

# Carers experiences of Dorset Home First service

Discharging patients from hospital and  
supporting them to recover at home

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September 2022



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# About us

Healthwatch Dorset is your health and social care champion.

We're here to listen to your experiences of using local health and care services and to hear about the issues that really matter to you. We are entirely independent and impartial, and anything you share with us is confidential. We can also help you find reliable and trustworthy information and advice to help you to get the care and support you need.

As an independent statutory body, we have with the power to make sure that NHS leaders and other decision makers listen to your feedback and use it to improve standards of care. This report is an example of how your views are shared.

Healthwatch Dorset is part of a network of over 150 local Healthwatch across the country. We cover the geographical area of Dorset, which includes the unitary authority areas of Bournemouth, Christchurch and Poole and Dorset.



## Background

Home First Dorset brings together Dorset's hospitals and the community health and social care teams to help people out of hospital more quickly to recover at their own home or another care setting. As soon as a patient is ready to leave hospital, they should be discharged quickly, to their home or to a local care home or community hospital, and assessed to see if they require additional support to help their recovery. Family members and/or carers should be involved in assessing and planning any care or support that is needed.

Home First Dorset follows the government's 'discharge to assess' guidelines as well as evidence that people recover more quickly in a home setting.

Carers have been telling us for some time about the challenges they face with the 'discharge to assess' process, when their cared for person leaves hospital.

NHS Dorset partners are currently working together and with a strategic partner IMPOWER ([www.impower.co.uk](http://www.impower.co.uk)) to design and deliver a new model for the Home First programme. A core part of this is to build a Home First model that works better for the people who deliver it and for those who are supported by it, including families and carers, patients and staff.

The Commitment to Carers Programme team and Experience of Care (EoC) team at NHS England and Improvement (NHS E&I) invited bids for projects on carers experience of hospital discharge in November 2021. This was a great opportunity for us to work with Dorset Healthcare, the Home First team and Dorset Community Action to deliver a targeted piece of work focussing on carers and their experiences.

## What we did

We talked to the project planning team about the best ways to gather feedback from carers about the Home First service and agreed to carry out phone interviews, led by our volunteers, based around a set of survey questions that local carers and our volunteers helped to design.

Dorset Healthcare used their text messaging system to invite people who had recently visited a Dorset hospital to take part in the survey. We also promoted the project through our networks to encourage carers to take part.

Our volunteers carried out 45 phone interviews during March 2022.

### Our volunteers

Ten Healthwatch Dorset volunteers worked with us on this project. We provided them with training and support to carry out the interviews and they helped us design the script they used on the phone calls (see Appendix). Three of the volunteers helped us analyse the feedback gathered during the interviews.



All the interviews I did took longer than 20 minutes because they all had quite a negative experience of the hospital admission/discharge process and talking them through this took time to get their answers. They were calm talking about it, but most of the people were annoyed at the circumstances of their relative's experience and they hoped that these views would be fed back directly to the NHS. They said that they did our interview in the hope that it would improve patient care in the future. I certainly wanted to do these interviews for the same reason.

Jane, Healthwatch Dorset volunteer



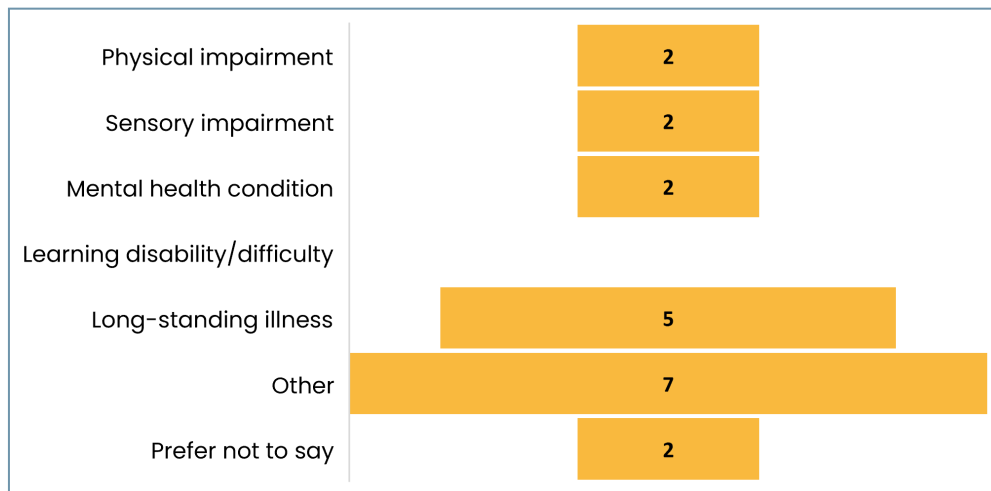
## Who we spoke to

We interviewed 45 people about their experiences as a carer supporting the person they care for to be discharged from a Dorset Hospital.

