



# Leaving hospital during Covid-19

The experiences of 35 local people discharged from hospital  
between June - August 2020

### About our Healthwatch

We are the independent champion for people who use health and social care services in Cambridgeshire and Peterborough.

Our job is to make sure that those who run local health and care services understand and act on what really matters to people.

We listen to what people like about services and what could be improved. And focus on ensuring that people's worries and concerns about current services are addressed.

We work to get services right for the future.

### Our thanks

We would like to thank the patients and families who shared their experiences of leaving hospital with us. We are also grateful to our volunteers for their help as they spent many hours contacting patients and families to find out about their experiences.



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## Introduction

### What we did

This project highlights people's experiences of hospital discharge during the Covid-19 pandemic. Our Healthwatch worked with Cambridgeshire County Council and Peterborough City Council who contacted people who left hospital between June and August 2020 and asked them to share their experiences with us.

Being discharged from hospital is often a complicated process because many different parts of the local health and care system are involved in a person's care. From experiences shared with us directly and through other organisations, we know that discharge can work well for patients and their families. However, when it doesn't, it can also cause uncertainty, distress and can lead to a rapid re-admission or unmet care and support needs.

The Government introduced new guidance in March 2020 to enable patients to be discharged from hospital quicker in the light of the Covid-19 pandemic<sup>1</sup>. It works on the basis that decisions about longer-term care needs should be made in the community, once people have left hospital. This process is called '*discharge to assess*'.

Although it is a process that has been used before (including locally), the Government's guidance contained clear expectations about how discharge would be handled across England, and what information should be given to patients and families. The guidance was updated in August 2020 and again in September 2020. However, this report presents the experiences of people discharged from hospital under the March guidance.

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<sup>1</sup> Gov.uk (2020) *Coronavirus (COVID-19): hospital discharge service requirements* [Online] <https://www.gov.uk/government/publications/coronavirus-covid-19-hospital-discharge-service-requirements> Accessed 9 December 2020

Our aim is to help all involved to look at where *discharge to assess* is working well, and where it could be improved.

### Key findings

- Around one in five patients were not told they would get support from health or social care services after leaving hospital.
- Nearly two in three people were not given information about who to contact if they needed further health advice or support after leaving hospital.
- Only one in five people were given information about voluntary sector support which could help them after they left hospital.
- Three in four people (74.3%) said they definitely felt prepared to leave hospital or felt prepared to leave to some extent.
- Nearly three in four people discussed where they were being discharged to and went to the place they wanted to go to.
- Most people were positive about the care put in place.
- Just over one in three people (34.3%) said they waited more than 24-hours.
- The main reason for people waiting longer was waiting for transport arrangements (46.4%), although some people experienced multiple reasons for delay.
- Some patients felt they did not have suitable equipment for use at home or knew how to use it correctly.

## How we carried out the survey

The councils passed details to us of people who gave consent for us to contact them about their experiences of leaving hospital. Our Healthwatch volunteers called them and went through a questionnaire with them.

The questionnaire was based on one used by Healthwatch England in its national discharge report '**590 people's stories of leaving hospital during COVID-19**'<sup>2</sup>. We looked at this report as well as other feedback about leaving hospital gathered from people who have contacted us or responded to our other surveys.

## Who we heard from

We spoke to 35 people about their experiences of leaving hospital. In some cases, a relative answered the questions as the patient was unable to respond. We asked a range of questions about their experience of discharge from hospital. The survey was well received by those taking part and, in some cases, we were able to provide further information to help them. The questionnaire is in Appendix one.

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<sup>2</sup> Healthwatch England (2020) *590 people's stories of leaving hospital during COVID-19*  
<https://www.healthwatch.co.uk/report/2020-10-27/590-peoples-stories-leaving-hospital-during-covid-19> [Online] Accessed 27 October 2020

## What people told us

### Place of discharge

Out of the 35 patients, 17 were discharged from Cambridge University Hospitals NHS Foundation Trust (Addenbrooke's) and 18 from North West Anglia NHS Foundation Trust (three from Hinchingsbrooke Hospital and 15 from Peterborough City Hospital). Detailed demographical data is in Appendix two.

