

Older People's and Adult Community Directorate service information for staff



Contents:

Specialist Services	3
Cardiac Services	3
Continence	5
Diabetes	6
Dietetics	7
Neuro Conditions	8
Neuro Rehab	9
Podiatry	10
Respiratory	11
Speech and Language Therapy	12
Tissue Viability	13
Community Services	13
Neighbourhood Teams	13
Hospital at Home	15
Locality Mental Health Services	16
Cambridgeshire Training, Education and Development – Older People (CAMTED-OP)	16
Crisis Resolution Home Treatment Team (CRHTT)	18
Dementia Carers Support Service	19
Dementia Intensive Support Team (DIST)	20
Older People’s Stepped Care Therapies Service	20
Memory Clinic	21
Inpatient Wards Physical Health	21
Lord Byron A and B	21
Welney Ward	22
Trafford Ward	22
Intermediate Care Unit Peterborough (ICU)	23
Inpatient Wards Mental Health	23
Willow Ward	23
Denbigh Ward	24
Maples 1 and 2	24
Urgent/Unplanned Care	25
Joint Emergency Teams (JET)	25
Minor Injury Units (MIU)	25
Intermediate Care	27

Specialist Services

Cardiac Services

This includes:

Heart Failure Service

The countywide service provides intensive case management of patients with heart failure, which includes home visits, telephone support and clinics. Patients will have early specialist heart failure nurse follow up within two weeks of referral to the service. The service also manages patients with supportive/palliative care needs due to end stage heart failure. It also provides support and education for primary care clinicians in the management of patients with heart failure. The service will provide dedicated education and rehabilitation programmes at home in the community or hospital setting.

Referrals

Patients can be referred to the service via the referral form, a letter, email or the telephone. The patient can be referred by any health care professional and the GP will be informed before a visit is made. It is imperative that the referral form contains all the information requested on it and will be returned if not fully complete.

Contact

East Cambs and Fenland

T 0330 726 0077

E cpm-tr.FenlandHeartFailureTeam@nhs.net

Peterborough

T 0330 726 0077

E cpm-tr.CHDSpecialistNurses@nhs.net

Huntingdon

T: 0330 726 0077

E: cpm-tr.huntingdonheartfailureteam@nhs.net

Community Cardiac Rehabilitation Team Peterborough

Our aim is to improve patient outcomes following acute cardiac event or diagnosis of coronary heart disease by providing:

- Domiciliary visits and telephone support following discharge from hospital after an acute cardiac event (heart attack or cardiac surgery) for assessment, planning and delivering of home-based cardiac rehabilitation.
- A 'virtual team' with the Peterborough City Hospital cardiac rehabilitation service.
- Support with lifestyle behaviour change to reduce the chances of further cardiac events, including coaching and goal setting.
- Signposting and onward referral to other appropriate services.
- Assessment of the effects of newly prescribed cardiac medications.
- A culturally appropriate service for Peterborough's main ethnic minority group.

Referrals

We take referrals from secondary and tertiary care, GP practices and other health care professionals.

Contact

T: 0330 726 0077

E: cpm-TR.CHDSpecialistNurses@nhs.net

Fenland Cardiac Rehabilitation Service

This service is offered to all patients who are registered with a GP practice in Fenland and who have experienced: myocardial infarction, Primary Percutaneous Coronary Intervention (PPCI), coronary artery bypass graft (CABG), valve replacement/repair, PTCA/stent.

Our aim is to improve patient outcomes following acute cardiac event or diagnosis of coronary heart disease by

providing:

- Domiciliary visits and telephone support following discharge from hospital after an acute cardiac event
- Offers community based cardiac rehabilitation programs.
- Support with lifestyle behaviour change to reduce the chances of further cardiac events, including coaching and goal setting.
- Signposting and onward referral to other appropriate services.
- Assessment of the effects of newly prescribed cardiac medications.

Referrals

We take referrals from secondary and tertiary care, GP practices and other health care professionals

Contact

T: 0330 726 0077

E: cpm-tr.cardiacrehab@nhs.net

Continence

We offer a comprehensive specialist service in Cambridgeshire and Peterborough for continence assessment, treatment and advice for anyone over the age of 18 with bowel and bladder dysfunction.