- **Gender** – 21 people we spoke to identified as women, 12 identified as men; 12 chose not to answer this question.
- **Age** – Most of the people we spoke to were aged over 70. We talked to 2 people aged 35–54, 12 people aged 55–69, 17 people aged over 70, and 1 person aged over 90; 13 people preferred not to tell us their age.
- **Ethnicity** – 29 people identified themselves as White British, Irish, or any other White background and 1 person identified themselves as from another ethnic background; 15 people chose not to answer.
- **Geography** – 9 people told us they live in Bournemouth, 8 live in Poole, 1 person lives in Dorchester, and 12 people live in other areas of Dorset; 15 people chose not to answer.

- **Hospital attended** – 16 people gave feedback about leaving Bournemouth Hospital, 13 about Poole Hospital, 6 about Dorset County Hospital, and 10 on another local hospital.
- **Disability** – 20 people told us they have a disability.

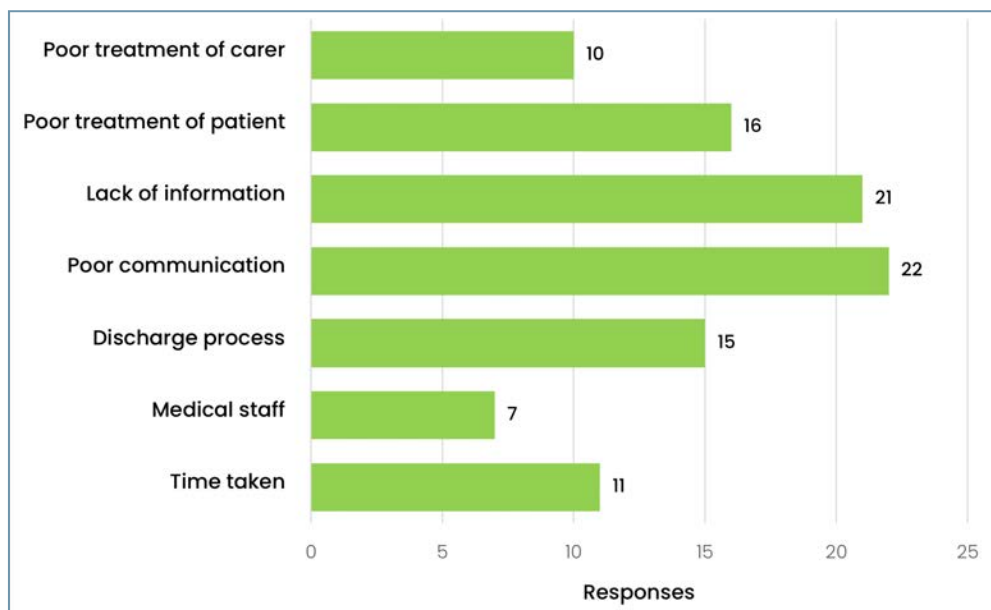
### Do you consider yourself to have a disability?



## Key findings

The feedback we gathered was mixed, with 22 people rating their overall experience as poor for the following reasons.

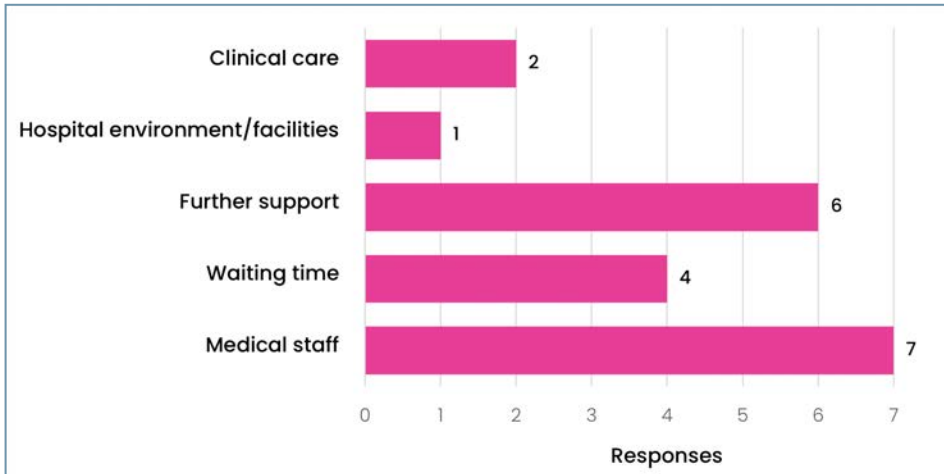
### Negative themes



Isolated  
Neglected  
**Stressful** Vulnerable  
**Terrible**  
Unsafe  
Scared **Lonely**

We identified some key themes in the positive feedback gathered.

