healthwatch Kent

Healthwatch Kent - July 2018
Discharge from Hospital in East Kent

Foreword

It won't surprise you that being discharged from hospital is one of the top issues people contact us about.

Since 2016 we have been actively gathering feedback from members of the public about their experience of being discharged from all over Kent.

We've already published reports on peoples' experiences in both North and West Kent and have been working with the organisations involved to improve peoples' experience. For example, Darent Valley Hospital now have an information booklet for patients which clearly explains how they will be discharged from hospital. In West Kent, Tunbridge Wells Hospital have increased the amount of physiotherapy offered to patients to ensure their rehabilitation starts as early as possible. These are just two examples of how we have used peoples' experiences to help improve services for patients.

We've heard from over 190 patients, carers and family members in East Kent over 6 months. We've also heard from staff and professionals. That includes visits to all 3 main East Kent Hospitals sites to talk to both patients and staff. We've also visited Integrated Care centres talking to patients. We've spoken with District Nurses and GP surgeries. We've also heard from Carers, families and voluntary organisations about their views too.

Everything we have heard is detailed in this report. If you want to know more then do please get in touch.

We have shared all our learnings with the many organisations who are involved in supporting people to be discharged from hospital. That list includes Kent County Council, East Kent Hospitals, G4S Patient Transport, Kent Community Health Trust, Care Homes, GP practices and many voluntary organisations. We will publish an impact report in 6 months to chart our progress.

Do keep sharing your experience of being discharged from any hospital in Kent. We work closely with all the hospitals and we will anonymise and share your story directly with them so you can help to improve the service for others.

You can contact us in confidence at any time on 0808 801 0102, email info@healthwatchkent.co.uk or text 07525 861 639.

Steve Inett
Chief Executive, Healthwatch Kent

Executive Summary

Our Aim

We wanted to understand the issues that affects peoples' experience of being discharged from hospital in East Kent.

We have already learnt a lot from our work looking at discharge in the rest of Kent, so we wanted to use our experience to reach even more people in East Kent.

Through this we want to identify and unravel the issues that may prevent people from having a 'good' discharge. We're also looking for good practice and innovative solutions so that we can highlight and promote it to other areas.

How did we go about it?

In total, we spoke to over 220 people including:

- Patients, carers and families
- Practice Managers
- District Nurses
- Care Home Managers
- Kent County Council
- Hospital staff
- Patient Transport staff from G4S
- Community staff
- Carers organisations

What did we see? What did people tell us?

It is important to note that this report details what we saw and heard during our conversations with patients and what patients chose to share with us during these visits and through our surveys. This is a snapshot and is not intended to be a detailed research exercise.

Patients shared many positives

- The majority of people made reference to how kind and caring staff were. In some cases these comments were made in spite of a bad discharge experience.

> "Brilliant care; dreadful experience. But you can't choose who you're in a room with, I accept that"

- Some people told us that staff had communicated well with them and updated them at every part of their journey.

> "I was kept up to date with any changes to the plans. I was given a contact number for any questions or queries after leaving hospital

- Most of the patients we spoke to face to face felt involved in and listened with decisions about their discharge.

> "Friendly and flexible approach from midwives enabled us to leave hospital on the same day baby was born - arranging any necessary checks for us to attend the following day. We were grateful for their sensible approach".

What did we see? What did people tell us? Continued

- We heard stories about smooth discharges with preparations being made the day before, doctor sign off happening at breakfast and the patient leaving before lunch time.

"It was very well organised and I was well cared for"

- We heard lots of cases where community support was in place and had worked well.

"Follow up midwife appointments and with health visitor"

"District Nurse made home visit to remove staples and check on wound"

- We saw a discharge checklist at William Harvey Hospital being used to make sure patients had everything they needed. Twice we saw the checklist pick up possible gaps in the discharge arrangements.
- Patients appreciated being able to talk plans over with staff and in several cases this made patients feel much more confident and reassured about going home and knew what to expect.
- Discharge staff at Kent & Canterbury use any free time each morning to help patients get washed and dressed ready to come to the discharge lounge as early as possible.
- We heard examples of patients having a follow up appointment booked before they left hospital.

