

## Who do we work with?

- We work closely with GPs
- community services
- local general hospitals

We also have close links with

- the memory service
- voluntary agencies such as the Alzheimer's Society.

## Contact us

North Somerset CIT Team  
Windmill House  
Windmill Road  
Clevedon  
BS21 6UJ  
**01275 335300**

For more information on Trust services, visit  
[www.awp.nhs.uk](http://www.awp.nhs.uk)

## PALS

To make a comment, raise a concern or make a complaint, please contact the Trust's Patient Advice and Liaison Service (PALS)

Tel: 01225 362900  
Freephone: 0800 073 1778  
Email: [awp.PALS@nhs.net](mailto:awp.PALS@nhs.net)

## Other formats and languages

If you need this information in other formats (such as large print, Braille) or in another language, please call the PALS number.

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Avon and Wiltshire  
Mental Health Partnership  
NHS Trust



## Complex Intervention Team

**North Somerset**

**Information for service users  
and carers**

you matter, we care

## **What does the complex intervention team do?**

We are a health and social care team who provide specialist treatment for people with severe and enduring mental health difficulties and those with dementia.

The team is made up of doctors, community mental health nurses, social workers and support workers.

The people we work with are usually over the age of 65, but we will work with anyone whose needs are best met by our service.

We can also refer you to specialist psychologists, occupational therapists and physiotherapists.

## **How do people get to use our services?**

We receive our referrals from GPs, community services and local general hospitals (the Primary Care Liaison Team).

## **What will happen next?**

We will assess the service user's mental health needs.

## **What service do we offer?**

We will then draw up a care plan with the service user and/or carer to help meet those needs and to ensure the best quality of life.

This may include:

- checking the service user's mental health and reviewing how well the treatment plan is working
- referring the service user or carer to a 'care navigator' who can signpost people who are paying for their care to appropriate services
- buying care from the local authority such as care and support at home or if needed, residential and nursing care

and

- organising inpatient care if needed.
- providing support for carers and give information on support for carers and families.

**Everyone receiving our service will have a care co-ordinator who is responsible for co-ordinating their care and treatment.**