep Well Project Manager
Telephone: 07866 985216
Email: Ciara.byrne@nhslothian.scot.nhs.uk

Stop Smoking Service

Aim: provide a comprehensive stop smoking support service for clients throughout West Lothian.

Service Cover: Secondary and Primary Care

Referral Criteria:

- Any client residing or working in West Lothian over the age of 12.
- Current smoker
- Relapse prevention

Who: Anyone can refer on behalf of the service user e.g. self, relatives, carers, hospital and community staff.

How: Telephone, letter, person, referral form.

Hours: Monday – Friday 9am – 5pm (or SMOKELINE 0800 848484)

Contact Details: Stop Smoking Service, Telephone: 01506 651 829

Tier 2 Supported Self Care

Peer/Carer Support Groups

Aim: provide members, relatives and carers ongoing support, stimulation and companionship in a friendly and relaxed environment within the community.

Who: Those resident in West Lothian

How: Self presentation

Hours: Variable

Contact Details: Diabetes UK (West Lothian Voluntary Group)

Website: www.west-lothian.diabetesukgroup.org
or telephone: May Millward 01506 834877

Airways Support Group

Tom Daly (Airways group secretary) phone: 0131 449 5981

Heart Failure Support Service

Quarterly forum meetings and Quarterly newsletter
Chest Heart & Stroke Scotland
Telephone: 0131 225 6963

Books on Prescription

Aim: A source of support to help people cope with health difficulties including emotional and mental health issue; available on-line.

Service Cover: All patients living in West Lothian

Who: GP, Self referral via West Lothian Libraries

How: GP prescription, self presentation

Hours: 9am – 4.30pm

Contact Details: Laura Hunter

Project Assistant
Bathgate Primary Care
Telephone : 01506 651 916
Email: laura.x.hunter@nhslothian.scot.nhs.uk
Website: www.westlothianchcp.org.uk/bop/

CHCP Website

Aim: A media to provide local information to health care professionals, patients, family members and carers on services available across West Lothian.

Contact Details: Website: www.westlothianchcp.org.uk

Self Management Patient Education Desmond

Aim: To improve lifestyle factors, weight loss, smoking cessation and physical activity

Service Cover: All patients with Type 2 Diabetes living in West Lothian.

Referral Criteria: Type 2 Diabetes, Ability to read and write English.

Who: All Health Care Professionals

How: Referral form (available on intranet & CHCP website)

Hours: Run two sessions each month, every month of the year. Option of either 2 x half days or 1 full day.

Contact Details: Anne Morrison

Diabetes Facilitator
Bathgate Primary Care
Telephone: 01506 651 917
Email: anne.l.morrison@nhslothian.scot.nhs.uk

Tier 2 Supported Self Care

Self Management Patient Education

Dafne

Aim: To improve quality of life and overall diabetes control.

Service Cover: All patients with Type 1 Diabetes living in West Lothian.

Referral Criteria: At the discretion of Hospital Diabetes Team.

Who: Hospital Diabetes Team

How: Referral form (available on intranet & CHCP website)

Hours: 5 day course (Monday – Friday 9am – 5pm)

Contact Details: Liz Hazzard

Lead Diabetes Nurse Specialist

Telephone: 01506 523 867

Email: liz.hazzard@nhslothian.scot.nhs.uk

1st Steps to Health and Wellbeing

Aim: introduce individuals experiencing a variety of mental and physical health problems to regular, structured physical activity, to accompany or act as an alternative to conventional treatment.

Referral Criteria: Patients who have a long term condition/are not existing members of a gym and who are inactive. (previous referrals should not be re-referred)

Who: All Health Care Professionals

How: Referral form (contact Laura Hunter for form)

Hours: 9am – 4.30pm

Contact Details: Laura Hunter

Project Assistant

Bathgate Primary Care

Telephone : 01506 651 916

Email: laura.x.hunter@nhslothian.scot.nhs.uk

Website: www.westlothianchcp.org.uk/bop/

Self Management/Staff Education

“Making it real” – motivational interviewing

Aim: To increase the confidence of participants in helping clients to positively change health-related behaviour through the application of motivational interviewing techniques.

Who: West Lothian CHCP staff

Hours: One day 9.15am – 4.30pm plus 1x2 hour workshops 2pm – 4pm

Contact Details: Gillian Amos

Senior Health Promotion specialist

Health Improvement Team

Telephone : 01506 771 850 / 01506 775 626

Heart Failure Support Service (volunteer befriending)

Aim: To provide a volunteer to reduce isolation and enhance the quality of life of people living with Heart Failure.

Referral Criteria: Diagnosis of Heart Failure and isolation

Who: Self Referral, Community Staff, Statutory & Voluntary organisations.

