

ACCORD AT HOME

INFORMATION FOR PATIENTS AND FAMILIES



0141 582 2007



INFO@ACCORD.ORG.UK

Charity No. SC013682





IMPORTANT CONTACT NUMBERS TO SUPPORT MY CARE

GP

District Nurse

ACCORD @HOME

ACCORD COMMUNITY NURSE

ACCORD Hospice

NHS 24

Next of kin

0141 581 2007 (Mon-Fri)

0141 581 2008 (Mon-Fri)

0141 581 2000

111



Useful links
ACCORD HOSPICE
www.accordhospice.org.uk
SCOTTISH SOCIAL SERVICES COUNCIL
www.sssc.uk.com
Care Inspectorate

www.careinspectorate.com

What is ACCORD at Home?

We are here to provide additional support for people living with a life limiting illness and those approaching the end of their lives. The service helps people achieve their preferred place of care and death, for as long as possible, often at short notice.

Once we have received a referral for ACCORD@Home a Nurse Specialist will contact you, your family, or your carer to plan an initial home visit, to assess your care requirements.

Your care needs will be undertaken by our team of nursing assistants, at times working collaboratively with other social care providers.

The areas of care that ACCORD@Home cover are:

- Crisis Intervention When your symptoms are affecting your physical abilities.
- End of Life Care to support patients and families when they are dying.
- Supported Discharge to allow a prompt discharge home from the hospice or hospital.

"The girls became part of our family, sharing our good times and bad, with total respect with what we were going through".

Patients Family

WHAT CAN I EXPECT FROM ACCORD?

- We will work with you to try and achieve your goals.
- We will treat everyone with the respect and dignity they deserve.
- We will perform the care requirements you highlighted during your assessment.
- Any changes to care will be communicated accurately and discussed with the patient and family members prior to initiating.
- We will check with family members regularly about changes in the patients condition.
- We regularly ask the family or carer how they are and how they are coping, have their wishes or needs changed?



WHAT WILL ACCORD REQUIRE IN MY HOUSE?

- Access to a phone if required
- Toilet and hand wash facilities.
- An area to store personal care essentials (e.g. wipes etc)
- A bin to dispose of used care essentials.
- We would ask that there is no smoking in the house at the time of the visit.
- We would also ask that any pets are under control or out of the room during our visits.

THE TEAM



Alison - Team Lead



Hilary- HCA



Ann-Marie - HCA



Kirsty-CNS



Nichola - HCA

Nicky-HCA



Alison-HCA



Without the ACCORD at home team, we would never have coped on our own.

Name:		known as	
About my life	and who is impor	tant to me	
The reason(s)	I need support is		
Communication	on, hearing and vis	ion	
Tunnautant th	ings I pand to know		
Important th	ings I need to know	v	
My daily rou	tine:		
Morning	Afternoon	Evening	
My goals:			

ACCORD @HOME Risk Assesment

MOBILITY / FALLS / EQUIPMENT:
SKIN INTEGRITY:
SMOKING:
PETS:
ENIVIDOMENTAL DIOVO
ENVIROMENTAL RISKS:
OTHER CONCERNS / SAFETY:

ACCORD @HOME Summary

	Yes	No	N/A
Stairs to house			-
Key safe			
Sliding Sheet			
Alert Alarm			
Patient Nursed in Bed			
Pressure Relieving Mattress			
Patient Assisted with Wash			
Patient Assisted with Shower			
Patient Assisted with Bed Bath			
Emollients Applied			
Oral Care			
Dentures Worn			
Catheter Care – Bag Change (7 Days)			
Bowels Active			
Urinary Incontinence			
Continence Pads Worn (Skin-Intact, Red, Dressing)			
Clothing – Night Clothing Changed			
Bedding Changed			
Position Changed			
Hearing Aids Worn			
Hair Care			
Was Patient able to participate in care?			

IF SO, WHAT AREAS OF CARE?		

ANY ADDITIONAL COMMENTS:		

Multidisciplinary notes

Date & Time	Type of Contact	Notes	Signature

Multidisciplinary notes

Date & Time	Type of Contact	Notes	Signature

FEEDBACK ABOUT ACCORD AT HOME

- Following each visit the team will report back any problems to our CNS or team lead which can be highlighted and acted upon.
- Family will be contacted weekly by ACCORD to give you the opportunity to feedback and plan further support.
- Once you no longer require the A@H service, an evaluation form will be sent out to you or your Next of Kin to provide feedback on our service and how it can be improved.







WHAT IF I HAVE A PROBLEM OR COMPLAINT?

In the first instance please speak with the person who is providing the care to you. If this does not resolve the problem please speak with the Team Lead 0141 582 2007

If you are not satisfied with the response, please discuss your concerns with Clinical Services Manager

Brian Hunter 0141 581 2000

ACCORD @Home is regulated by the Care Inspectorate: 03456009527 or email concerns@careinspectorate.gov.scot

