



### Referral to Intermediate Care Hub (Nov. 2015)

The template can be found on the Integrated Care Gateway:

**YHCS Bradford Integrated Care Gateway**

Integrated Care Gateway | AJA Care Plan data | Guidance and Reference

### Integrated Care Gateway

**Avoiding Unplanned Admissions & Care Plan**

- YHCS Avoiding Unplanned Admissions ES

**Clinical Pathways**

- YHCS Integrated Care COPD pathway
- YHCS Integrated Care Dementia Pathway
- YHCS Integrated Care Clinical Resources
- YHCS Palliative Care Coordination System EPaCCS
- YHCS Integrated Care Self Care Resources
- YHCS Integrated Care Heart Failure Pathway

**Clinical Tools/Care Plans**

- DO NOT USE - TESTING**  
For all referrals to the virtual ward and intermediate care hub  
TESTING Intermediate Care Referral (BFD)
- YHCS Advance Care Planning
- YHCS Dementia - Resource Gateway

**Self Care/Third Sector**

- YHCS Voluntary Sector Organisations

**Management Tools**

- YHCS Supporting Docs/Management Tools BFD

In order to launch the STOPP protocol below your unit will need to first join the organisational group.

NB: A system administrator will need to do this and it only needs to be done ONCE per practice.

- Launch STOPP Protocol
- [Click for instructions to join](#)

A dedicated email address for queries or questions relating to Integrated Care in Bradford has now been set up.

- [Email for queries regarding integrated care](#)

Show recordings from other templates  
 Show empty recordings

Information | Print | Suspend | Ok | Cancel

Complete the template as fully as possible and send the e-referral, this must be followed up with a phone call:

**TESTING Intermediate Care Referral (BFD)**

Intermediate Care Referral

What does referrer think are patient's needs?

**If the patient is considered to be unwell, but not requiring an acute bed, the patient must have had a medical assessment by a GP/ANP. Please confirm below.**

Initial patient assessment

If you wish to have a clinical discussion about this patient, please contact 01274 365574 to speak to a clinician.

Comment on level of function (Social/Mobility)

Impaired cognition  Lives alone

Please identify any mobility issues using presets

Safeguarding concerns?(Add notes with pencil icon)

Any other hazards? (use presets)

**Now send the electronic referral (below).**

**This must be followed up with a phonecall to the Intermediate Care Hub on 01274 365140**

**What does referrer think are patient's needs?**

Date	Selection
No previous values	

Show recordings from other templates  
 Show empty recordings

Information | Print | Suspend | Ok | Cancel