healthwatch Rochdale



Unsafe Discharge from Hospitals: Care Home Manager Speak of their Experiences of the System

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Foreword

"The report looks at issue that are faced by Care Home providers when patients and residents are discharged from a Hospital facility. With this feedback Healthwatch Rochdale wants make commissioners and service providers aware of the report and issue recommendation to begin a process of improvements and conversations to address how changes can and will be made."

Kate Jones Chief Executive Officer Healthwatch Rochdale

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Introduction

Healthwatch Rochdale was established in April 2013. The remit of Healthwatch Rochdale is the independent voice of local people and to ensure that Health and Social Care Services are safe, effective and designed to meet the needs of the residents, patients, social care users and carers.

The dual role of local Healthwatch is to champion the rights of users of Health and Social Care Services and to hold the system to account for how well it engages with the public.

Healthwatch Rochdale aims to deliver a service that embodies the following values and principles:

- Providing services and activities that are open and inclusive to the public.
- Ensuring equality of access to activities for all parts of Rochdale's diverse communities.
- Planning and delivering activities that reflect the views and priorities of Rochdale's communities.
- Making decisions democratically and objectively, in the best interests of the public.
- Communicating outcomes and progress of activities to the public.
- Developing and maintaining positive relationships with health and social care planners, commissioners and service providers.
- Supporting the Borough to tackle health inequalities.

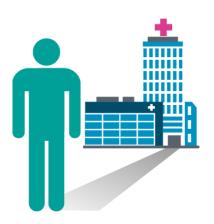
Background

Healthwatch Rochdale key priority area from the Workplan 2015/2016 to engage and take feedback from "Older People". With evidence scoped from the Healthwatch Rochdale database, unsafe discharge from Hospitals highlighted trends and influenced the project "Unsafe Discharge from Hospitals: Care Home Manager Speak of their Experiences of the System"

The aim of this project was to engage with Care Homes and Care Managers within the Rochdale Borough to highlight issues and barriers for patients when discharge from a Hospital environment back to a place of Care (Residential/Care Home). From the findings, we received Healthwatch Rochdale will hope to make recommendation to commissioners and service providers in the aim to tackle and challenge the issues raised.

Methodology

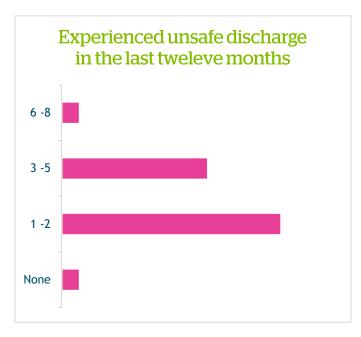
The total respondent was 24 Care Home Managers. The data was collected by a face to face meeting or those who were unable to meet a conference call was arranged. Healthwatch Rochdale then conducted a survey with the Manger (appendix 2).



Summary of Findings

Out of 24 survey responses 95 % of care home managers surveyed had residents that had experienced unsafe discharge within the last twelve months.

- 50% of participants had between 1-2 residents experience unsafe discharge in the last twelve months
- 33% of participants had between 3-5 residents experience unsafe discharge in the last twelve months



- 54 % of participants had residents who had waited between 4-5 hours
- 38% of participants had residents who had waited between 2-3 hours
- No participants had residents who waited less than an hour

Comments from Care Home Managers about waiting times included:

- "Sometimes patients are kept in hospital overnight as no ambulance to bring back to care home"
- "Phoned at 10.30 arrived at 18.00"
- "Some were authorised in the am and not arrive until 5pm - we have imposed a deadline of no acceptance past 20.00 to attempt to stop this from occurring as residents arriving late at night in PJs /hospital gown are not dignified"
- "Once medically fit residents can wait for long periods in discharge lounge and return home incontinent and thirsty
- 44% of participants had 1-2 residents discharged without the correct paperwork
- 22% of participants had 3-5 residents discharged without the correct paperwork

Comments from Care Home Managers about paperwork included:

