

Speaking out
on **leaving**
hospital



Introduction

Healthwatch believes that people have the right to a safe, dignified and quality service.

When people are leaving hospital or care, this means that they should have somewhere safe to go, with transport, if necessary, to help them get there. And they - together with any relatives or carers - should feel that they have adequate support for their ongoing care.

During 2014, Healthwatch England launched a special inquiry into people's experiences of leaving hospital and care. We wanted to give Devon residents the opportunity to voice their own opinions and experiences.

This report sets out what you told us.



What we did

Over 300 people told us about their experiences of leaving hospital

We carried out a short survey, asking people with recent experience of leaving hospital or care:

- How happy they were with the way that their discharge was arranged, and with any follow on support
- What did or did not work for them at the time that they were being discharged, and after they had left hospital
- What improvements they thought could be made to the discharge process

Hard copy surveys were distributed to people who were not able to access an online survey. The Devon Disability Network Deaf Project produced BSL clips on YouTube, which were promoted through online social media. Be Involved Devon (BID) workers spoke to people with experience of hospitalisation because of mental illness. Devon Carers Voice carried out a series of telephone interviews with carers within their network.



Our findings

Key findings from our survey were as follows:



Two thirds of respondents were happy with the way their discharge from hospital was handled.

But 1 in 3 were “not very happy” or “not at all happy”.

Nearly half the respondents gave positive comments about the care they had received from staff. But the top three causes of dissatisfaction were “timeliness”, “aftercare” and “communication”. Details are as follows:



Timeliness: 1 in 3 respondents complained of medication delays, waits for transport home, delays in care assessments either before or after discharge, and delays in setting up care at home.



Aftercare: A further **1 in 3 respondents spoke negatively** about the quality of care they had received after leaving hospital.



Communication: Over a quarter of respondents were concerned that health and care professionals did not communicate well with one another. And a fifth commented on a lack of information being provided to the patient and/or their carer.

When asked what could improve the experience of leaving hospital, the biggest single suggestion was “co-ordination of care between hospital and home”.

You told us...

“Brilliant staff on ward. No further support discussed though. Not quite ready to leave, lots of unanswered questions and felt quite rushed.”

“I was lucky I had family support. I would question what would have been the situation without them.”

“Was advised to take some kind of tablet, However I didn't know what I was going to be taking as I didn't know what the word in the letter meant.”

“I had a district nurse visit to dress my op site at week 1 and again at week 2. I had an access number for her should I need it. She also did a blood test arranged smoothly by my GP.”

“All staff have to do is liaise with family/carer at point of discharge and the risk of a fall would have been greatly reduced.”

“My care was first-class from pre- to post-op and discharge. Everything was checked for arrival home. I saw physios, OT's and pharmacist. I had a prescription for all aids I would need at home and they were already in place.”

The good news

Most people seemed happy with the care they had received in hospital, and some were full of praise for the staff on the wards.

The bad news

For some, a really good experience in hospital was spoiled by delays and poor communication during the discharge process.

Recommendations

As always with Healthwatch Devon reports, we make recommendations based on the feedback we have received. Recommendations are sent through to service commissioners and providers, so that they can give us their responses. For hospital discharge, our recommendations are:

- 1** To note that that our findings are very similar to those from a report published three years ago. Problems with discharge processes seem to be persistent.
- 2** Our findings may apply to any situation where care is being shared by, or transferred between, service providers. Plans for joining up health and care services need to ensure good co-ordination, communication and timeliness between service providers.
- 3** That plans for joined up health and care services should build in a means of tracking the experience of patients as they move from one service provider or location to another.
- 4** Findings from this report should be used in hospitals for staff training and system improvement.
- 5** Since some survey respondents took the view that hospital staff were simply under too much pressure, hospitals should check whether staff share this view.

Where next?

We have published our detailed report 'Then What?' - on people's experiences of leaving hospital - on our website. You can view this at healthwatchdevon.co.uk or call us for a hard copy. The report has also been sent to Healthwatch England - the national consumer champion.

We will be working with local health and service managers to follow through on our recommendations.

To keep informed of our work you can sign up for free monthly e-bulletins and our quarterly Voices magazine. Or view the 'Your feedback' page on our website.

Contact Us

0800 520 0640

healthwatchdevon.co.uk
info@healthwatchdevon.co.uk

FREEPOST: RTEK-TZZT-RXAL
3 & 4 Cranmere Court, Lustleigh Close,
Matford Business Park, Exeter EX2 8PW
Charity Registration: 1155202

"The Healthwatch report has provided us with additional valuable insight into the experience of some of our patients. It has been reviewed by the RD&E Discharge Steering Group which has responsibility for receiving feedback on issues relating to discharge practice and leading service improvement to ensure that we get our discharge processes right for our patients and their carers."

Royal Devon and Exeter NHS Foundation Trust