### Positive themes



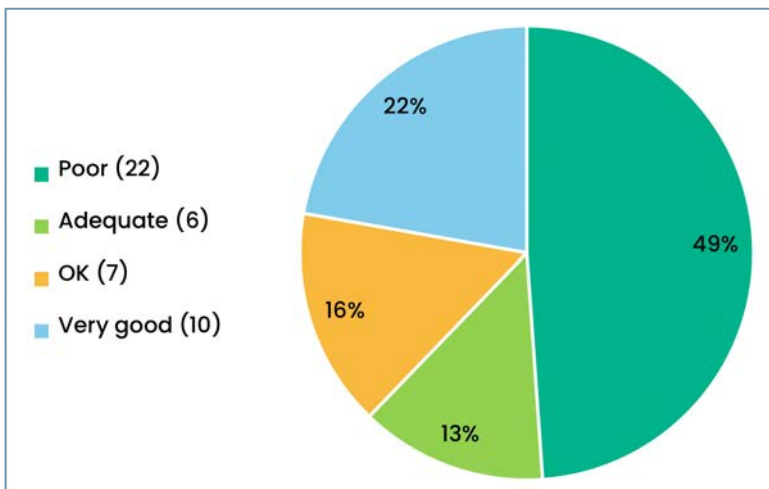
Kind  
Helpful  
Caring  
Professional

## What people told us

### Quality of service in hospital

Almost half the people we spoke to rated the service they and their cared for person received as poor.

How would you rate the service you, and the person you care for, received in hospital?



Looking after Dad after discharge with pneumonia, I felt alone and vulnerable as a carer.

### Lack of information and support

Many of the carers we spoke to told us that they didn't get enough information or support and they weren't kept informed about what was happening.

On day of death, no support whatsoever, no information, no documentation.

My wife was distressed and confused and came out of hospital worse for wear. I was not allowed to visit due to COVID, however my wife was frequently moved to different wards and later I found out I could have visited on the other wards but no one told me. No one told me where my wife was either, I had to contact the previous ward (only to discover she was moved) and locate her from there, very frustrating.

## Positive feedback

Those carers who had a more positive experience, often attributed that to the hospital staff.

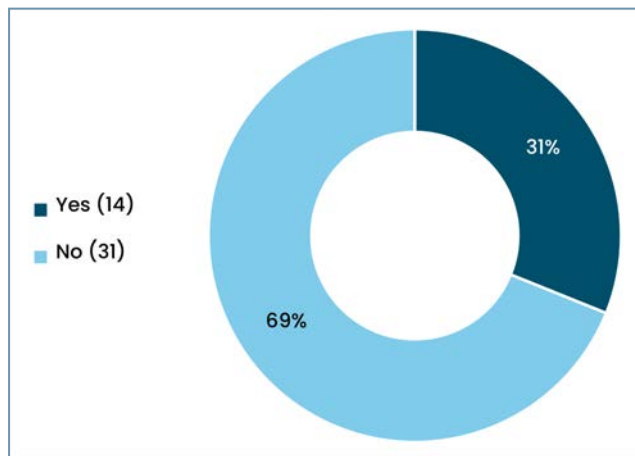
Staff were fantastic, but the organisation was lacking.

Good service, my mother was well cared for during her hospital admissions. I received all of the information I needed and was satisfied with the experience overall.

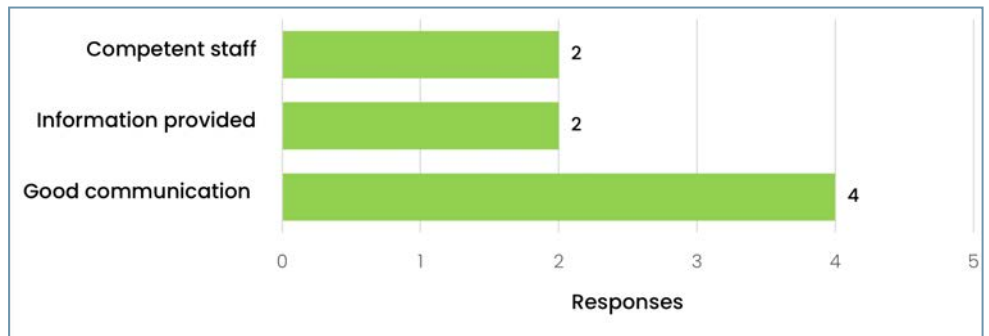
## Information in hospital

Most people we spoke to (including those who rated their overall experience positively) did not feel they were kept informed by the hospital about what was happening, either during the hospital stay or during the discharge process.

