



# A review of Discharge in Bedford Borough

Your health and social care champion

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# Foreword

Dear Reader,

Healthwatch Bedford Borough (HBB) is the local health champion working to improve health and social care services in Bedford Borough. We are independent of the NHS and social care services, but work closely with them to improve service to the public.

This Discharge study is really the first major piece of research work undertaken by the HBB Enter and View (E&V) team. In addition to the circulation, completion and analysis of numerous Discharge Questionnaires, in the main the volunteers who make up the E&V team have spent a considerable amount of time visiting local care homes, the YMCA, The Prebend Street Day Centre and other organisations to find out how discharge processes have been working.

I would like to take this opportunity of thanking the members of the E&V team for their sterling work which has contributed to this study.

I do hope that you will find the findings from this study to be of interest and value to you.

**Anne Bustin,**  
Healthwatch Bedford Borough Chair

This document reflects six months work speaking to people about their experiences of Discharge in Bedford Borough. It has been both interesting and heartening that so many people have been prepared to share their views, thoughts and opinions with us. The team and I hope that the findings in this report will help inform and develop high quality health care for the residents of Bedford Borough. Can I thank the people who have taken time to be part of this project and hope that you will feel that it was good use of your time.

**Linda Hiscott,**  
Healthwatch Bedford Borough Director and Enter & View lead

# Acknowledgements

Between the months of May and October 2014 Healthwatch Bedford Borough carried out a survey of the discharge process in Bedford Borough. This report and the findings within it reflect the views of the people and organisations we consulted.

This survey would have not been possible without the assistance from our volunteers. Healthwatch Bedford Borough would like to take this opportunity to formally thank them for all their support and time. We would also like to thank other organisations for their assistance during this survey.

## Volunteers

Gerry Quinn  
Linda Hiscott  
Margaret Abington

Simran Khinder  
Terry Darlow

## Organisations

Age UK  
Airedale Nursing Home Ltd.  
Bedford Advice Network  
Bedford Borough Council  
Bedford Citizens Housing Association Ltd.  
Bedford Concern for the Homeless and Rootless (BECHAR)  
Bedford Hospital NHS Trust  
Bedford Mental Health IIDEAA  
BEDOC  
British Red Cross  
CALs  
Carers in Bedfordshire  
Kings Arms Project  
Mature Citizens Action Group  
Men in Sheds Bedford  
MIND BLMK  
NOAH Enterprise  
Orbit Heart of England  
POHWER  
SEPT  
The Civil Service Pensioners'  
Alliance  
YMCA Bedfordshire

Thank you to all staff that have assisted and supported us during our visits.

“I was very pleased with all my treatment and all the kindness and support from all the nurses.”

# Executive Summary

Discharge or care transfer is an essential part of care management in any setting. We know this is a complicated issue. That's why we wanted to hear from as many different people who have experience of discharge from health care, in whatever way.

We wanted to hear it all, good and bad to know what it was like for people who have been discharged, for people who work in these settings, and the impact discharge has had on family or friends.

Our aim was to gather patient views and use the evidence to share learning and good practice across organisations and to identify areas where things could be improved.

## As part of the review we:

- Conducted 5 Enter and View visits.
- Listened to the experiences and views of residents of Bedford Borough at 4 focus groups.
- Evaluated 70 questionnaires.
- Undertook in excess of 20 meetings and informal visits to various organisations and individuals that offer support during and/or after the discharge process.

## Observations:

As well as praising staff for their care, people have told us that 75% of discharge delays were caused by medication not being ready at the time of discharge.

Communication between teams and organisations plays a crucial role and regular, face to face meetings between and within organisations was what worked best. This, however should be built on. Many organisations, such as those providing support for the homeless, were not always included in the discharge process. On the other hand, the complex discharge team at Bedford Hospital has made significant improvements to patients' journeys.

The overall experience of discharge from Bedford Hospital was good. 81% of patients would recommend Bedford Hospital to their family and friends.

Some improvements, resulting from our Enter and View visits have already been made. For example, in the discharge lounge in Bedford Hospital, up to date magazines and signage have been provided improving patients' experience there.

While there are many positives in this review, we were also made aware of individual cases where patients had been let down. As with any piece of work it raises more questions. We hope that this is a starting point to making the discharge process for patients a positive and helpful experience in all cases and look forward to working together with health and social care providers.