What did we see? What did people tell us? Continued

Positives from Carers and Family Members

- One carer told us that all the necessary equipment arrived at their home before her husband went in for his operation.

- We heard some instances of carers being involved and listened to throughout their loved ones discharge. This included planning a date to leave right through to inputting into the care and support in place when they left hospital.

> "Pleased sons have sat around a table with staff twice to discuss plans"
>
> "All well organised, kept family and patient updated at all times"

- 79% of Carers and families felt that they ended up getting the support that they were promised

> "We had equipment in place at home, and carers visits arranged - this had been ready for almost a week"

- We heard several examples of the staff at the hospital checking to see what support a Carer was receiving.

> "The physiotherapist called me a day before and checked I was able to look after him and asked if I knew about carers support. I said I was known as his carer and I was known to carers support"

What did we see? What did people tell us? Continued

The positives from professionals

- We heard that some hospital wards provide good discharge information. Surgical Wards at William Harvey were mentioned as having significantly improved the information they provide.
- District Nurses thought that discharges to Care Homes generally went well.
- We saw Patient transport staff at William Harvey Hospital regularly visiting the wards talking to patients and staff about upcoming discharges and the transportation needs.

What did we see? What did people tell us? Continued

The challenges from patients

- 25% of patients told us that they were unclear what care or support they would receive after being discharged. However, some people we spoke to had been told but had forgotten.

- Some patients didn't have a follow up appointment booked before they left hospital. One patient was still waiting after 6 months for an appointment which should have taken place 6 weeks after discharge.

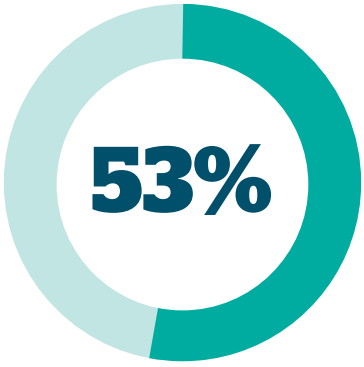
- We heard about confusion between staff teams where people assumed someone else had arranged medication or transport leading to a delay. Staff and some patients felt this happened less when there was a single person on the ward responsible for discharge.

- We heard about the need for a sick note to be provided in hospital rather than the patient having to use up a GP appointment.

- We heard from people about confusion caused by Hilton Nurses. Families were told that 'Hilton Nurses' would be looking after the patient at home but when they were discharged it became apparent that Hilton Nurses are Carers and not trained nurses. This confusion is extended when Hilton Nurses arrive in nurses uniform which is the same colour as a District Nurse uniform. In the main the feedback we heard about the support Hilton provided was very positive, but sometimes people were expecting more.

What did we see? What did people tell us? Continued

The challenges from patients

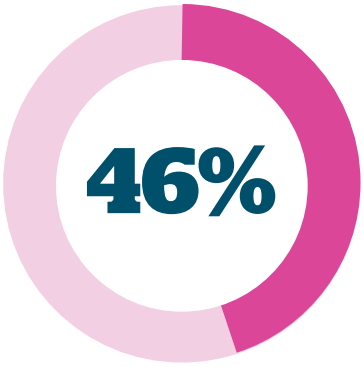


53% of patients had their discharge delayed on the day they were due to leave.