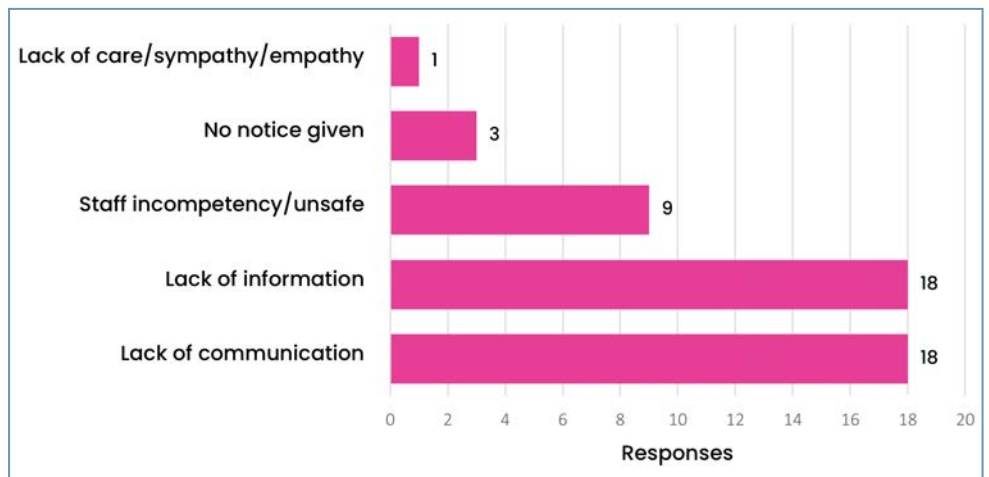
Were you kept fully informed during the hospital stay and discharge from hospital?



### Positive themes



### Negative themes



## Poor communication

Carers told us that communication was poor, no notice was given to them and in some instances, they felt the care their loved ones had received was unsafe.



Not given information, Mum was left alone for 12 hours and she died. No information given about this time; we're taking this to the courts.



No notice given that my mother-in-law was being discharged.



We were given no information, especially in view of no visits being permitted because of COVID.



## Positive feedback

When people told us they felt more informed they spoke of caring staff.



Staff were caring and the service my mother-in-law received was very good. We received information initially, but less so as discharge came closer.

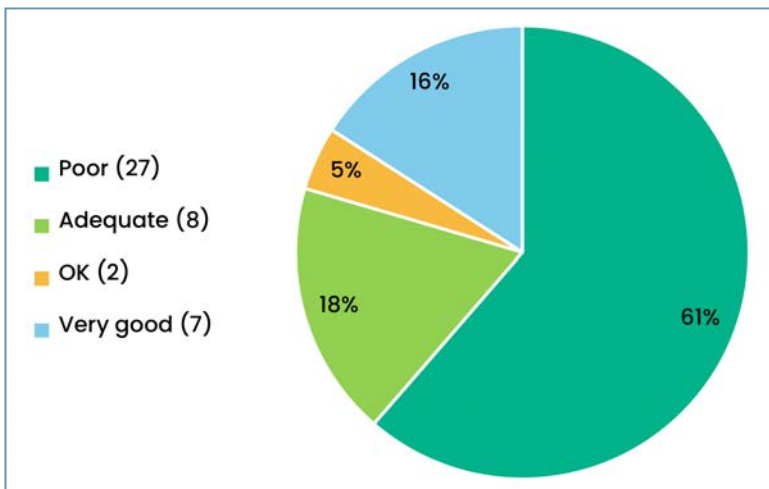


## Discharge process

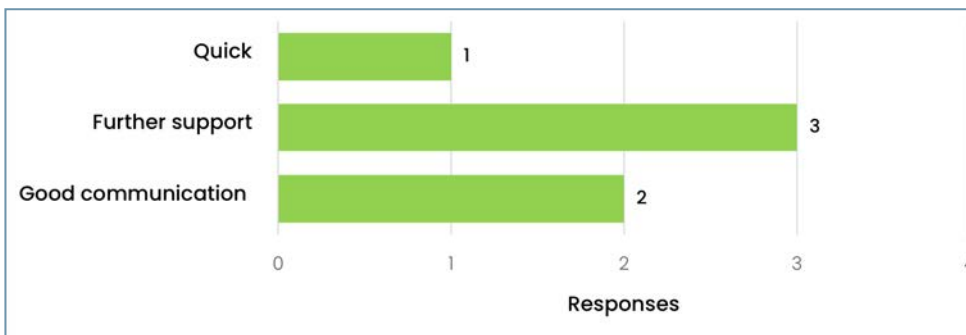
### Quality of the service

Over 60% of people we spoke to rated their experience of discharge from hospital as poor.

Thinking about the discharge process, how would you rate the experience/service?