# About Bedford Borough

Bedford Borough covers an area of 476 sq. km and is home to an estimated 161,400 people (2013). It is one of the most ethnically diverse authorities in the East of England, with up to 100 different ethnic groups living within its boundaries. The 2011 Census indicated that 28.5% of the Borough's population was from Black and Minority Ethnic (BME) groups (defined as all ethnic groups other than White British). Almost two-thirds of the population (64.2%) live in the urban area of Bedford and Kempston, and 35.8% in the surrounding rural area which comprises 45 parishes.

Bedford Borough has a similar age profile to England, with a median average age of 39.6 (2013) compared to 39.7 in England, but a much younger profile than the East of England which has a median age of 41.2.

The proportion of older people is also lower, with 16.8% of the Borough's population aged 65+ in 2013 compared to 17.3% in England and 18.7% in the region. However, between 2001 - 2013 the population aged 85+ increased by more than 40%, more than four times the rate of overall population growth.

Life expectancy is 11.7 years lower for men and 11.3 years for women in the most deprived areas of Bedford than in the least deprived areas.





# About Healthwatch Bedford Borough

Created on 1<sup>st</sup> April 2013 by the Health and Social Care Act 2012, Healthwatch Bedford Borough supports people who live, or access services in Bedford Borough.

Healthwatch Bedford Borough is an independent Community Interest Company, commissioned by Bedford Borough Council to be the local consumer champion for publicly funded health and social care. It delivers services which can be summarised as:

**Influencing** - helping shape the planning of health and social care services:

- Healthwatch Bedford Borough is an accredited member of the Bedford Borough Council's Health and Wellbeing Board where it represents the views of carers and the public who use health and social care services.
- Healthwatch Bedford Borough will also report proven concerns about the quality of health and social care to Healthwatch England, which can then recommend that the Care Quality Commission take action.
- Part of our role is also the ability to undertake announced and unannounced visits to any publicly funded social and health care settings by authorised Enter and View representatives.

**Signposting** - helping people access and make choices about care.

Healthwatch Bedford Borough is part of a 152 strong nation-wide Healthwatch network, linked by Healthwatch England.

# Background

## Why did we do this?

In December 2013 we held a public event at Cardington Village Hall. It was attended by over 40 people from the local community. We asked all attendees to identify areas from health and social care that they felt needed improvement. One of the areas suggested was the discharge process.

Following this feedback the issue was discussed at Board level as well as the Healthwatch reference group. It was then decided to undertake a project that would look at how discharge worked across a number of different organisations and providers, rather than looking at individual settings in isolation. The Enter and View team lead together with volunteers prepared a plan of visits to investigate the current discharge process to highlight things that are already working well and to find out if there were things that could be done better.

In line with the view of people living in Bedford Borough, it has been recognised nationally that discharge experiences have not always worked seamlessly and have resulted in a number of high profile failures across the health and social care system. In March 2014 Healthwatch England launched a special inquiry to investigate people's experience of discharged process. Three groups of the population were specifically identified as most vulnerable: the homeless, the elderly and mental health patients.

Healthwatch England requested that data be forwarded to them for evaluation by the end of July 2014. However, Healthwatch Bedford Borough felt that this timescale did not allow them to complete the work plan to meet the required deadline. Healthwatch England were made aware of this and have been kept informed of progress and key findings.

Whilst the review has been developed, NHS England published their 'Review of National Reporting and Learning System (NRLS) incident data relating to discharge from acute and mental health trusts' in August 2014. Findings from this report have been compared with the data we were beginning to collect.

<http://www.england.nhs.uk/wp-content/uploads/2014/08/nrls-summary.pdf>





**“The way the discharge nurse facilitated arrangements and care was good. But waiting time in the discharge lounge was too long.”**

# Planning our survey

To gather the views of people being discharged in Bedford Borough it was essential to reach as many members of the Bedford Borough public and professionals as possible. The Enter and View team prepared a questionnaire, which could be completed quite quickly and anonymously. In addition, a plan of announced Enter and View visits to best capture the experiences of the 3 groups (the homeless, the elderly and people with mental health conditions) of people identified by Healthwatch England was compiled. Four focus groups were to be held in Bedford to collect additional information. In addition, organisations and individuals that it would be helpful to meet with were identified.