"I was told I could go after physio at 1pm but did not leave till near 6pm as drugs, care package and transport were not arranged"

"I was told I could go home in the morning but the doctors didn't do the paperwork until the evening of that day. It was very frustrating as I had someone come to pick me up who had to sit and wait for hours"

"Release notes not available and meds' late. Waited 6 hours in one room"

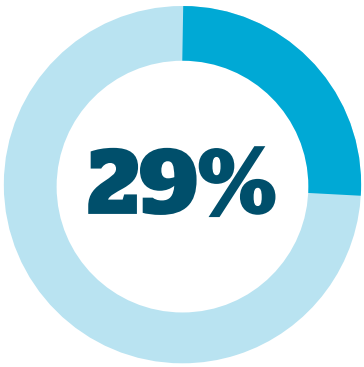


46% of patients could recall being given an estimated discharge date. A further 5% were told in advance but the same day.

"Within 5 minutes of being told, I was out!"

"It wasn't even enough warning that I was going to be discharged so I had to go home in my pyjamas. I know they are busy but there was no dignity for me."

What did we see? What did people tell us? Continued



29% of patients told us they didn't get the care and support that they were promised

"We felt it was too rushed, services that I needed weren't in place"

"I was told I would be contacted by the physio within two weeks of discharge. This didn't happen until I chased it"

What did we see? What did people tell us? Continued

The challenges from patients

Patients also shared examples of being moved from one hospital to another with no prior explanation.

7 out of the 16 people we spoke to who had been moved to Kent and Canterbury from either QEQM or William Harvey told us they had been given little or no warning.

"I don't know why I am waiting and when I may be discharged? I have been moved 4 times already but
no-one tells me why or where I am going"

Patients mentioned that sometimes the people providing this follow up care and support didn't have detailed information about their stay in hospital.

"I was surprised that in these days of computers etc, my surgery did not receive any information that I was in hospital or had been released. I had to copy my release details for the Dr. as he didnt have any idea how ill I had been"

"Physio given no information about my fracture other than which wrist it was. I had to provide details of how long ago, what was done, etc. I also had to provide health summary and medication list"

What did we see? What did people tell us? Continued

Sometimes people got the support they needed but only because they had actively ensured it happened.

"I had to arrange for the nurses to come and see me"

"They are excellent once the referral in place"

What did we see? What did people tell us? Continued

The challenges for family members and carers.

The most common disappointment we heard from family members/carers was not being involved in the discharge of their loved one. 56% of families and carers we spoke to didn't feel they had been involved in discussions about discharge of the patient.

- We heard stories about a patient arriving at home but the carer had not been informed and so was not ready.
- Carers also mentioned having to repeat their story many times to different professionals.
- We heard stories about patients being put to bed at 5pm by care staff from Hilton and Kent Enablement at Home service. They then didn't return until 11am to help get the patient out of bed. During that time, the patient may have soiled themselves or needed support from a family member. Because the family member has intervened, the care agency reassesses the patient and withdraws the care package.

What did we see? What did people tell us? Continued

Sometimes the support people got when they went home didn't work with their routine.

"Some equipment was provided but other equipment we had to buy ourselves. Carers came to get me washed and dressed but my wife has had to deal with my medication, toileting and feeding tubes."

"Two days before my discharge the Care plan was still not in place. A Physio has been requested but there is a long waiting list so not in place. District nurses had not received the referral so my leg ulcer was left for 4 days with no dressings. The equipment I needed hadn't arrived either. My family had to do the dressings and arrange extra care."

"The care calls don't really fit in with our routine. The morning calls are quite late and evening calls are often too early, lunch and tea calls are at the wrong time"

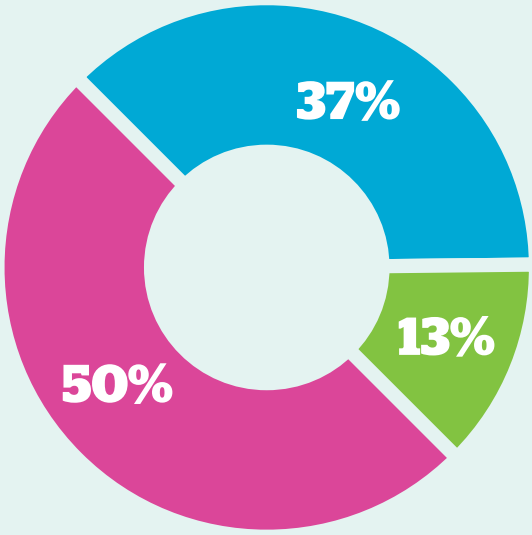
"On his discharge home Kent Enablement at Home took over. Their standard varied. Unfortunately, their untimed service was extremely stressful as my husband's feeding and medication regime didn't fit easily with not knowing the time of their visit. However, they proved to be the all important key to other services such as an OT assessment and Lifeline".