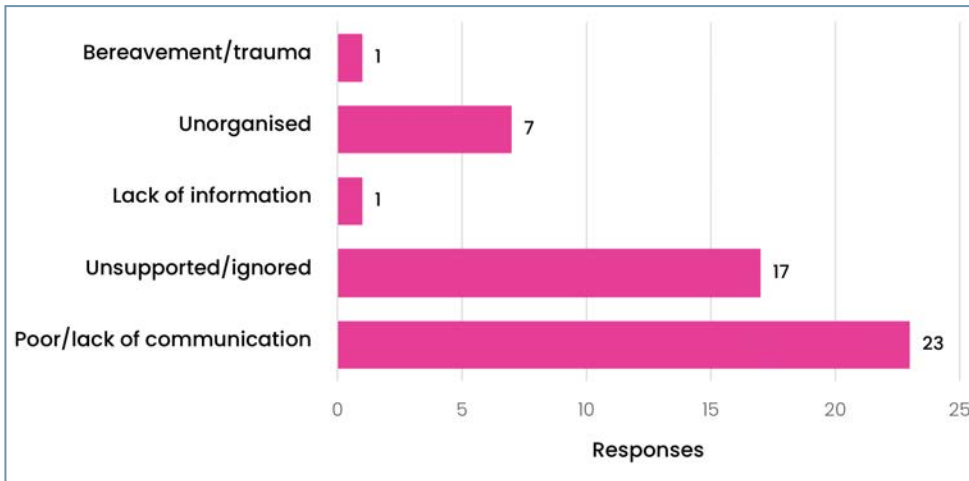


### Positive themes





## Negative themes



### Involvement of carers

Carers told us that they felt unsupported and ignored during the discharge process and there was a lack of information.



**Discharge process wasn't discussed. Carers were arranged but then cancelled.**



**My aunt got progressively worse in hospital, family felt in the dark and couldn't see her. The last words from my aunt over the phone were "help me, help me" before she died. The family feel deeply traumatised.**



**Called and given two hours to collect my dad with no discussion or offers of help. He was sent home with just meds, no support, and no one asked how my dad would be looked after. I had to take emergency time off of work.**



### Positive feedback

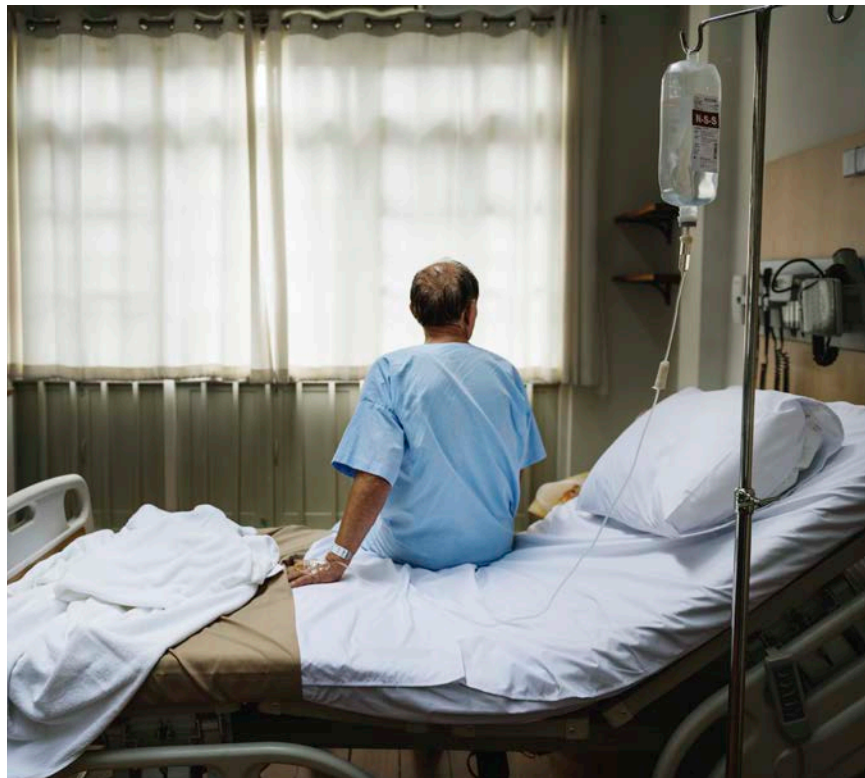
Where the experience was more positive, carers told us that extra support was put in place and discharge from hospital was quick.



