

Organisation: British Red Cross

Service: Independent Living Coordinator Scheme

Being discharged after a hospital stay can be a stressful experience, especially when individuals don't have the means to get home. If residents do require help returning home from hospital, one of three Independent Living Coordinators (ILC) will collect residents and ensure that they have everything they require for your first 24 to 72 hours back at home. They'll also provide practical and emotional support, whether that's stocking the fridge, or a just cup of tea and chat. ILC also work closely with Rapid Response team.

Support provided

An ILC will assess residents needs and help them decide what goals they want to achieve via the service. Support could include any of the following:

- transport home from hospital (ensuring that the resident can mobilise independently in and out of a standard vehicle)
- help with everyday tasks (for example, picking up prescriptions and shopping)
- weekly "check in and chat" calls
- rebuilding confidence
- help arranging for bills to be paid
- short-term use of a wheelchair and toilet aids.
- door-to-door transport for essential health-care journeys
- fitting of a key safe to support a discharge
- free Installation of pendant alarm & free 6-week trial
- onward referrals to other internal or external teams or VCS partner organisations

How to make a referral

Referrals can be made by staff working within health and social care within the hospital discharge arena. In order to proceed with a referral, please email the residents Fact Finding Assessment (FFA) to the relevant ILC or fill in the Red Cross referral form.

- **South** Shropshire - Danielle Blundred danielleblundred@redcross.org.uk 01743 457805
- **North** Shropshire - Kerry Bates - kerrybates@redcross.org.uk 01743 457811
- **Central** Shropshire – Jill Davies – jilld Davies@redcross.org.uk 01743 457807

Service: Home from Hospital

Longer term, British Red Cross work with people to build up the confidence to live independently and achieve their goals. This may be following a hospital discharge or admission avoidance and consists of up to 6 weeks of support which helps to ensure that residents are assisted in their recovery. The service also provides practical support, emotional support and transport to non-emergency medical appointments.

How to make a referral

Please email referrals to: supportshrop@redcross.org.uk

Telephone enquires can be made via: 01743 457810