What did we see? What did people tell us? Continued

"Staff told me Hilton Nurses would provide nursing care for my mother. But when we got home we realised they are not nurses."

The son is the sole carer for his Mum. No-one talked to him about Carers support or involved him in the discharge plans. He felt staff were fantastic but Doctors talked to his Mum without him and she is deaf and confused so can't remember what they told her or what the plan is.

He is very anxious about what happens when she is discharged today.



13% of people we spoke to were discharged in the morning, **50%** in the afternoon and **37%** in the evening.

We understand that work has taken place since we visited to increase the number of people being discharged before 12pm.

What did we see? What did people tell us? Continued

The challenges for professionals

- Some Care Homes don't accept patients after 5pm even if they had been assessed. We heard about one care home which wouldn't accept people after 2:30pm
- Some Care Home managers felt they didn't have enough time to assess patients to see if they were fit to come to their home. They felt pressurised by hospitals to take patients quickly
- We heard on several occasions that staff such as GPs, District Nurses and Physiotherapists didn't have details about the patients' hospital stay. This meant that they were treating the patient 'blind'.
- Staff felt that if hospitals and care homes liaised better together they could ensure patients had a better experience
- Transport staff told us about the challenges caused when patients are booked as ready to leave but the paperwork or medication isn't ready causing a backlog for others
- Staff told us that patients were regularly readmitted because paid for carers were not at the patients home to greet them
- Patients are regularly discharged without the correct medication meaning District Nurses and GPs waste precious time sorting medication out. We understand that electronic permission to give forms may help address some of this issue.
- Professionals shared patients' concerns about the confusion caused by Hilton Nurses. District Nurses reported having to support confused patients and families who had presumed wrongly that Hilton Nurses could provide nursing care.
- Community staff felt that patients who are being discharged from private hospitals such as KIMS Hospital or the Spire Hospital, can sometimes not have a good discharge because these hospitals don't work closely with community services and don't fully understand what support they can provide to patients when they return home.

What did we see? What did people tell us? Continued

- District Nurses told us that they often find patients who are not able to look after themselves at home or who have been sent home with no access to food, water or heating. District Nurses felt that on some occasions, the discharge assessment is not adequate.

- District Nurses told us that patients who need urgent support from social services will wait a minimum of 4 days for a response. In the meantime, GPs and especially District Nurses are expected to support that patient.

- Carer organisations told us that they rarely get referrals from families who are funding their own care. They raised concerns with us that Kent County Council may not be offering carer assessments to these patients and their carers.

- Staff reported their concerns about patients who need Continuing Healthcare particularly for those patients who are near the end of their life. Although the paperwork for these fast track patients is completed quickly it can take several weeks for a carer to be found. Staff felt that some patients are not able to die in their preferred place as a result.

- Staff from West View told us about patients being patients arriving with the wrong information or medication.

Patient came home from hospital. She has Motor Neurone Disease. The equipment she needed, including a bed, took over the lounge. The patient is now isolated in her own home as her husband can't sit down in the same room as her. He is equally isolated as he has to sit in his bedroom.

Our recommendations

- Build on the checklist used at the William Harvey to ensure patients are ready to be discharged. Roll this out to other hospitals if something doesn't already exist. Things like "does this person have food at home" and "will community support be able to get in" could be added.