Conditions treated include urinary frequency and urgency, stress leakage, outflow obstruction, incontinence and faecal incontinence. The service may provide incontinence products following a clinical assessment and service criteria.

Children over the age of four may also be provided with continence pads following a school nurse or health visitor assessment and referral by the children's service. A programme of continence training is provided for staff. Clinic appointments are offered county wide from several locations in the community.

A programme of training is provided for health care professionals, care home staff, carers and support workers about incontinence issues.

Referrals

Referrals are accepted from GPs, consultants, district nurses, practice nurses, other social and health care professionals by E-referral or email.

Contact

For Cambridgeshire area

T 03307260077

03457413643- Essity (SCA) for requesting deliveries of pads only

E cpm-tr.continenceservice@nhs.net

Peterborough area

T 03307260077

03457413643 - Essity (SCA) for requesting deliveries of pads only

E cpm-tr.continenceservice@nhs.net

Diabetes

The service supports both patients and primary care clinicians - such as GPs, practice nurses and district nurses - in the recognition and management of diabetes and diabetes-related complications, working as part of an integrated team with hospital-based diabetes nurse specialists and diabetes consultants.

Services are provided in community hospital in-patient settings where required or in clinics in a range of GP practices across Cambridgeshire and Peterborough. Home visits are also made where patients are house-bound or are residing in residential or nursing homes.

Referrals

- Primary health care professionals

- Community therapists and nursing staff
- Hospital-based health care professionals
- Care home staff
- Ward nursing staff
- Direct patient access once known to the service
- Social care practitioners

Contact

For general enquiries about the Diabetes Community Service call **0330 7260077** – and ask for diabetes admin.

Dietetics

The team provides tailored nutrition and dietetic advice to people aged 16 and over in Cambridgeshire and Peterborough to help them improve their health by making the appropriate lifestyle and food choices. The team also provides assessment and treatment for patients who need therapeutic diets and/or nutritional support. In addition, the team gives talks and provides training to other health care professionals about diet, nutrition and any related subjects, keeping up to date with the latest scientific research on nutrition and dietetics which it promotes on social media.

Referrals

Via GP or other healthcare professionals. All referrals are triaged to determine the most appropriate type service for them

Contact

T 0330 726 0077 Monday to Friday, 8am-5pm

E Idietitians@nhs.net

Follow us on: twitter.com/Idietitians

Like us

on: <https://www.facebook.com/nutritionanddieteticsCPFT>

Neuro Conditions

This service includes:

Parkinson's

The Parkinson's Specialist Service provides care for adults over the age of 18 with suspected or diagnosed Parkinson's disease from Cambridge City and South Cambridgeshire, East Cambridgeshire and Huntingdon and Peterborough.

Referrals

An open referral system operates from any source as long as there is patient consent.

Contact

Cambridge office:

T 0330 726 0077 - (8am – 5pm). Huntingdon area: option 2; Cambridge area: option 5

E cpm-tr.parkinsonspboro@nhs.net

Peterborough, Ely and Fenland:

T 0330 726 0077 - (8am – 5pm). Ely and Fenland: option 3; Peterborough area: option 4

E cpm-tr.parkinsons@nhs.net

CFS/ME

The occupational therapists are specialist CFS/ME clinicians who have a wide range of skills and experience in the management of CFS/ME. They will support you to self-manage the condition in a way that is appropriate to you, providing you with the necessary skills and strategies to sustain or gradually extend, if possible, your physical, emotional and cognitive capacity and manage the physical and emotional impact of CFS/ME symptoms.

Referrals

GPs within the Cambridgeshire and Peterborough area can refer adult patients to the CFS/ME service using the referral form.

Contact

T 0330 726 0077.

E cpm-tr.cfsme@nhs.net

Neuro Rehab

This service includes:

Multiple Sclerosis

We provide counselling, support and symptom management for all people with MS and those affected by their diagnosis, through all stages of the disease from diagnosis to palliative care.

We work closely with the multidisciplinary teams to ensure holistic appropriate care is given and continuity of care is maintained throughout the MS journey.

Referrals

We offer an open referral system providing there is a definite diagnosis of MS and consent has been obtained from the person with MS.

Contact

T 01223 723014 Clinical administration

E cpm-tr.mshunts@nhs.net

Neurological Rehabilitation (Stroke and ESD)

In each area, we have a specialist neurological rehabilitation team who provide care therapy input to people with complex neurological problems living in the community.