### Day and time of leaving hospital

Over half of the people who answered the question (51.7%) were discharged at a weekend (counted as Friday-Sunday), with nearly one in three (31.7%) discharged on a Friday. This compares with 37% in the Healthwatch England/British Red Cross discharge survey.

Most people were discharged during the day. Five people told us they were discharged at night (8pm-8am). However, they gave positive feedback about their experience:

'As expected - care home contacted and was prepared to accept.'

'Staff at hospital were supportive and clear about discharge.'

'Quite good.'

Nearly three in four people (74.3%) said they definitely felt prepared to leave hospital or felt prepared to leave to some extent.

## Delays in discharge

The March *discharge to assess* guidance expected people to be discharged within two hours; however, most people (85.7%) who responded said they waited more than two hours.

Just over one in three people (34.3%) said they waited more than 24 hours for their discharge. The main reason for people waiting longer was transport arrangements (46.4%), although some people waited for multiple reasons.

Other reasons included:

- Waiting for medication (14.3%)
- Waiting for a care plan or care package (14.3%)
- Waiting for confirmation of where they were going to be discharged to (10.7%)
- Waiting for a Covid-19 test result (3.6%)
- Needing to see a doctor before discharge (3.6%)
- A quarter of people who answered did not know the reason for the delay.

One person's hospital discharge caught them by surprise:

'Very sudden. Lack of verbal communication about discharge at hospital. Just said, "we're going to discharge you" and patient was sent to ambulance to take them home.'



## Providing information to people

### Explaining what has changed

As part of the *discharge to assess* process, people should be told that the discharge process had changed as a result of Covid-19. However, very few people (14%) said they had been told the process was different. Over one in three people responded 'don't know' when asked if they had been told.

### The support people were offered

Under *discharge to assess*, every patient's journey out of hospital follows one of four discharge pathways, depending on how much care they are going to need. See Appendix three for more information about discharge pathways.

Most people were told they would receive some support from health or social care after their discharge. However, just over one in five people (22.9%) were not told this. Of these eight people, half were discharged from Addenbrooke's and half from Peterborough City Hospital. It is unclear whether this was because of which pathway people were on or for another reason.

### Introducing voluntary organisations who could help

Patients were also supposed to be given information about voluntary sector support which could help them after they were discharged. However, in our survey only one in five told us they were given this information. Nearly two in three people (65.7%) said they were not given this information. Of these, just over a quarter said they did not need that information.

This means that a significant number of people were not getting information that could have helped them after their discharge from hospital. For some people, this placed a strain on family members:

'If she had not been discharged on a Friday, I could have found out about this service and got it in place more quickly therefore not had the terrible weekend we had. I had no idea what services were available.'

There were variations by place of discharge. No-one discharged from Hinchingbrooke Hospital was given this information although numbers in the survey were small (three). Equal numbers (seven) of people were not given this information when discharged from Addenbrooke's or Peterborough City Hospital.

One person told us they were given the information but couldn't take it all in:

'Told me about voluntary organisations and charities but rushed and difficult to take in.'

### **Who to contact for further health advice or support**

People were also supposed to be given details of who to contact if they needed further health advice or support after leaving hospital. We found that nearly two in three people were not given this information. Of these 23 people, only four (17.9%) said they did not need it.

The variations by place of discharge were similar to those around voluntary and community sector support. Again, no-one discharged from Hinchingbrooke had this information, and eight people discharged from Addenbrooke's and eight discharged from Peterborough City Hospital did not receive this information either.

Reassuring people that they can access health advice and support if their condition changes is important, especially given the high number of discharges over the weekend when other services are less likely to be available.

## Covid-19 testing in hospital

Most people were tested for Covid-19 prior to leaving hospital (30 people, 85.7%). Three people did not know if they had been tested and two said they were not.

Most people said they received the test result before leaving hospital (26 people, 86.6%). One person commented:

‘Hospital tested for Covid on admission (negative) but not [tested] on discharge.’

