

**Care Navigation Criteria**

*All patients/carers referred into the service undergo an initial holistic assessment*

* High intensity users of acute services and do not meet the criteria for Social care intervention.
* Where there are two or more health/social Care professionals involved which results in the need to coordinate those services, this includes those with complex needs including end of life care.
* Patients who self-neglect, at risk of neglect and are hard to engage e.g.: resistant to service provision and may have a cognitive impairment with no family support.
* Patients who could be taught how to self-manage
* Patients with social issues that impact on their health conditions or anxiety levels which could lead to exacerbations of illness. Eg environmental or housing issues
* Frequent visits to the GP and/or frequent requests for GP home visits.
* Frequent DNAs both GP and hospital
* Patients/Carers who may experience a crisis and may benefit from strategies to reduce risk and improve health awareness
* Significant impairment in activities of daily living, particularly where there are no support systems in place.

*The Care Navigation team, where possible will undertake*

*a face to face visit after a Covid-19 risk assessment is undertaken over the phone. On occasions and if appropriate, video conferencing can be undertaken.*

**Exclusion Criteria**

* Alcohol or drug dependency - *unless they are willing to engage and accept support alongside a rehabilitation programme.* We can look at individual cases.
* Serious mental health problems and currently open to the Community Mental Health Team.