



**Wrightington, Wigan and
Leigh Teaching Hospitals**
NHS Foundation Trust

Transition to Community Beds- CNST: Stroke Pathway

Transition to Community Beds - Community Neuro and Stroke Team: Stroke Pathway

Patient Information

Community Neuro and Stroke Team

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Introduction

This information leaflet provides further detail on the transition from the acute stroke unit to a community bed. The information accompanies the Community Neuro and Stroke Team service leaflet.

Transfer to Community Beds

As part of your discharge planning from the Acute Stroke Unit, it may be in your best interests to move to a community bed at Richmond House (Mitchell Street, Leigh, WN7 4UH) for continued support with your care. This may be because you need additional support 24 hours a day with your care needs, or that you are not ready to be discharged into your home environment. The transfer of your care is to give you extra time for transition into the community setting and is not for further, more, 'intense therapy'.

On transfer from hospital to the Community Bed

The Community Stroke Team will be made aware of your discharge from the hospital, and the team will arrange to assess you on receipt of this referral. It is important to note that the Community Neuro and Stroke Team is not a rapid response team, and does not work evenings, weekends or bank holidays.

The nursing team looking after you at Richmond House are not part of the Community Neuro and Stroke Team, and they will complete their own assessments when you arrive on how to best support you.

The Community Neuro and Stroke Team will complete an assessment on the first visit to determine your current goals, and from this, will discuss further plans and therapy input.

An estimated date of discharge out of the community bed to the appropriate placement, e.g. your own home, will be set after your initial assessment; this can be up to 6 weeks, but will be individualised to meet your needs.

The Community Neuro Stroke Team will liaise with the nursing team at Richmond House throughout your stay and will start planning for discharge to the most appropriate place. Any meetings that need to be held will be arranged with you and your family/carers, and Social Services where appropriate.

The Community Neuro and Stroke Team are not based in Richmond House and will not visit every day. We do however plan appointments, and this can be communicated with your family.

Contact details

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