## Travelling home

Eight out of ten of people said they were asked about if they needed support with transport to get them to where they were discharged to. Of these 28 people, most (92.9%) received support.

There were five people who were not asked about their transport needs and did not receive the support that they needed. Most people (82.9%) were taken home by hospital transport. The others were transported by family or friends.

‘There was a communication issue - I was expecting my son to pick me up to take me home but an ambulance took me home earlier. That meant there was no one at my home to help me when I got there.’

‘I came home in an ambulance wearing a hospital nightdress and dressing gown.’

‘The paramedics were excellent when they took me home.’

‘In the discharge lounge, the senior nurse did not read the patient's notes and therefore wasn't aware that patient was not safe to be taken home in a taxi.’

Nearly three in four people discussed where they were to be discharged to and were discharged to the place they wanted to go to. Two people were discharged to a different place from where they wanted to go to. One person was sent to a care home over an hour from their home and the other end of the county. It is unclear why there was not a placement for them closer to where they normally lived. There was also a lack of communication with their current carers:

‘Would have been better if the hospital had contacted patient’s current carers ...to tell them that patient had been sent to a care home....’

However, for one patient, discharge to a care home resolved issues with their previous care package:

‘Patient discharged to care home, family extremely satisfied, long-standing home care issues resolved.’

## Support after leaving hospital

### Care in place

Most people (82.7%) were discharged to their own home. A few people had family come to stay to support them. Most people were positive about the care put in place:

‘Everything was in place for me when I got home.’

‘...care package in place from 7.30am the next day.’

Others experienced more difficulties:

‘No care package in place for two/three days after I left hospital. No support at home for this period. I just had to manage. Have carers three times a day now.’

‘.....there was no follow-up after the operation - no-one came. I only got carers coming in because I insisted, as did my daughter in law.’

This included some practical issues:

‘Carers were unable to work out the keycode to gain access to patient's home as this prevented them from getting into the property. Nurses may have changed the code. Better communication needed between the nurses and the carers.’

### **Communication and joint working**

There were some examples of good communication with family:

‘Consultant telephoned my son to advise him of my condition also discharge planning nurse from the hospital rang my son regarding my discharge needs.’

Families were also appreciative of services working together to ensure their loved one was safe to return home:

‘It was great that they waited to discharge her ... [until] everything was put into place to make her safe at home particularly given the situation with Covid. Things were pretty much in place already .... but they weren't happy with certain things being safe in her property, mainly equipment in the bathroom and made sure these were sorted out before she was released.’

### **Support services**

For others, the situation improved after they found out about other services:

‘Once 'Hospital at home' were in place, everything has gone very smoothly. They have been very good.’

People also spoke about receiving good support after their discharge:

‘Reablement services were absolutely excellent and most support came through this service. Had four calls since home from a dietitian (based at Addenbrookes) which have been very helpful - felt well supported in this sense. Hospital has helped patient recover at home well.’



‘The carers and nurse came for four weeks and this got me back on my feet. The physio was very good but had to stop coming earlier than planned because of covid in the hospital.’

Although, some people experienced a lack of joined up working and communication:

‘Need for more joined up thinking and communication between the different professionals, who give different advice; there is no overall picture of his care needs.’

### **Medication and equipment**

Others experienced problems with supplements or changes to medication:

‘Dietician at the hospital prescribed nutritious drinks - these have not arrived four days after discharge.’

‘Hospital had changed insulin dose, but no information on discharge notes, so district nurses had to contact hospital to find out.’

Other people felt that although equipment was provided, it was not suitable, or they did not know how to use it correctly:

‘Hospital bed and hoist was delivered to home before he was discharged, but no assessment of how bed would fit into house - suppliers had to return a couple of weeks later to move furniture so that [the] carers could get around the bed properly.’

‘Equipment was not the right size. Ambulance driver had to make it bigger. Everything rushed.’

### Visits from a healthcare professional

Patients on pathways one to three (see Appendix three) should have a visit from a healthcare professional on the day they are discharged or the day after. In our survey, 42.9% of people did not receive a visit.