How: Directly to Chest Heart & Stroke Scotland.

Hours: Monday – Friday 9am – 5pm

Contact Details: Chest Heart & Stroke Scotland

Telephone: 0131 225 6963

Tier 2 Supported Self Care

Community Occupational Therapy (council-occupational therapy)

Aim:

- For adults, older people and children.
- Assessment with physical disabilities in relation to their functional level and any of risk factors.
- Provision of equipment and adaptations to improve level of ability and promote safe environment.
- Practice in use of provision and in safe practice in the home

Referral Criteria: Affected by physical disabilities – resident in West Lothian

Who: Anyone can refer on behalf of the service user e.g.: self, relatives, carer, hospital and community staff

How: Telephone, Letter, Person or Referral Form

Hours: Monday – Thursday 8.30am – 5pm
Friday 8.30am – 4pm

Contact Details: Adults under 65 and children Strathbrock

Partnership Centre

Telephone: 01506 775 666 or Duty Phone no: 01506 777 777

Older people over 65

Bathgate Social Work Centre

Phone: 01506 776 700

Community Occupational Therapy (council – OT self selection)

Aim: To provide a service for simple requests direct to the client without the need for a full occupational therapy assessment. This includes small equipment, handrails and grab rails

Who: Anyone can refer on behalf of the service user e.g.: self, relatives, carer and hospital staff

How: Telephone, Referral Form or Booklet

Hours: Monday – Friday 9am – 5pm

Contact Details: John Leydon

Strathbrock Partnership Centre

Telephone: 01506 775 608

Tier 3/4 Disease Specific Case Management/Case Management

Home Safety Service

Aim: To ensure personal and property safety through the provision of telecare/assisted technology. The service provides a 24h/day telephone link between equipment installed in clients home and West Lothian Careline. The technology aims to promote safety and independence in the community.

Referral Criteria: Patients with a long term condition, disability or vulnerable service users.

Who: Self Referral, GP, any health care professional

How: Application form (available from Home Safety, Local Council offices, health centres, libraries and St John's Hospital)

Hours: Monday – Thursday 8.30am – 5pm
Friday – Sunday 8.30am – 4pm

Contact Details: Home Safety Service
Lomond House, Cheviot Square
Livingston, EH54 5QF
Telephone: 01506 771 770

Cardiac Rehabilitation

Aim: Process by which patients with cardiac disease in partnership with MDT are encouraged and supported to achieve and maintain optimal, physical, psychosocial health.

Service Cover: All patients in West Lothian who meet referral criteria.

Referral Criteria: Anyone with Myocardial infarction, coronary artery bypass graft, PCI or Heart Failure

Who: Secondary Care/GP

How: Referral form

Hours: Monday – Friday 9am – 5pm

Contact Details: Cardiac Rehabilitation Nurses
St John's Hospital
Telephone: 01506 523 877

Pulmonary Rehabilitation

Aim: It provides a comprehensive exercise and education programme to encourage activity, reduce symptoms and improve quality of life.

Service Cover: All patients living in West Lothian with COPD or chronic lung disease who meet the inclusion criteria.

Referral Criteria:

- Confirmed diagnosis of COPD/Chronic lung disease
- History of decreasing exercise tolerance/functional capacity
- Clinically stable
- Optimal pharmaceutical management
- Willing and motivated to attend outpatient programme
- Able to make own way to venue
- Able to participate in exercise programme
- Any relevant issues outwith inclusion criteria, e.g. ambulatory/long term oxygen therapy, history of cancer should be discussed with Pulmonary Rehabilitation staff.

Who: Any health care professional in receipt of appropriate clinical information

How: Referral form, SCI-Gateway (e-referrals)

Hours: Strathbrock Monday 10.30am – 1.30pm
Wednesday 2.30pm – 4.30pm
Bathgate Monday 2.30pm – 4.30pm
Wednesday 10.30am – 1.30pm

Contact Details: PR Physiotherapist (Mon – Wed)
Telephone: 01506 522 063 / Mobile :07872 422 546

Tier 3/4 Disease Specific Case Management/Case Management

Lothian Heart Failure Nurse Service

Aim: To improve the care and management of patients with heart failure both in the community and hospital. To provide home visits and clinic reviews to optimise medications and symptom monitoring.

Service Cover: All patients in West Lothian who meet the inclusion criteria

Inclusion Criteria:

- Admitted to hospital with a documented primary diagnosis of Class III or Class IV heart failure
- Heart failure must be caused by Left Ventricular Systolic Dysfunction
- Must be willing to receive the service

Who: Secondary Care (ward or clinic)

How: Telephone referral

Hours: Monday – Friday 8.30am – 4.30pm

Contact Details: Heart Failure Liaison Nurse
St John's Hospital
Telephone: 01506 523 881

Out of Hours Community Nursing Service

Aim: To provide 24/7 assessment and discharge to community settings, while aiming to reduce hospital admissions.