**“Negative in some ways, positive in others. Care in hospital excellent. The in-between process of transfer to care home slow and frustrating.”**





Essential services



Access



A safe, dignified  
and quality  
service



Information and  
education



To choose



To be listened to



To be involved



To live in a  
healthy  
environment

“Staff are helpful, informative,  
caring and respectful.”

“Reduce waiting time in discharge  
lounge – 5½ hours totally  
unacceptable.”

# Preparing our review

As well as hearing directly from people about what happened to them when they were sent home from a hospital, care home or mental health setting, we also wanted to hear from people who are involved or affected in different ways, including families and friends, doctors, nurses, social workers and charities.

In order to ensure all the relevant staff and stakeholders were made aware of our planned survey, we took the following steps:

- We wrote to all the relevant care and nursing homes that we planned to visit.
- We liaised with Bedford Hospital, Bedford Borough Council and SEPT about our planned visits.
- We arranged visits with organisations that provide support for homeless people and those that provide care for patients returning home after discharge.
- Posters were displayed in the Discharge lounge in Bedford Hospital.
- An email, and in some cases individual letters were sent to contacts on our mailing list to ensure that it reached as wide an audience as possible.
- An alert was put onto Healthwatch Bedford Borough website.
- Healthwatch Champions were emailed and in many cases their organisations visited to alert them to and secure their support with the project.



“Ensure prescriptions are ready on time or prescriptions can be collected from chemist.”

# Methodology

We completed 5 announced Enter and View visits and over 20 visits to organisations that provide support to the 3 identified target groups (the homeless, the elderly and people with mental health conditions) in Bedford Borough between the months of May and October 2014.

## **Enter and View (E&V):**

Each announced visit was conducted by at least one trained member of staff and our individual interim reports were compiled through observations made and information provided from available staff and patients at each location. Interim reports were then sent back to health and social care providers for factual correction. Recommendations from these reports are monitored through the formal E&V process and are discussed with the individual providers. These recommendations are not included individually in this review but have been included, where appropriate in general findings.

## **Patient questionnaire:**

The patient questionnaire was completed in each visit setting or distributed by organisations that offer support after discharge.

An electronic version of the questionnaire was also available.

Trained volunteers and staff in some cases completed the questionnaires in person with targeted individuals, especially in the Bedford hospital discharge lounge.

Both, qualitative and quantitative data was collected, as it was felt that this would best capture the experience of the discharge process. Open and close-ended questions were used.

All questionnaires were anonymous therefore no identifiable information was collected.

However, demographic information such as ethnicity and gender were collected, which enabled us to monitor the diversity of our sample.

## **Focus groups:**

Where possible we involved service users from the three target groups or professionals that provide services for those. Participants in focus groups remain anonymous, and any quotes or information used from the focus group are not linked to individuals - unless they specifically asked for their name to be attributed to their story.

Various times and locations were used to best suit and involve as many participants as possible.

“More than satisfied with all the services provided.”

# Key Findings

- Generally, people felt that things have improved in the last 9 months.
- Comments about the care provided by nursing staff have been consistently positive.

## Quantitative information:

- 80% of people were spoken to about discharge arrangements before this took place. However, of these 42% stated that this occurred on the date of discharge.
- 72.7% respondents stated that their carer has been included in the discharge planning process.
- 58.3% of discharges were delayed and of those 75% were delayed due to medication not being ready.
- However, when people had their medication, 90.9% stated that they understood the instructions given to them about it.
- 93.3% of those who needed special equipment stated that it was available when they needed it.
- 67.9% received information about expected recovery at home after discharge and felt that the information provided was conveyed in a way they could understand and was sufficient.
- Three quarters of patients made their own arrangements for going home in terms of transport. Of the 25% that needed an ambulance or hospital transport to take them home, 78.6% were satisfied with the service.
- Discharge lounge in Bedford Hospital— 85.7% rated the experience in the discharge lounge as very good, good or satisfactory. 85.7% of people that spent time in the discharge lounge were there between an hour and 3 hours. However, 7.2% stated that they spent over 6 hours there.
- 64.7% stated that they did not receive any information about patient support groups or organisations related to their condition before they were discharged.



“The staff were very helpful.”

“More information shared about where I was going would have been helpful. Possibly before I met YMCA staff at my bedside.”