This is better though than the numbers from the Healthwatch England/British Red Cross survey where the proportion was much higher at 82%. Without the additional information of which pathway people were on, it is difficult to say whether these figures reflected what should have happened or not.

Where there was a visit, one in five people had a visit the day they left hospital, and a further one in five had a visit the day after. Over a third of people (35%) had a visit outside of this timescale. Government guidance said the visit should be on the day of or day after a patient's discharge.

'Visited on day of discharge, assessment the following day.'

Of the people who did not receive a visit, one in three reported they had unmet support needs. Again, from the information we have, it is unclear whether or not these people were on the wrong pathway for their needs. Although numbers in our sample were small, it still means that some people were left without support they needed.

Where people told us about unmet support needs, two people were waiting for equipment, and a further two were waiting for other people to arrange support. One person said they were not eligible for support. However, others indicated support was already in place or they did not need it because they had moved into a care home. This may also indicate some misunderstanding about what was meant by 'unmet support needs'.

## What else people have told us about being discharged from hospital

We also looked at other feedback we have received about people's experiences of leaving hospital. Some of this included individual discharge experiences during Covid-19 and other views came from our report on the NHS Long Term Plan<sup>3</sup> and our recent Covid-19 survey<sup>4</sup>. We have also had feedback from partner organisations.

Where different agencies are involved at different times in a patient's journey, clear and accurate communication and information ensures people are not left unsupported, especially if their situation changes. A lack of information can lead to patients accessing further NHS and care services, putting a further strain on these as well as on family and friends.

There needs to be clear information for health and care staff about the *discharge to assess* process. This will help ensure that patients and families are given consistent information - no matter which member of staff they speak to. This will also reduce the likelihood of people not knowing who to approach to resolve any issues after leaving hospital. Some discharge issues were exacerbated due to Covid-19:

'The hospital ... took no account of the fact that as no relatives were allowed to visit him during the development of his treatment and he was still confused, no one at home knew how to manage his 'renal drains' on discharge. Fortunately, my daughter accessed the sister on the ward and made her modify discharge plans until we had been taught how to support him.'

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<sup>3</sup> Healthwatch Cambridgeshire and Healthwatch Peterborough (2019) *What Would You Do?* [Online] <https://www.healthwatchcambridgeshire.co.uk/report/2019-07-25/how-people-would-spend-extra-nhs-cash-cambridgeshire>

<sup>4</sup> Healthwatch Cambridgeshire and Healthwatch Peterborough (2020) *Your care during Covid* [Online] <https://www.healthwatchcambridgeshire.co.uk/news/2020-10-22/covid-survey-report-highlights-health-and-care-struggles-during-pandemic>

‘He was discharged from [name of hospital] despite testing positive and despite having mobility problems and living alone.’

‘I understand post hospital discharge support has been reduced to minimise contact and spread. However, more information is needed to give to people and help those returning home from ICU to understand the potential side effects being incubated [intubated] can have on physical and mental wellbeing to better manage recovery, rather than leave it to Google to scaremonger.’

However, other issues appear to be long-standing. Our 2019 **‘What would you do?’** NHS Long Term Plan report has several comments about the need for better communication between health and care services, and patients and their families:

‘Better communication between staff both in hospital & GP surgery’

‘Better communication between the NHS and Social services support’

‘More advice about how to help yourself at home. So if pain increases etc.’

‘Clear communication and understanding of the process and what is happening next.’

## National learning

### From Healthwatch England & British Red Cross report

In October 2020, Healthwatch England published ‘**590 people’s stories of leaving hospital during Covid-19**’<sup>5</sup>. This report looked at people’s experiences of being discharged from hospital during the pandemic, and how national guidance on *discharge to assess* worked at a local level.

The report recommends a range of actions to ensure the guidance is appropriately implemented. These are summarised below. Our local findings show that many of these actions would be of benefit in our local area.

### Immediate action

1. Provide everyone leaving hospital with a single point of contact and ensure that families and carers also know this.
2. Increase Covid-19 testing capacity so that everyone being admitted to and leaving hospital is able to be tested.
3. Support people to safely isolate whilst waiting for results by directing them to voluntary and community groups who can help with everyday tasks, such as shopping.
4. Make sure that the offer of transport home is part of every conversation and ensure no-one is discharged at night without transport being arranged.
5. Make sure that people have clear instructions and information about their medications, linking community pharmacists into post-discharge community assessments.