They work as a multidisciplinary service with physiotherapists, occupational therapists and rehabilitation assistants. They also have some access to psychology support. The neuro rehab teams work closely alongside the speech and language therapy teams.

Referrals

Initial referral into the service should be made by your GP or health/social care professional and via the appropriate contact route as below.

Contact

For Stroke Early Supported Discharge (ESD) services:

E cpm-tr.cpfstrokeesd@nhs.net Referrals to Neuro

For Rehabilitation Teams:

Cambridge City and South Cambridgeshire

T 0330 726 0077 [Option 5]

E cpm-tr.communityneuroteam@nhs.net

Huntingdonshire

T 0330 726 0077 [Option 2]

E cpm-tr.communityneurohunts@nhs.net

Ely and Fens

T 0330 726 0077 [Option 3]

E cpm-tr.fenlandneurorehab@nhs.net

Peterborough

T 0330 726 0077 [Option 4]

E cpm-tr.peterboroughneurorehab@nhs.net

Podiatry

Podiatry is a branch of medicine devoted to the study, diagnosis and treatment of disorders of the foot, ankle and lower leg with podiatrists working to improve the mobility, independence and the quality of life for patients by providing treatment for a wide range of problems affecting the feet.

Referrals

Referral into the service is via self-referral or GP practice. NHS podiatry treatment is currently only available to those who fall into either of the following groups:

- People who have a medical condition which can make the feet more vulnerable to complications such as infections and ulcers and who require treatment for a foot condition. Examples include diabetes, circulatory disorders, inflammatory arthritis, low immunity.
- People who require a specific type of treatment for their foot ailment such as foot surgery for minor foot deformities, nail surgery for ingrown toenails, or a gait assessment for foot problems which may require an insole.

Contact

T 03307 260077

E cpm-tr.podiatry@nhs.net

Respiratory

The respiratory service exists to deliver high quality care for those with long-term respiratory conditions. Specialist nurses and physiotherapists draw upon expert knowledge to support both our patients and their wider health and care support network. We work passionately to equip our patients with the skills and resources to empower them to take control of their self-care and enable them to remain in their own home.

Referrals

Referrals are accepted for patients on a CPFT caseload from:

- Primary care clinicians (e.g. GPs)
- Community therapists and nursing staff
- Hospital clinicians
- Other health care professionals

- Direct from patients once they are known to the service

Contact

T 0330 726 0077

E cpm-tr.communityrespteam@nhs.net

Speech and Language Therapy

The speech and language therapy service provides assessment, diagnosis and treatment for adults with acquired communication, voice and swallowing disorders.

Patients are seen on an inpatient, outpatient and domiciliary basis. Telephone advice and support to families and carers are also provided.

Referrals

The service offers an open referral system, although patients with voice disorders require an ENT assessment prior to a speech and language therapy referral.

Contact

E cpm-tr.AdultSLT@nhs.net

Cambridge city and south

T 0330 726 0077 [option 1, then option 5]

Huntingdonshire

T 0330 726 0077 [option 1 then Option 2]

Ely and Fens

T 0330 726 0077 [option 1 then Option 3]

Peterborough

T 0330 726 0077 [option 1 then option 4]

Tissue Viability

The Tissue Viability Service operates throughout Cambridgeshire and Peterborough and aims to support patients, GPs, practice nurses, district nurses and other healthcare professionals in the management of complex wounds, particularly the prevention and treatment of pressure ulcers.

By the early assessment and management of wounds, for example leg ulcer care, dressing, bandaging and monitoring wounds which are taking longer to heal, we can help to prevent unnecessary admission to hospital, reducing length of stay when in hospital and improve the quality of life and outcomes for patients.

Referrals

Referrals are accepted from GPs, other health and social care professionals, hospital services, nursing homes.

Contact

Tissue Viability Nurses

T 01223 723019

Team Secretary

T 01223 723199 (Direct Line)

F 01223 723002.

Peterborough

T 01733 466642

M 07768 302485

Community Teams

Neighbourhood Teams

Neighbourhood Teams (NTs) are the physical and mental health care hub of the local community for over 65-year olds and adults requiring community services. They work

closely with GPs, primary care, social care and the third and independent sector to provide joined-up responsive, expert care and treatment. The 14 NTs operate between 8am and 6pm, 365 days a year. The teams are aligned to GP practices in 4 localities.

