Useful contact details

Hospital at Home Service

Tel. 0781 172 1993 Open 24 hours, 7 days a week.

NHS24

Tel. 111 (please note that during your treatment with the Hospital at Home service you should use the above contact details, rather than NHS24)

NHS Western Isles switchboard:

Tel. 01851 704 704

At any time, if you experience any acute life-threatening emergency dial 999

We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- visit our website feedback section at: www.wihb.scot.nhs.uk or share your story at: www.careopinion.org.uk or 0800 122 31 35
- tel. 01851 708069 Monday-Friday between 9am-5.30pm.

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Written by: Hospital at Home Service.

Disclaimer

The content of this leaflet is intended to augment, not replace, information provided by your clinician. It is not intended nor implied to be a substitute for professional medical advice. Reading this information does not create or replace a doctor-patient relationship or consultation. If required, please contact your doctor or other health care provider to assist you to interpret any of this information, or in applying the information to your individual needs.





Bòrd SSN nan Eilean Siar NHS Western Isles

Hospital at Home

Hospital at Home Service

Patient Treatment Plan



Information for patients and carers

Patient Treatment Plan

| Based on your recent assessment you have been assessed as bein suitable to be cared for using the Hospital at Home service in your usual home setting. You will remain under the care of: |
|---|
| The Hospital at Home nurse will visit you for the following treatment* |
| |
| |

COVID-19 Screening

You will receive a telephone call on the morning of each visit to ask the following COVID-19 screening questions:

- Have you or anyone in your household had a new onset cough in the past seven days?
- Have you or anyone in your household had a fever in the past seven days?
- Are you or anyone in your household experiencing a loss of/ change in sense of smell or taste in the last seven days?
- Have you or anyone in your household had any new breathing problems in the last seven days?
- Have you or anyone in your household felt unwell with flu like symptoms?

If you develop any of the above symptoms, please contact us.

Patient questions

| Please service questi | e or your o | space to no care. The learns you ma answer, whe | Hospital at ay have, or | Home nurs | se will answ | er any |
|-----------------------------|-------------|---|----------------------------|-----------|--------------|--------|
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Discharge

Your care under the Hospital at Home Service will continue for as long as the Consultant feels necessary. Once they are happy for you to be discharged back to the care of your GP we will inform you and write to your GP.

Patient/Carer Survey

In order for us to improve and develop the service we would appreciate your feedback on your experience of the Hospital at Home Service. You can do this by returning the form provided to you by the Hospital at Home Service, or via the details overleaf (see We are listening section).

^{*} This treatment plan may change as the Consultant assess your notes each day.