Referral Criteria: Any person over 16 years old and housebound in West Lothian requiring nursing intervention.

Who: All health, social care, voluntary and self referral

How: Telephone/letter/electronic referral

Hours: Monday–Friday 4.30pm – 8.30am
Saturday, Sunday and Public Holidays 8.30am – 8.30am

Contact Details: NHS 24 – 0845 424 2424

Occupational Therapy/Health

Aim: Provide an Occupational Therapy Assessment and Rehabilitation Service to adults over 18 years.

Referral Criteria: Patients in any inpatient setting, A&E and outpatients that require Occupational Therapy intervention and rehabilitation to increase/maintain functional independence and safety at home.

Who: Any Health or Social Policy staff

How: Telephone, letter, e-mail

Hours: Mon – Fri 8am – 4.30pm (7.00pm in A&E)
Sat – Sun 9am – 1pm (A&E and in-patient service)

Contact Details: Occupational Therapy Department
St John's Hospital, Livingston
Telephone: 01506 524 150

Carers of West Lothian

Aim: Is a carer-led voluntary organisation and charity that aims to provide support, information, a voice for carers and to work with others to ensure a better quality of life for all carers.

Service Cover: All carers residing in West Lothian

Referral Criteria: Carers of West Lothian provides a range of services to support carers and to help professionals to understand the needs of unpaid carers.

Who: Any health care professional, self referral, West Lothian Council

How: Telephone, email, website

Hours: Monday – Friday – 10am – 3pm

Contact Details: Strathbrock Partnership Centre
189a West Main Street
Broxburn, EH52 5LH
Telephone: 01506 771 750
E-mail office@carers-westlothian.com
Website: www.carers-westlothian.com

Tier 3/4 Disease Specific Case Management/Case Management

District Nurse Core Service

Aim: To provide a comprehensive, flexible, skilled nursing service to patients who are over 16 and housebound, also within health centres/clinics and other community settings.

Referral Criteria: All housebound residents over 16 years of age

Who: GP's, Carers, Secondary Care, Social Workers, Care Agencies etc

How: Telephone, Letter or e-mail

Hours: Monday – Friday 8.30am – 4.30pm

Contact Details: Via GP Practice

Community Specialist Palliative Care Team

Aim: Specialist palliative care offers telephone advice, outpatient review, day assessment and home visiting according to specialist need.

Referral Criteria: People within West Lothian who are living with a progressive, life limiting illness and have:

- Complex pain/symptom control
- Require psychological, emotional and spiritual support
- A period of rehabilitation

Who: All healthcare professionals

How: Urgent referrals should be discussed by telephone and followed up by fax or letter

Hours: West Lothian Community Specialist Palliative Care Team
Monday – Friday 8.30am – 4.30pm

Contact Details: West Lothian Community Palliative Care Team

Day care/Outpatients phone: 01506 523 531
Home care service phone: 01506 523 534

For patients admitted to St John's Hospital please contact
St John's Hospital Palliative Care Team
Telephone: 01506 522 010

For professionals looking for out of hours advice contact:
Marie Curie Hospice
Edinburgh on 0131 470 2201

Respiratory Nurse Specialist Service

Aim: Specialist respiratory nurse care for adult patients with acute and chronic respiratory disease. To provide integrated secondary/primary care assessment and support. Enable patients to maintain quality of life in end stage respiratory disease.

Referral Criteria: West Lothian population with a confirmed respiratory condition.

Who: Primary/Secondary Care professionals

How: By telephone, letter, e-mail or fax

Hours: Monday – Friday 9am – 5pm

Contact Details: Respiratory Nurse Specialist

St John's Hospital, Howden, Livingston, EH54 8RE
Telephone : 01506 523 865

Joint Equipment Store

Aim: Distribution of a wide range of Community Nursing, Occupational Therapy, Physiotherapy and Deaf Action equipment

Who: Recognised council and NHS staff

How: Assessors requests are sent electronically, by e-mail or fax or post to community equipment store

Hours: Monday – Thursday 8.30am – 5pm (collections until 4.30pm by arrangement)
Friday 8.30am – 4pm
Saturday 9am – 12pm

Contact Details: St John's Hospital, Howden

Livingston, EH54 8RE
Telephone no: 01506 523 335
Fax no: 01506 523 336
Email: ces@westlothian.gov.uk
Minicom: 01506 523 334
Sms: 07881 446 632