Who works in a neighbourhood team

- Integrated support workers
- District nurses
- Mental health nurses
- Occupational therapists
- Physiotherapists
- Team manager
- Administrative staff, including MDT co-ordinators

What does a neighbourhood team do?

- Case management adopting a full team approach
- Integrated physical and mental health
- Integrated rehabilitation and mental health care
- Palliative care
- Supporting people to access personal budgets
- Building community resilience.

NT staff operate within clear governance structures that support patient and staff safety, clinical effectiveness, efficient and productive practice, team and organisational learning, and staff and team development. An operational policy has been created which will be reviewed every three months.

Referrals

If you have any questions about the services or would like to make a referral you can contact the team on 0330 726 0077.

Peterborough, Cambridge and East Cambs and Fenland:

8am-5pm, Monday-Friday

Huntingdon: 8am-6pm, Monday-Friday

Contact

T 0330 726 0077

E cpm-tr.districtnursing-peterborough@nhs.net – Peterborough

cpm-tr.CSDNspa@nhs.net – Cambridge

cpm-tr.fenlandhub@nhs.net – Fenland

cpm-tr.DistrictNursing-Hunts@nhs.net – Huntingdon

Hospital at Home

Community rehabilitation, crisis intervention and palliative care in Peterborough.

Hospital at Home is provided by Cambridgeshire and Peterborough NHS Foundation Trust (CPFT), supported by the Hospital at Home charity.

It is for anyone who is well enough to leave or avoid hospital but needs extra support in Peterborough. There are two parts to the service:

- Palliative care – supporting people to remain at home, if they choose to, at the end stages of life.
- Community rehabilitation – supporting people who are well enough to leave or avoid hospital but need extra support at home. This may involve Hospital at Home, occupational therapy and physiotherapy for a period of up to six weeks.

The service is part of the four neighbourhood teams in [Peterborough and Borderline](#).

Referrals

People can refer themselves

Contact

T 0330 726 0077

Locality Mental Health Teams

Cambridgeshire Training, Education and Development – Older People (CAMTED-OP)

Cambridgeshire Training, Education and Development - Older People (CAMTED-OP) is a countywide specialist multi-disciplinary training team.

Training and practice development is offered to a range of providers in the areas of dementia care and functional mental health. We currently offer training to a range of staff in care homes, acute hospitals, and primary care.

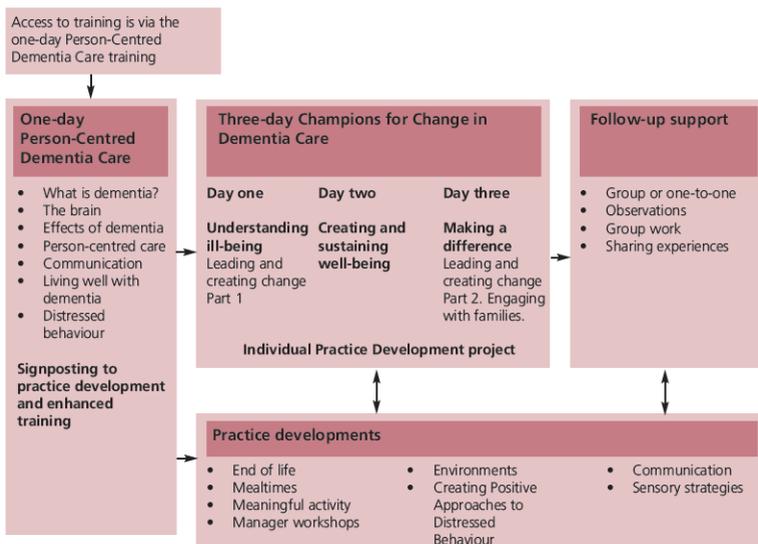
We believe that dementia care training and practice development should encourage discussion, reflection and sharing of ideas. Our training draws strongly on the principles of a person-centred dementia care approach and is designed using the best available evidence, practice guidance and our own clinical experience.

The team aims to provide a flexible and responsive service according to providers' needs and are happy to discuss your training requirements either face to face or by telephone.

Our prospectus sets out a range of training opportunities available "in house" or through centralised locations. All participants will receive access to full session handouts and a certificate of attendance.