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<sup>5</sup>Healthwatch England (2020) *590 people’s stories of leaving hospital during COVID-19*  
<https://www.healthwatch.co.uk/report/2020-10-27/590-peoples-stories-leaving-hospital-during-covid-19> [Online] Accessed 27 October 2020



### Short-term system change

1. Explore low numbers of follow-up visits, identify why visits did not happen and address the issues.
2. Monitor the number of follow-up visits at a local and national level.
3. Clarify discharge pathways and provide frontline staff with guidance and information.
4. Roll out post-discharge check-ins for all patients by phone or in person.
5. Improve access to equipment and supporting information, and ensure adequate volume is commissioned.
6. Improve communication and involvement with carers and families and agree contingency plans should circumstances change.
7. Ensure local data-sharing allows the *discharge to assess* process to work.

The Healthwatch England and British Red Cross report also includes considerations that must be acted on in the medium term. These call for sufficient resourcing of community and voluntary sectors, addressing workforce shortages and the commissioning of post-discharge support services that focus on recovery and recuperation.

## Learning for Cambridgeshire and Peterborough

It is inevitable that given the different parts of the health and care system involved, discharge will not always go smoothly. It is positive that some people told us their experience of discharge during the pandemic was an improvement on their previous experience. This shows the benefit of the system working together. However, there are steps that could be taken to help improve the process.

Our evidence supports the recommendations from the Healthwatch England and British Red Cross report, and we consider these should be prioritised:

### **Patients should expect:**

1. Clear information and instructions about medication when they leave hospital - especially if changes have been made at hospital. Other professionals involved in the patient's ongoing care should receive the same information.
2. A single point of contact in case their health deteriorates, or they are unable to cope at home. This is especially important given the high number of discharges over the weekend when other services are less easily available.
3. Written details about voluntary organisations offering local support.
4. Better communication and involvement for families and carers.
5. To be asked about transport home as part of conversations about their non-clinical needs.

**Hospitals, health and care services should ensure they:**

6. Clarify discharge “pathways” for patients depending on their needs and provide frontline staff with guidance and information.
7. Link community pharmacists into post-discharge community assessments.
8. Make sure there is enough community support for patients going home.
9. Improve access to equipment and supporting information, and ensure adequate volume is commissioned.
10. Ensure equipment is suitable for the space within people’s homes.

Our Healthwatch will continue to raise awareness of these lessons and look to see how changes are implemented.

## Responses from our partners

Our Healthwatch has already shared this report with our hospitals, community services, local authorities and Cambridgeshire and Peterborough Clinical Commissioning Group which plans and buys health care services for our area.

We offered them the opportunity to comment on the report and have included all responses below.



Cambridgeshire  
County Council



### Cambridgeshire County Council and Peterborough City Council

‘Thank you to the patients and families for sharing their experience of leaving hospital, to the Healthwatch volunteers and Healthwatch for agreeing to support the local system to understand people’s experience enabling us to learn and improve that experience for patients and their families.

Both Councils fully support the recommendations. We will work with partners to ensure improved communication and involvement with carers and families and ensure all system partners are aware of the voluntary sector offer. We will commit to ensuring that clarity is provided in terms of the discharge pathway and that appropriate support is provided on discharge.

It was great to see such positive feedback about our reablement services.’

- Debbie McQuade, Assistant Director, Adults and Safeguarding, Cambridgeshire County Council and Peterborough City Council



**North West Anglia**  
NHS Foundation Trust

**North West Anglia NHS Foundation Trust**

It runs Hinchingsbrooke and Peterborough City Hospitals.

‘Thank you for giving us the opportunity to comment on the report.

This has been a challenging year for our patients, staff and family / carers and as an organisation we have made changes to minimise these.

Patient experience and feedback is pivotal in enabling us to make quality improvements within the organisation.

