

How do I refer to the CRRS?

Referrals via HERMES will be accepted from:

- Patient's GP, out of hours GP, PCS GP
- South East Coast Ambulance Service (paramedic practitioners and ambulance callers)
- A&E department
- AMU department
- IV therapy team
- Health care professionals
- Community nurse consultant
- Community matrons and nurses
- Social Care Access Point
- Martlets Hospice

HERMES can be contacted on 0300 130 3045, between 8am and 8pm

Direct referrals will be accepted from:

- RACOP
- Roving GP
- Hospital rapid discharge service
- HERMES
- Intermediate care service

Hours: 8am – 8pm
Referrals: (01273) 265926
Enquiries: (01273) 265925
Fax: (01273) 265924
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Feedback and comments to Dee Suter, Service Manager

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Community Rapid Response Service

Rapid Assessment Rapid Community Treatment

The Community Rapid Response Service (CRRS) is a new multi-disciplinary service which provides rapid assessment and care intervention for medically stable patients to support admission avoidance in their place of community residence which includes:

- Private residence
- Residential care
- Nursing home
- City council accommodation
- Hostel

The service is based in Brighton General Hospital and includes nurses, occupational therapists, physiotherapists, social workers, and rapid response assistants.

Sussex Community 
NHS Trust  Brighton and Hove



What does the CRRS do?

- **Initial assessment** within two hours of referral (8am - 8pm) seven days a week including bank holidays. **Referrals accepted until 6pm**
- **Diagnostics** such as bloods, ECG, doppler, observations (including sats)
- **Treatments** such as catheterisation
- **Monitoring** such as weight, fluid restriction/promotion, urine output, dietary intake, pain control
- **Physio/OT for** acute musculoskeletal problems, falls prevention, acute chest problems, mobility, confidence, washing and dressing, equipment provision
- **Home care support** including personal care, night sitting, medication support
- **Conditions supported** include: chest infections/UTIs, viral illnesses, diarrhoea and vomiting, dehydration/malnutrition, not coping at home, falls/trauma, unstable diabetes, end of life care
- **Access to services** for IV cannulation, night sitting services, care for confused people
- **Onward referral** to other services at 72 hours

Who will the CRRS see: referral criteria

- the patient must be a **Brighton and Hove resident**, or registered with a GP within the city
- the patient must be **18 years or over**
- the patient and/or the carer must **agree to and consent to the service** where this is possible
- the patient is **in the community, medically stable and does not require a hospital admission** and without intervention from CRRS the patient may be admitted to A&E/AMU **or** the patient is **in BSUH L5 and medically stable and can be safely discharged within 24 hours** from admission
- Patients in the community **must have been reviewed within the last 24 hours**, by a GP, roving GP or community nurse, where appropriate

Some examples of presenting problems:

- Patients who need **short term care/support/medical intervention in a crisis situation** until a longer term plan of care can be established
- Patients whose **main carer can no longer provide care to a highly dependent patient**, for whatever reason, until an assessment of need has been made and an appropriate placement or package of care has been actioned
- Patients with **alcohol/drug issues where their primary need is not alcohol/drug related** e.g. chest infection, fracture of upper limbs
- **Homeless patients** will be considered and assessed on a case by case basis

Who will the CRRS not see: exclusion criteria

- Patients who are **medically unstable**
- **Maternity, acute psychiatric** (to be considered in phase two), and **paediatric** patients cannot be referred
- Referrals to this team **will not be in addition to referrals to other services for intervention** e.g. intermediate care service, district nurses. However, the service may be working alongside other specialist services e.g. ICAST
- **BSUH L5 patients with length of stay exceeding one day** as per performance by results (PBR) tariff for determining short stay admissions. Patients with a length of stay from admission of two days or over will be managed as per mainstream discharge pathways