As well as 1 Day Dementia Awareness, we offer practice development work that is "hands-on" and practically focused. The Champions for Change leadership training encourages and supports staff to go back into their care environment and take a proactive role in supporting their colleagues to bring about change in care practice. We enable teams and individuals to make the transition from training to practicing high-quality dementia care.

CAMTED-OP Dementia Training Model



Available Sessions:

One-day Person-Centred Dementia Care training
 Three-day Champions for Change in Dementia Care course
 Positive Approaches to Distressed Behaviour
 End of Life Dementia Care
 Mealtimes
 Meaningful Activity
 Communication

Dementia Care Mapping (DCM) care homes

DCM is an observational tool that looks at the care of people with dementia from the viewpoint of the person with dementia. These results can assist with the development of person-centred care and is built on the belief that the social world that surrounds the person can have a positive or negative effect on well-being. DCM can help us to understand this world

more clearly and assist us to develop care that is person-centred

How do I access this service?

If you are a service provider interested in the training, CAMTED-OP can offer you evidence based input from trainers with extensive clinical experience. We are committed to delivering training in an interactive and informative style. Sessions can be held on-site with individual providers.

To request a brochure, book training or discuss requirements:

Please contact CAMTED-OP on

T: 01223 219666

E: camted-op1@cpft.nhs.uk

Base: Newtown Centre, Nursery Road, Huntingdon PE29 3RJ

(Monday to Friday, 9am-5pm daily excluding bank holidays)

There is no charge to care homes in the Cambridgeshire and Peterborough areas due to localised funding.

Crisis Resolution Home Treatment Team (CRHTT)

The Crisis Resolution Home Treatment Team for older adults provides crisis assessment and intensive treatment pathway for older people that includes:

- Crisis intervention / intensive support to prevent unnecessary hospital admissions
- Integrated services to promote recovery from mental illness, early intervention, intensive home treatment, therapy and support focussing on preventing avoidable admission to hospital and facilitating earlier discharge from mental health hospital beds.

Crisis Resolution and Home Treatment is a time-limited intervention (initially up to six weeks) and, depending upon clinical need, it may be necessary to refer patients to other pathway teams within Older People's Mental Health Services to ensure patients receive long-term treatment and therapy as appropriate. The teams operate from 8am-8pm, seven days a week, including bank holidays.

Referrals

People can refer themselves

Contact

North CRHTT

T 01733 776050

Monday to Sunday, 8am-8pm including bank holidays

South CRHTT

T 01223 726300

Monday to Sunday, 8am-8pm including bank holidays

Dementia Carers' Support Service

The Dementia Carers' Support Service (DCSS) provides support for carers of people with dementia throughout the journey of their caring role. This is achieved by linking current carers of people with dementia with those who already have first-hand carer experience. These experienced carers are a befriender or buddy and become Dementia Carers' Support Volunteer.

Referrals

Unfortunately, as we are a very small team, we are unable to accept referrals for East Cambs and Cambridge currently for 1:1 befriending whilst we aim to recruit more volunteers.

Contact

T 01353 652092

Dementia Intensive Support Team (DIST)

This team can be contacted via CRHTT:

Contact

North

T 01733 776050

South

T 01223 726300.

Referrals

Referrals into DIST are from Clinicians only.

Older People's Stepped Care Therapies Service

The Older People's Stepped Care Therapies Service provides psychological therapy, occupational and psychosocial therapies for people over the age of 65 in Cambridgeshire and Peterborough. Staff also offer advice, consultation, supervision, training and support in areas of their therapeutic expertise to staff within mental health and integrated older people's services including inpatient units. They work collaboratively with other mental health services within locality and neighbourhood teams.

The service is delivered either in clinics in one of the four locality bases (Cambridge – Brookfields Hospital; Huntingdon – Newtown Centre; Peterborough – Gloucester Centre; Fenland- Doddington Hospital, North Cambridgeshire or Princess of Wales hospitals) or in people's homes if they cannot access clinic based services.

The service provides therapies which aim to enhance the well-being and quality of life for service users and promote recovery. Both group and individual interventions are provided.