Practices and processes have evolved throughout the pandemic and year and some of the concerns that have been raised have now been rectified.

We will use this report to share with staff and also influence and drive further changes to ensure that our discharge arrangements for our patients align to the needs of our patients to contribute to overall patient and carer experience.’

- Jo Bennis, Chief Nurse  
North West Anglia NHS Foundation Trust





**Royal Papworth Hospital**  
NHS Foundation Trust

### **Royal Papworth Hospital NHS Foundation Trust**

‘We are pleased to have been given the opportunity to comment on this Leaving hospital during Covid-19 report. Although this report does not include responses from patients discharged from Royal Papworth Hospital, the report is helpful in sharing the experience of patients across Cambridgeshire and Peterborough, of which we are part of the healthcare community. We are grateful for patients and their families for taking the time to share their experiences.

We note the recommendations in the report section “Learning for Cambridgeshire and Peterborough” and these are being shared with our staff at Royal Papworth Hospital so that we can consider this feedback as part of our discharge planning. There is also a representative from Healthwatch Cambridgeshire and Peterborough on our Patient and Public Involvement Committee and we are committed to continuing to listen and learn from patient and public feedback.’

- Ivan Graham, Acting Chief Nurse  
Royal Papworth Hospital NHS Foundation Trust

## Appendices



## Appendix one - Survey questions

1. Please tell us what day you left hospital? \*

- Monday - Thursday       Friday       Saturday / Sunday

2. Please tell us what time of day you left hospital \*

- During the day (between 8am and 8pm)  
 During the night (between 8pm and 8am)  
 Don't know

3. What hospital were you treated and discharged from?

4. When you were in hospital, were you given information explaining that the process of leaving hospital has changed due to coronavirus (COVID-19)? \*

- Yes, I was given this information  
 No, I was not given this information  
 Don't know

5. How long did you wait between being told you were well enough to leave hospital and actually leaving the hospital? \*

- Less than 1 hour       Between 1 hour and 2 hours  
 Between 2 hours and 24 hours       More than 24 hours  
 Don't know

**6. Did you feel prepared to leave hospital?**

- Yes, definitely       Yes, to some extent  
 No       Don't know

**7. Before you were discharged, were you told you would receive support from health and/or social care services after you left hospital (for example, home visits from a care worker)?**

- Yes, someone talked to me in the hospital about my needs  
 Yes, but I was told my specific needs would be assessed after I left hospital  
 No  
 Don't know

**8. Were you given information about who to contact if you needed further health advice or support after leaving hospital?**

- Yes, I was given this information  
 No, I was not given this information  
 No, I didn't want/need this information  
 Don't know

**9. During the time you spent in hospital, were you tested for coronavirus (COVID-19)? \***

- Yes       No       Don't know

**10. Before you left hospital, were you asked if you needed support in getting transport to the place you were discharged to?**

- Yes       No       Don't know

**11. How did you travel to the place where you were discharged to?**

- A relative/unpaid carer drove me
- Taxi
- Hospital transport
- Public transport
- Volunteer transport (e.g. British Red Cross, NHS volunteer responder)
- I drove myself
- A care worker drove me
- Other

**12. Did anyone discuss with you where you were going to be discharged to? \***

- Yes, and I was discharged to the place I wanted to be discharged to
- Yes, but I was not discharged to the place I wanted to be discharged to
- Don't know

**13. Where did you go after leaving hospital?**

- I went to my own home
- I went to my own home and family/friends came to stay with me
- I went to stay with family or friends
- I was transferred to another hospital
- I went to a nursing or care home
- I went to temporary accommodation
- I went somewhere else
- Other

**14. After leaving hospital, were you visited by a health professional to assess your support needs (this is called a discharge assessment)? \***

- Yes             No             Don't know

**15. Do you have any support needs for which you don't have any help with at the moment? *If yes, tell us why.***

- The service is closed
- I can't reach the service
- I am not eligible for support
- I don't know where to find support
- I am anxious about contracting coronavirus (COVID-19)
- Other, please specify

**16. Is this your first experience of hospital discharge?**

- Yes       No       Don't know

**17. How did this most recent experience compare with your previous experience(s)?**

- Significantly better
- A bit better
- About the same
- A bit worse
- Significantly worse
- Don't know

**In your own words, please describe your experience of leaving hospital. Tell us how supported you felt, and how well the NHS and social care helped you recover/manage your condition (please refer to what you were in hospital for and the specific services you received, where you can).**

What went well?