- Patients should be clearly informed about the services that Hilton Nurses can provide. Hilton Nursing need to make sure they have given clear information about their role to discharge staff within the hospital. Hospital staff need to make sure patients, carers and families are clear about what Hilton staff can and can't do.

- Identify which wards operate smooth discharges and apply the processes and learnings to other wards and sites.

- Hospital staff, District Nurses and GPs to work together to explore how discharge information can be provided timely and accurately to ensure patients get the best care post discharge.

- Discharge teams, and where possible ward staff, should spend time with District Nurses to better understand how each team works and how they could work better together to support patients. Healthwatch could facilitate a session to support this.

- The Hospital Trust should continue to build on the support being offered to unpaid carers. Make sure staff are aware of the carers support co-ordinator within the Integrated Discharge team and when appropriate, contact is made with them as early as possible.

- Organise a facilitated session with Care Home Managers and Hospital staff to understand how both could work more closely together. Healthwatch could facilitate this discussion.

Our recommendations Continued

- Ensure Estimated Discharge Dates are being given to patients as early as possible to give the patient, families and carers something to work towards. It seemed where patients were given these they felt more involved and listened to.
- Explore if an itinerary of follow up care can be given to the patient when they leave so they have a reminder of what to expect and so do their family members.
- Ensure pharmacy are given as much warning as possible to prepare medication for patients to reduce the amount this causes a delay in patients leaving hospital on the day of their discharge.
- Work to increase the number of patients who are discharged in the morning. This should also help patient transport deal with the demand on their service.
- Make sure discharge lounges are as welcoming and comfortable as possible especially if patients may spend several hours here.
- Ensure patients are clearly communicated to and ensure they understand the information (find alternative ways to communicate and include the families/carers too).

Our recommendations have been shared with all the organisations involved. We will continue to work with these organisations to make improvements. An Impact report detailing our progress will be published within 6 months.

How did we go about it?

We carried out 9 visits to 6 locations from October 2017 to April 2018. Visits were organised with the providers input.

We visited:

- William Harvey Hospital in Ashford
- Queen Elizabeth the Queen Mother Hospital in Margate (QEQM)
- Kent & Canterbury Hospital
- Broadmeadow
- West View
- Westbrook

During those visits we spoke to **83 patients** and several members of staff

109 people completed our online survey to share their experiences of their discharge process which ran from September 2017- April 2018.

Carers Support shared our questionnaires with **500 carers**.

We met with District Nurses and Practice Managers to gather their feedback as well as commissioners

We also met with Carer organisations and other voluntary groups to gather feedback.

Healthwatch Kent

Healthwatch Kent is the independent voice for local people in Kent.

We gather and represent people's views about any health and social care service in Kent.

Our role is to understand what matters most to people and to use that information to influence providers and commissioners to change the way services are designed and developed.

Our FREE Information and Signposting service can help you navigate Kent's complicated health and social care system to ensure you can find and access the services that are available for you. Call us on 0808 801 0102 or email info@healthwatchkent.co.uk

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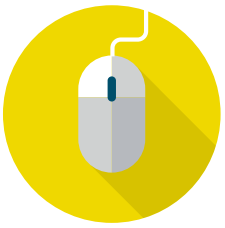
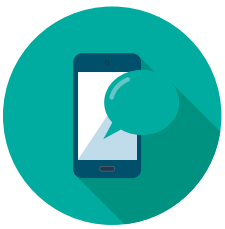


Online:
www.healthwatchkent.co.uk

By Post: Write to us or fill in and send a Speak out form. **Freepost RTLG-UBZB-JUZA**
Healthwatch Kent, Seabrooke House, Church Rd, Ashford TN23 1RD

Face to Face:
Call 0808 801 01 02 to arrange a visit



By Text: Text us on **07525 861 639**.
By texting 'NEED BSL', Healthwatch's British Sign Language interpreter will make contact and arrange a time to meet face to face.