- Always forgetting do not attempt resuscitation (DNAR). I have to pay for taxi to collect DNAR papers. Taxi also for medication
- Mostly it has been missing DNAR's or handover of care communication not received or confusing as to any changes in meds etc that require clarification
- Common for DNAR not to be returned to the home



Further Intelligence

Through further intelligence evaluated through the Healthwatch Rochdale database we discovered:

- 50% of the feedback highlighted patients were being sent home without the correct paper work.
- 30% of feedback was in regards to medication, with residents being discharged without medication or instructions on how to take the medication



Recommendations

- All hospitals instigate systems to improve communication with patients, families and external Health and Social care professionals which will involve them in discharge planning and ensure that they are provided with the correct information about any medication, follow-up care and appointments that the patient requires.
- Production of an action plan on the system to improve communication with patients, families and external Health and Social care professionals
- Raising awareness of advanced planning, including advanced directives, such as DNAR orders, living wills and nominating a family carer to act as power of attorney (for health) could help ensure better care provision and lived experience for people.
- Heywood Middleton and Rochdale Clinical Commissioning Group to set up a Task and Finish group to carry out a deep dive in relation to patient, families and care home managers experience of the discharge from hospital process.

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Appendix1

Unsafe Discharge from Hospital Survey

We are the local consumer champion for Health and Social Care services for the Rochdale Borough and can help make changes if we receive feedback about yours or your residents' experiences.

1. Have any of your residents experienced what you feel was an unsafe discharge from hospital in the

last 12 months? If so, how many?

- none
- 1-2
- 3-5
- 6-8
- More
- Comment

2. After notification of discharge from the hospital, have any of your residents experienced a waiting

time as below?

- None
- 1hour
- 2-3 hours
- 4-5 hours
- more
- Comment

3. How does communication from the hospital happen regarding a resident's discharge time?

- Telephone
- Email
- Written Documentation
- Other (please specify)

4. How would you prefer your communication to be regarding a resident's discharge from a hospital?

- Phone
- Email
- Written Documentation
- Comment

5. How many of your residents have been discharged from hospital in the last twelve months without the

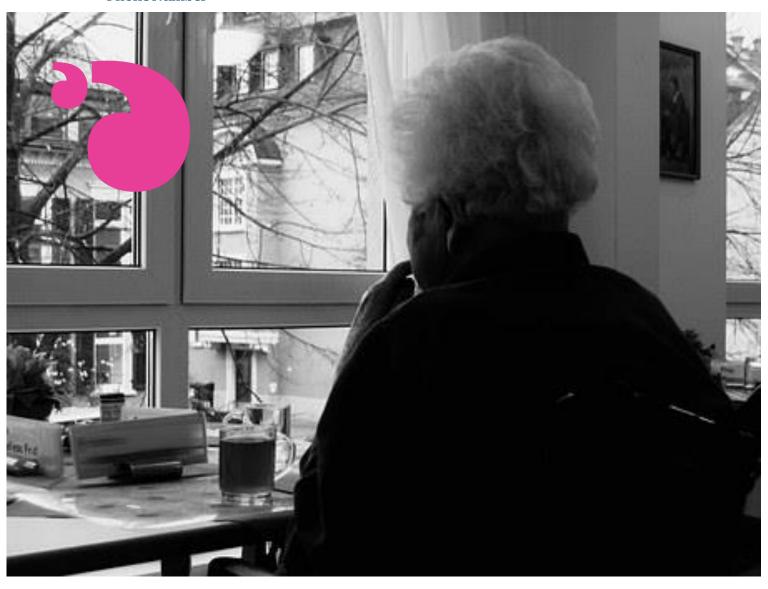
appropriate paper work at the time of discharge?

- none
- 1-2
- 3-5
- 6-8

More

6. Which hospital or hospitals do you feel that your residents have experienced an unsafe discharge from?

- Name
- Company
- Address
- Address 2
- City/Town
- State/Province
- ZIP/Postal Code
- Country
- Email Address
- Phone Number



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Contact Us



Healthwatch Rochdale

The Lodge, Arrow Mill, Queensway Rochdale OL11 2YW Tel 01706 249 575 info@healthwatchrochdale.org.uk www.healthwatchrochdale.co.uk









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