Contacts (Via OPAC Admin Hubs)

Cambridge 01954 712270 CPFTmhictcambs@cpft.nhs.uk

Fenland 01354 644233 CPFTmhictfens@cpft.nhs.uk

Huntingdon 01480 445178 CPFTmhicthunts@cpft.nhs.uk

Peterborough 01733 748380 CPFTmhictpboro@cpft.nhs.uk

Memory Clinic

The Memory Clinic offers people a thorough assessment, diagnosis, treatment and care plan for forms of dementia. The clinic will work with the service user, carer, GP and voluntary organisations to provide a range of interventions and carer education. The team comprises dementia care nurses, administrator, psychologist and a psychiatrist.

Referrals

Contact

T 01733 318480

Monday to Friday 9am-5pm weekdays only

Inpatient Wards Physical Health

Lord Byron A and B

Lord Byron Ward is a 20-bed inpatient facility, providing rehabilitation, long-term condition treatment/management for patients with complex needs.

The ward's multi-disciplinary team undertake a weekly ward round and hold multi-disciplinary meetings to identify agree and review patients' therapy and health goals.

Day-to-day medical cover is provided by local GPs. The medical team is complemented by a consultant geriatrician.

Lord Byron Ward provides a community inpatient service, which avoids unnecessary acute hospital admissions and supports facilitated transfer from acute hospitals.

Referrals

Directly to the Ward

Contact

Lord Byron A - 01223 603051/ 01223 219246

Lord Byron B - 01223 219252

Trafford Ward

Trafford ward is a 16-bed inpatient rehabilitation and three-bed palliative care ward at North Cambridgeshire Hospital, where patients are treated with dignity and respect and can expect to receive from staff high-quality patient-focused care in a friendly environment.

Our palliative care patients and their families are supported and cared for by ward nurses, specialist palliative nurses and consultant, who will assess, plan and implement care on an individual basis.

Our rehabilitation aim is to help patients achieve a level of independence prior to discharge, which is achieved by our team of doctors and nurses, physiotherapist, and occupational therapist, who work with the patient to help them achieve realistic goals.

Referrals

Referrals are accepted from health/social care professionals

Contact

T 01945 468777

Welney Ward

Welney Ward is a 15-bed physical health needs inpatient facility, providing rehabilitation to enable patients to return to their own homes. We also provide end-of-life care.

The facility is led by a ward manager, who is supported by ward sisters. The team also consists of staff nurses, health care

assistants, physiotherapist, occupational therapist, activities coordinator, housekeepers and a ward clerk. At all times there is a registered nurse available to discuss any plans or concerns you may have.

The multi-disciplinary team undertakes a weekly ward round and have meetings to discuss individual patients, their progress and their health goals. Medical cover is provided by local GPs complimented by two consultant geriatricians. Referrals are accepted from acute Trusts/community directly to the ward.

Referrals

Referrals are accepted from acute Trusts/community directly to the ward.

Contact

T 01353 772509

Intermediate Care Unit Peterborough

Intermediate care provides crisis intervention and short-term rehabilitation for people who are well enough to leave or avoid hospital but need extra support to do so.

The team comprises nurses, physiotherapists, occupational therapists, therapy support workers, social care workers and healthcare assistants.

The team will agree a tailored care plan with you to meet your specific needs.

Referrals

Referrals are accepted from acute Trusts/community directly to the ward.

Contact

T 01733 847125 (general enquiries)

Inpatient Wards Mental Health

Willow Ward

Willow Ward is a purpose built 18-bedded inpatient ward for men and women over the age of 65 who have an acute mental health illness such as depression, acute anxiety, psychosis or bi-polar disorder that requires hospital treatment. All of our bedrooms have en-suite facilities and during your stay we encourage you to bring a few personal items with you to help you feel at home to aid your recovery.

Referrals

All referrals to OPMH inpatient wards must come via the Crisis Resolution and Home Treatment teams.

Contact

T 01223 219500

Denbigh Ward

Denbigh Ward is a purpose-built assessment unit for people with dementia. There are many different staff on the ward with specialist skills such as occupational therapists, psychologists, nurses and doctors.

On Denbigh Ward our multi-disciplinary team uses a rehabilitation approach that guides the way we work with you. We concentrate on helping you to use your skills and to be involved in decisions about your care.

Referrals

All referrals to OPMH inpatient wards must come via the Crisis Resolution and Home Treatment teams.