**Extra support was already put in place for when my mother was discharged.**



**The waiting time was short which was adequate, but the service was very poor; we got no information and no updates at all.**

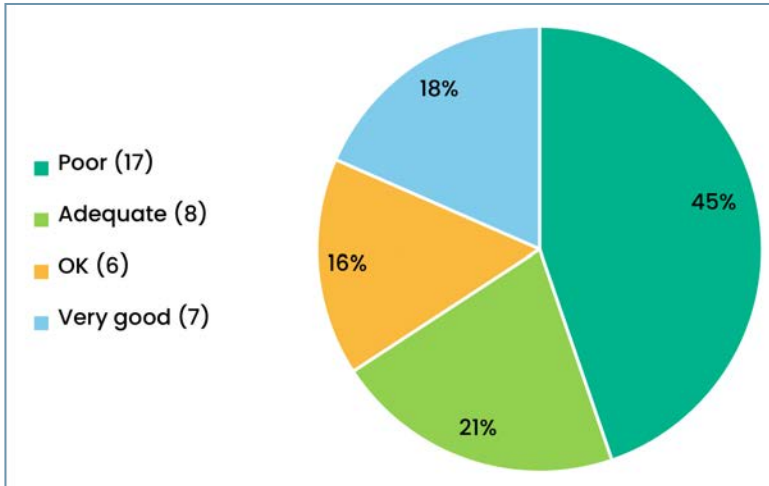


# Further support after leaving hospital

## Quality of the service

Almost half the people we spoke to rated the support they received after leaving hospital as poor. Note: seven people we spoke to chose not to answer this question, some because of bereavement.

**If you and the person you care for were offered support at home after leaving hospital (from your GP, social services, or anyone else), how would you rate it?**



## Involvement of carers

Carers told us they weren't involved enough in planning further care and support and talked about poor handovers and a lack of clear communication.

**I had to chase the information necessary at all times.**

**A care plan for my husband was organised before he came home, but not a lot of help for the carer was included in that care plan.**

**Family felt that the hospital could not see the reality of what their mother was really like and how unsafe she was, all feedback was ignored and important decisions were made without family input.**

## Positive feedback

Carers who talked of a positive experience mentioned specific staff.

**Palliative care, district nurses, Marie Curie staff all did an excellent job in the care of patient.**

**A care package had been in place with two carers coming in daily. Constant attention by district nurses, caring Macmillan nurses and surgery GP was highly praised.**



## Carer identification

26 of the people we spoke to had not been identified as carers. The other 19 were identified as carers through discussions with hospital staff or by the patients medical records.

Was not identified as a carer because I am disabled too.

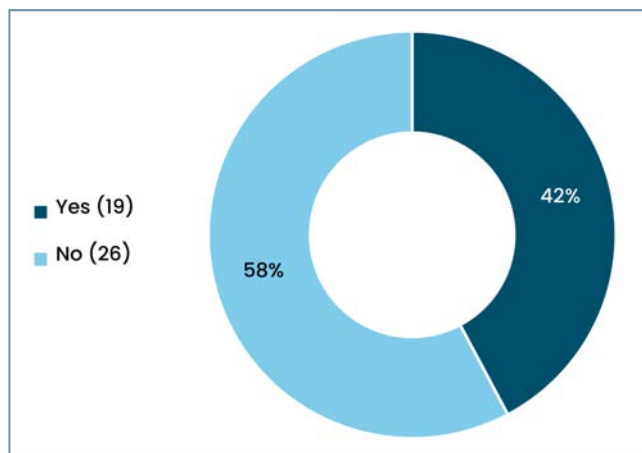
I was not identified as a carer, but my wife was because she's the next of kin. Occupational health were more understanding that I was also a carer for my mother-in-law.

Felt like I was just seen as next of kin.

## Help for carers

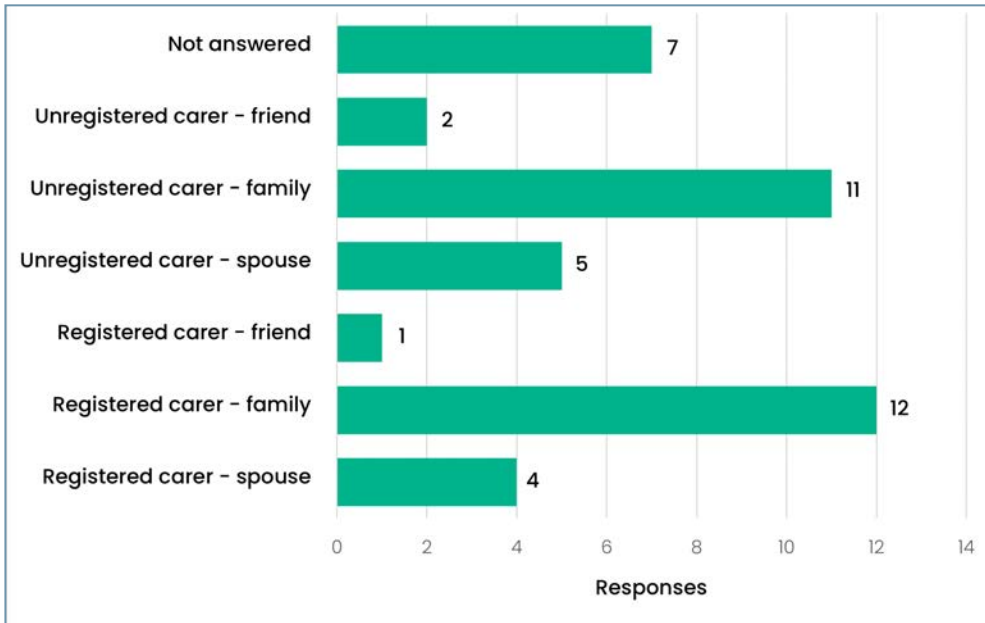
Most of the carers we spoke to do not receive any help.

