





Multi-Agency Care and Coordination Team (MACC)

Client Information Leaflet

The Multi-Agency Care and Coordination Team works in partnership with your GP to give co-ordinated care and support.

Date of assessment by MACC Team:

Assessor(s):

Care Co-ordinator name:

Contact us

2 020 3074 2958

(Monday to Friday, 9am to 5pm) Outside these times, follow your care plan or refer to the '**Choose the right treatment**' leaflet to choose the NHS service that can best treat your symptoms.

We bring together Community Matrons, Clinical Pharmacists, Occupational Therapists, Social Workers, Community Mental Health Nurse, Physiotherapists and Navigators with your GP to help you maintain health, wellbeing and independence.







We provide care to

- People aged 18 and over
- Who live in Haringey
- Who have a long-term condition or who are frail or elderly or who are at risk of an unplanned hospital admission

A long-term condition is a health condition that can be managed at home with therapy and/or medication.

What we will do for you

- We will work closely with your GP to help you get the care you need.
- We will review your health condition, assess your needs, agree with you a health action plan and help you care for yourself.
- We will provide care to you wherever you live in Haringey.
- We will ensure you get the health services you need, such as education and advice, medicines review and continence services. For some services you will need to go to your GP surgery if you can.
- We may discuss your health or care requirements with other professionals, including specialist teams, to ensure you get the right care from the right people with the right skills.







Meet the team

Your care will be provided by one, or more of the following professionals, <u>depending on your needs</u>:

A **community matron** will support you with your healthcare needs as well as provide you with education and advice on managing your health.

A **clinical pharmacist** will review your medication and where necessary, visit you at home to discuss your medicines. They will assess how you take your medicines and perhaps make recommendations for your GP to consider.

A **physiotherapist** will provide physiotherapy assessment, advice and treatment in your home to help you remain as independent as possible. They may also advise your carers.

A **community mental health nurse** will provide help and support to you or your carers if required.

An **occupational therapist** will assess and support you to participate in activities of daily living, personal and self-care, leisure activities and if you decide a return to work or volunteering. They may advise your family and carers on manual handling and equipment.

A **social worker** will assess, review and provide help to you or your family to improve your wellbeing.







A **dementia navigator** can help you if you have a diagnosis of dementia. They can support with advice and education and will help with practical activities.

A **care navigator** will support you to reduce your risks of crises. They will ensure best use of community recourses and partnerships to help you achieve set goals.

Your **GP** will provide medical care and work with the rest of the team to support you.

One of these professionals will be your care co-ordinator. They will help you and your carers understand the services available and how it all works. They will keep in contact with you and ensure good communication between the different services involved.

Patient advice and liaison service (PALS) If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or <u>whh-tr.PALS@nhs.net</u>

If you need a large print, audio or translated copy of this leaflet please email <u>whh-tr.patient-information@nhs.net</u>. We will try our best to meet your needs.

Twitter.com/WhitHealth Facebook.com/WhittingtonHealth

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MACC Action Plan

| Priority area and stage/step | Goal | Action | By who? | By when? (date) |
|---------------------------------|------|--------|---------|--------------------|
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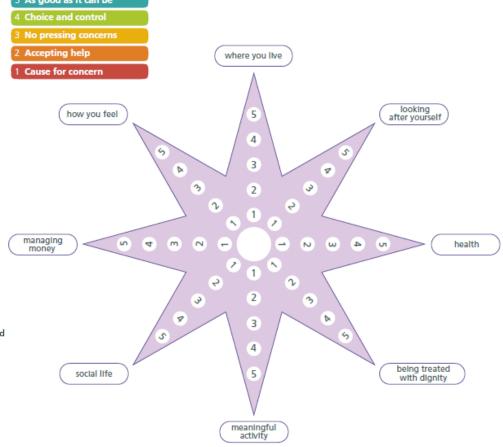
Independent Living Star[®] Scales 5 As good as it can be 4 Choice and control No pressing concerns Accepting help 1 Where you live where you live Security, warmth, location, adaptations and support Cause for concern 2 Looking after yourself how you feel Shopping, cooking, getting up, getting dressed and getting around 3 Health 4 5 Treatment and medication, nutrition and exercise, lifestyle and sleep 3 A **4 Being treated with dignity** 3 2 Respect and dignity from your carer(s) r Ş

- **5 Meaningful activity** Interests, hobbies, work, learning, enjoyment and achievement
- - 6 Social life Being in touch with people, getting out and about, connected to the community

7 Managing money Being on top of your finances, accessing money, spending, benefits, debt and planning ahead

8 How you feel

Motivation and resilience, mental health, depression or anxiety, positivity



itcomes