Contact

T 01223 219571

Maple 1 and 2 Wards

Maple 1 and 2 wards are older people's acute admission wards based at The Cavell Centre, Peterborough, providing a person-centred assessment and treatment service for people aged over 65 years.

Treatment will include input from nurses, doctors,

occupational therapists, physiotherapists, discharge planning team, and other members of the multi-disciplinary team. Patients are encouraged to attend some of the therapy or recreational groups that take place on the ward each day.

Referrals

All referrals to OPMH inpatient wards must come via the Crisis Resolution and Home Treatment teams.

Contact

Maple 1 - 01733 776045

Maple 2 - 01733 776013

Urgent Care

Joint Emergency Teams (JET)

The Joint Emergency Team (JET) is an urgent two or four hour response service that supports people over the age of 65 or those with long-term conditions in their home environment when they become very unwell and need urgent care, but do not need to go to hospital.

The team will carry out an initial assessment and develop a care plan in liaison with the patient's GP or out-of-hours GP services.

Referrals

Referrals are only accepted from health professionals

Contact

T 0300 123 9996

Triage hours are 7am – 8pm, Monday – Sunday.

Clinical hours are 7:30am - 8pm Monday – Sunday.

Minor Injury Units (MIU)

We provide services at three minor injury units across Cambridgeshire, which aim to provide care and treatment for patients whose minor injuries or illness is not severe enough

to warrant a trip to accident and emergency.

Referrals

This is a walk-in service, so no appointment is necessary. Patients are generally seen in the order they arrive unless their needs are assessed as being clinically more urgent than other patients who are already waiting.

Opening Hours	Doddington	North Cams	Princess of Wales
Monday – Friday MIU	8:30am-6pm	8:30am-6pm	8:30am-6pm
Monday – Friday X-Ray support	MIU X-ray 9am to 5.45pm	MIU X-ray 9am to 4.45pm	MIU X-ray 9am to 4.45pm
Saturday MIU	9am - 5pm	Closed	8.30am - 6pm
Saturday X-Ray support	X-ray - 1pm - 4.45pm	No X-ray facilities	No X-ray facilities
Sunday MIU	9am - 5pm	Closed	8.30am - 6pm
Sunday X-Ray support	X-ray - 1pm - 4.45pm	No X-ray facilities	No X-ray facilities
Bank Holidays MIU	9am - 5pm Closed Christmas Day and New Years Day	Closed	8.30am - 6pm
Bank Holidays X-Ray support	X-ray - 1pm - 4.45pm Closed Christmas Day and New Years Day	No X-ray facilities	No X-ray facilities

**Contact
Doddington Hospital**

Benwick Road, Doddington, Cambs PE15 0UG
T 01354 637078

North Cambs Hospital

The Park, Wisbech, Cambs PE13 3AB
T 01945 468787

Princess of Wales Hospital

Lynn Road, Ely, Cambs CB6 1DN
T 01353 656675

Intermediate Care

Intermediate Care is a multidisciplinary service that helps people to be as independent as possible. It provides support and rehabilitation to people at risk of hospital admission or who have been in hospital. It aims to ensure people transfer from hospital to the community in a timely way and to prevent unnecessary admissions to hospitals and residential care.

In Cambridge City, East Cambridgeshire and Fenland, Huntingdon and Peterborough there are four parts to our Intermediate Care Services:

1. Community Rehabilitation
2. Inpatient Rehabilitation Units
3. Interim Care Home Beds
4. End of Life Care

Who works in the Intermediate Care Team?

A key person in the Intermediate Care Team is the Integrated Care Worker who can provide personal care and rehabilitation. The team can also include:

- Therapy assistants
- Social workers
- Occupational therapists
- Physiotherapists
- Personal carers from local care agencies

- GPs
- District nurses, community nurses and specialist nurses

Referrals

Referrals are accepted from healthcare professionals

Leaflet published: January 2019
Leaflet review date: October 2019

Patient Advice and Liaison Service

For information about CPFT services or to raise an issue, contact the Patient Advice and Liaison Service (PALS) on Freephone 0800 376 0775, or e-mail pals@cpft.nhs.uk

Out-of-hours service for CPFT mental health service users

Please call **NHS 111** for health advice and support.

If you require this information in another format such as braille, large print or another language, please let us know.

CPFT supports the **HeadtoToe Charity** – visit www.HeadToToeCharity.org for details on how you can help