Do you get any help as a carer?



Around half of the people we spoke to weren't registered as a carer.

### Type of carer



The carers who do receive help mentioned **CRISP** (Carers Resource, Information and Support Programme), carers support groups, their GP, councils and three people told us they receive the Carer's Allowance.

**No Carer's Allowance but support from a local healthcare worker who did a carers assessment.**

**I feel there is no recognition for carers. Hospital staff will not listen to what carers have to say.**

**I am registered with CRISP carers list and Poole social services. I was due to have a carers assessment but not sure as my wife is now in a care home. GP knows I am a carer.**

## Areas for improvement

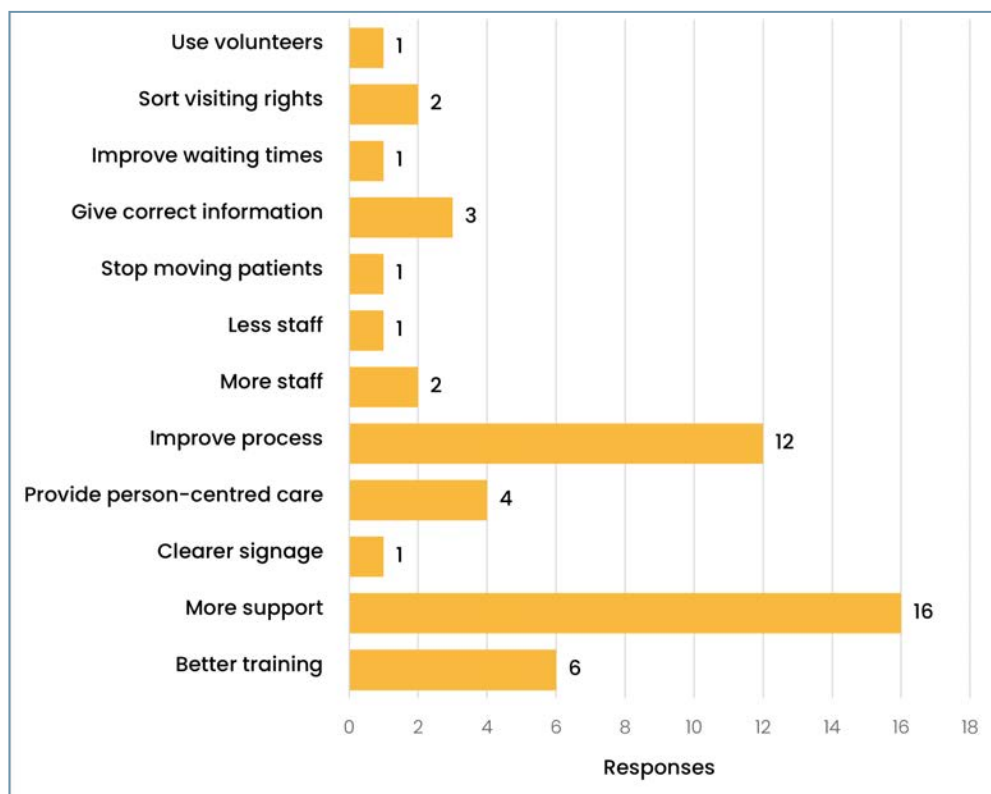
Seven people said there was nothing that the hospital could have done differently to improve their experience, while 37 people offered suggestions for improvement to the Home First service.

Most of the people who offered suggestions to improve the current Home First service wanted to see:

- More support for carers
- An improved process of leaving hospital
- Better training for staff
- Person centred care
- Better information and communication.



## Suggestions for improvement



Completely review the discharge procedure. Listen to and help the carers. Consult with them and most importantly have sympathy.

Ideally a volunteer could sit with elderly patients to give them a little company and care.

Lack of communication caused the most stress for me, the hospital wouldn't answer switch board when asking for updates. Suggestion - have volunteers answer the phones.

More staff needed, the standard of care was poor due to lack of staff.

Daily communication on progress, wellbeing, security, and requirements should be documented for the family. Discharge procedure must include consultation with the family.

