

This is Bob, Bob is currently in Hospital but is well enough to go home with a bit of extra help



On Monday morning Bob is referred to the Home from Hospital Service by staff at the hospital

As the referral is made before 2pm Bob will be visited or contacted by a member of the Home from Hospital Team today

At this meeting a plan is developed outlining the support Bob needs to get home and return to living independently
The team also take the time to understand how Bob is feeling and use a tool to measure his personal wellbeing

With this plan in place Bob is able to return home, he can receive support from Home from Hospital for up to 6 weeks if he needs it

After 6 weeks, and following the final visit the Home from Hospital Team conduct an End of Service Evaluation to make sure Bob's outcomes have been met. They also use the wellbeing tool again to understand where Bob's life has improved and to identify any ongoing requirements and how these can be met



12 weeks after Bob left hospital the Home from Hospital Team get in touch to complete a Wellbeing Check—this ensures Bob is doing ok and allows the team to gather feedback on the service