What could have been better?



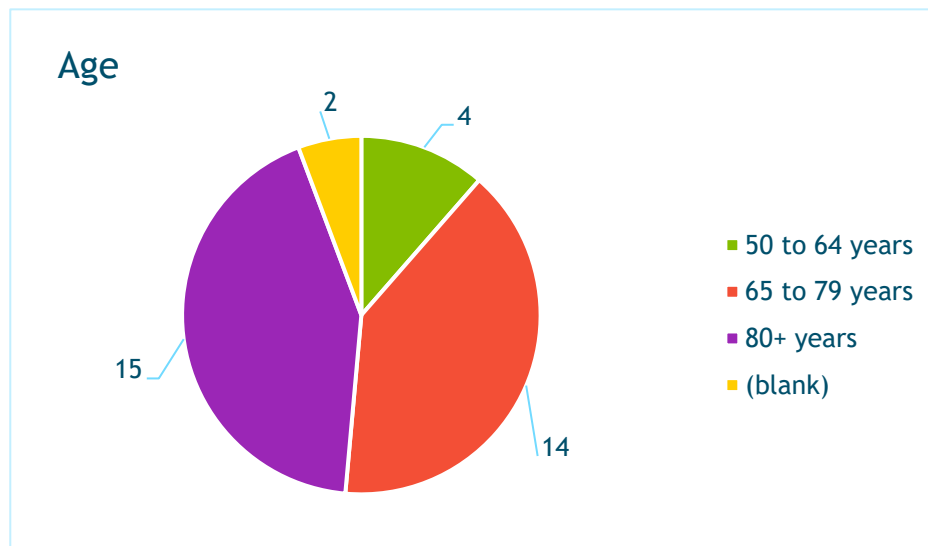
## Appendix two - Demographics

### Gender

35 people answered this question. Approximately two thirds were women/female, one third were men/male.

### Age

32 patients answered this question. Of these 32, just under half (45%) were aged 80 or over.



### Ethnicity

Nine out of ten people (91%) identified as White British.

### Belief

Three out of four people (75%) identified as Christian with just over one in five saying they had no religion.

### **Sexual orientation**

Nearly all (94%) of respondents identified as heterosexual/straight. Two preferred not to answer.

### **Living situation**

Most people answering the question lived alone (58.9%), with about a third (32.4%) living with friends or relatives.

### **Disability and long-term conditions**

More than two in three people (69.7%) who answered this question had a disability and over nine out of ten (94.1%) answering the question said they had a long-term health condition. Over two in three respondents (67.6%) considered themselves to have both.

### **Carers**

Most people (97.4%) did not say they were a family/informal carer.

### Appendix three - *Discharge to assess pathways*

Under *discharge to assess*, every patient's journey out of hospital follows one of four discharge pathways, depending on how much care they are going to need.

Key to the *discharge to assess* process is that the assessment of someone's ongoing care and support needs happens in the community, not in the hospital. This allows patients to be sent home from hospital more quickly.

The government guidance set out that patients may travel along four separate discharge pathways. The guidance includes the expected percentage of patients on each pathway.

#### *Discharge to assess model - pathways*

**Pathway 0:** 50% of people - simple discharge, no formal input from health or social care needed once home.

**Pathway 1:** 45% of people - support to recover at home; able to return home with support from health and/or social care.

**Pathway 2:** 4% of people - rehabilitation or short-term care in a 24-hour bed-based setting.

**Pathway 3:** 1% of people - require ongoing 24-hour nursing care, often in a bedded setting. Long-term care is likely to be required for these individuals.

We were not given details of pathways for any of the patients taking part in our survey.

## Contact us

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## Get in touch if you would like this report in a different format.

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