## Recommendations

- Improve hospital processes to support carers by having a named contact for carers, 24/7 support, consistent use of carer passports and/ or 'This Is Me' forms and discharge process training for staff using carers experiences from this project.
- Increase awareness for carers and improve carer identification by establishing carer lanyards and carer signs above beds in hospital, Carer Champions at senior and ward level and the creation of quiet spaces and time for carer communications/discussions in hospital.
- Better information for carers to include leaflets and training to help carers to identify themselves and register with GP/council services, a hospital discharge pack and a single link to signpost carers to for support.

## Next steps

We will work with the project team to share our findings and explore ways to make improvements to Dorset's Home First service. We will also share this report with University Hospitals Dorset, Dorset County Hospital, Dorset HealthCare, NHS Dorset, local councils and Dorset Integrated Care System. Recommendations from this project will be taken into the Home First programme for wider delivery and the project team has successfully applied for additional funding to develop a co-production project on improving Home First this year.

## Wider project findings

We worked in partnership with Dorset HealthCare and Dorset Community Action (DCA) on this project. DCA have created a series of powerful videos of carers sharing their stories, that will be used by Dorset HealthCare in the training of hospital staff to improve their understanding of the experiences of carers in Dorset.

Visit: [dorsetcommunityaction.org.uk/carers-voices/](https://dorsetcommunityaction.org.uk/carers-voices/)

## Thank you

We would like to thank everyone who took part in this project and shared their experience with us to help improve the Home First service.

# Appendix

Our volunteers carried out these phone calls as a friendly conversation on the phone using the questions shown below as prompts.

**Note:** A carer is anyone looking after a family member, friend or neighbour who needs help. They might have an illness, disability, physical or mental health problem, or addiction. A carer does not need to be living with the person they care for.

1. Do you get any help as a carer?

*Prompt: Are you registered as a carer with your GP or Council? Do you receive a carers allowance? Are you part of a carers support group?*

Yes

No

Additional comments (if needed)

2. Which hospital was the person you care for attending (please select)?

Bournemouth

Poole

Dorchester (DCH – Dorset County Hospital)

Other – please state

The next series of questions you have a choice between a rating of poor, adequate, OK, or very good

3. How would you rate the service you, and the person you care for, received in hospital?

*Prompt: How was their general experience of the hospital visit*

Poor

Adequate

OK

Very good

Can you tell me a bit more about why you feel this way?

*Prompt: Did you feel supported and cared for? Did you get all the information you needed? Was there a long waiting time to be seen?*

4. Were you identified as a carer by the hospital? If you weren't identified, why do you think this was?

Yes

No

Additional comments (if needed)

5. Thinking about the discharge process, how would you rate the experience?

Poor

Adequate

OK

Very good

Can you tell me a bit more about why you feel this way?

6. If you and the person you care for were offered support at home after leaving hospital (from your GP, social services, or anyone else) how would you rate it?

Poor

Adequate

OK

Very good

Can you tell me a bit more about why you feel this way?

7. Were you kept fully informed about what was happening during hospital stay and discharge from hospital?

Yes

No

Additional comments (if needed)

8. Is there anything the hospital could have done differently to improve your experience?  
*Prompt: Staff attitude? Waiting time? Environment? Information?*
9. Is there anything else you would like to tell us about your experience that we have not asked you about?
10. When was your discharge date from the hospital (roughly)?

## SECTION 2: Demographics

I would like to ask you a few questions about your personal demographics, it is optional to answer, and you do not have to answer any question you do not feel comfortable doing so, but this allows us to collect a broader range of data about the service users. I will ask you about your age, gender, ethnicity, sexual orientation, disability, and the area where you reside. Are you happy to proceed?

*\*Skip this section if the person says no*

If you are comfortable to do so, can you tell me your age? Or shall I read the age bands and you stop me where appropriate?

- 0 – 24
- 25 – 34
- 35 – 54
- 55 – 69
- 70 +
- Prefer not to say

What is your gender? \*Pause after questions to allow interviewee to answer.

- Male
- Female
- Non-binary
- Prefer not to say
- Other (please state)

How would you describe your ethnicity?

- Asian or Asian British (Bangladeshi, Indian, Pakistani, any other Asian background)
- Black or Black British (African, Caribbean, any other Black background)
- Mixed (White/Asian, White/Black African, White/Black Caribbean, any other Mixed background)
- White (British, Irish, any other White background)
- Other Ethnic Group (Chinese, any other Ethnic group)
- I do not wish to disclose this

How would you describe your sexual orientation?

- Heterosexual / straight
- Gay
- Lesbian
- Bisexual
- Other
- I do not wish to disclose this

Do you consider yourself to have a disability? If yes; please tell us. You can select multiple.

- Physical impairment
- Sensory impairment
- Mental health condition
- Learning disability/difficulty
- Long-standing illness
- Other

Which area of Dorset do you live?

- Dorchester
- Weymouth
- Bridport
- Other – please say





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