#### Qualitative information:

- Care homes have indicated that on occasions the information in discharge letters has not been sufficient and often difficult to understand.
- Whilst people knew about the discharge process and had had it discussed with them, it was felt that information describing the process at the time of admission would have been helpful (such as a discharge pack).
- There are many organisations who are involved in facilitating and supporting discharge. However it is clear that much of the work and development that is undertaken occurs in isolation.
- New initiatives work best when practitioners who are involved in the discharge process lead this work.
- The discharge process improves when regular, face to face contact with all the organisations is maintained.
- People are not aware of Assistive technology, such as Telecare services.
- When there are mobility issues, patients cannot access cash when discharged from hospital. Particularly when this takes place outside the opening hours of Statutory services. Sometimes, patients do not have the means to purchase essentials and have to rely on goodwill of volunteers and Foodbank support.
- The complex healthcare process used at Bedford hospital has made significant improvements to the effectiveness of discharge for this group of vulnerable people.
- Where discharge has gone wrong it has often been in the group of people who do not fit the criteria for complex discharge but for various reason need more support. Such as provision for homeless people with additional health problems.
- The navigation team has been effective in reducing people’s time in hospital and helping them to get home.
- Discharge information is not always available at the time of discharge.
- The winter pressures money that provided increased psychiatric liaison was a service that removed some of the blocks that historically had caused delays. Both the hospital and the mental health services viewed it as a valued service addition.
- Discharges are now mostly facilitated by 6.00 pm.
- Information and resources to support patients at the point of discharge or transfer is not always available.

“Everything running well.  
Good service. Improvement  
from prior visit.”

# Improvements

## What has happened already:

- Up to date reading material in the Bedford Hospital Discharge lounge.
- Updated signage in the Bedford Hospital Discharge lounge.
- A discharge pack is going to be developed by SEPT.
- A group of care and nursing homes managers has been formed to look at developing processes that work.
- BEDOC (Bedford Doctors on Call) have a complex discharge team working with care homes to support them at the time of patients discharge.
- Bedford Borough teams are working closely with the hospital trusts to develop good multi agency teams.
- The vacancy for a learning disability specialist nurse has been filled at Bedford Hospital.
- Work on a care pathway has resulted in a passport being developed to support patients who leave hospital with a catheter.
- Work on a discharge process through the Better Care Fund has started.

## The three things that people felt would improve the process were:

- Improved communication with family members, between and within teams and with outside support organisations.
- A discharge information pack with information regarding the expected pathway given to patients on admission.
- Quick access to medication on the day of discharge.

“The discharge was not  
good due to the length of  
time to get medicines.”

# Demographics of our patient questionnaire sample

## Gender:

Male	53.3%
Female	46.7%

## Age range:

Under 18	0%
18-20	1.6%
21-30	3.3%
31-40	13.1%
41-50	11.5%
51-60	6.6%
61-70	18%
71-80	27.9%
81-90	14.8%
91 and over	3.3%

## Ethnicity:

White British	85.2%
Asian or Asian Background	4.9%
Polish	4.9%
Any other	3.3%
Prefer not to say	1.6%

**“Very pleasant stay. Helpful. Well looked after.”**

**“No-one was available to interpret my X-rays so I was sent home. I was admitted to hospital 2 days later.”**

“The staff were fantastic, the doctors great and the information received excellent.”



“I had nowhere to go so was discharged back to the streets. I had to walk with 4 bags to the Day centre and chemist.”

# Next Steps

Our review identifies both positive and negative aspects of the discharge process within Bedford Borough. Individual Enter and View recommendations are monitored through the formal E&V process and are discussed with the individual providers. These recommendations are not included individually in this review but have been included, where appropriate in general findings.

We would like to thank all of the staff in the various settings that we visited and all individuals that took time to fill in Discharge Questionnaires. In addition, our thanks go to people that contributed to our focus groups and those that provided their premises to accommodate them.

Some findings are more challenging than others to implement and we welcome the opportunity to work with health and social care providers, Bedford Borough residents, Bedfordshire Clinical Commissioning Group, Bedford Borough Health and Wellbeing Board, Bedford Borough Council, NHS England and any other organisations to find ways to resolve these challenges.

We will now continue to champion the voices of residents in Bedford Borough.



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*“A strong voice for local people”*