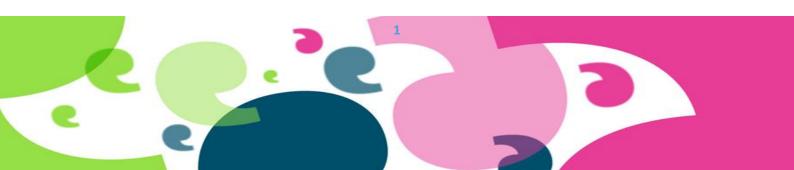


Arrangements for Discharge from the University Hospital of North Tees with a Care Package Report

May 2016





#### Introduction

# **Healthwatch Stockton-on-Tees**



Local Healthwatches have been set up across England to create a strong, independent consumer champion with the aim to:

- Strengthen the collective voice of citizens and communities in influencing local health and social care services to better meet their needs.
- Support people to find the right health and social care services for them by providing appropriate information, advice and signposting.

Healthwatch Stockton-on-Tees works with local people, patients, service users, carers, community groups, organisations, service providers and commissioners to get the best out of local health and social care services. This doesn't just mean improving services today but influencing and shaping services to meet the needs of the local communities tomorrow.

Healthwatch Stockton-on-Tees is steered by a Board of volunteers, commissioned by the Local Authority and accountable to the public. Healthwatch Stockton-on-Tees are the only non-statutory body whose sole purpose is to understand the needs, experiences and concerns of people who use health and social care services and to speak-out on their behalf.

#### Healthwatch has:

- The statutory right to be listened to; Providers and Commissioners must respond to Healthwatch within 20 days of submission of requests for information or reports.
- The statutory power to Enter & View publicly funded health and social care services.
- A statutory seat on the Health and Wellbeing Board.

#### What is Enter & View?

Part of the local Healthwatch programme is to carry out Enter & View visits. Enter & View visits are conducted by a small team of trained volunteers, who are prepared as 'Authorised Representatives' to conduct visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement or capture best practice which can be shared.

Enter & View is the opportunity for Local Healthwatch's to:

- Enter publicly funded health and social care premises to see and hear first-hand experiences about the service.
- Observe how the service is delivered, often by using a themed approach.



- Collect the views of service users (patients and residents) at the point of service delivery.
- Collect the views of carers and relatives.
- Observe the nature and quality of services.
- Collect evidence-based feedback.
- Report to providers, the Care Quality Commission (CQC), Local Authorities, Commissioners, Healthwatch England and other relevant partners.

Enter & View visits are carried out as 'announced visits' where arrangements are made between the Healthwatch team and the service provider, or if certain circumstances dictate, an 'unannounced' visit can take place.

Enter & View visits are carried out if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

# Arrangements for Discharge from University Hospital of North Tees with a Care Package

#### Rationale and Purpose of the Visit

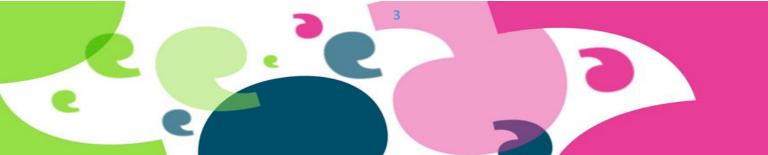
Following the work completed by Healthwatch Stockton in 2014 on 'Arrangements for Discharge' from the University Hospital of North Tees, the report stated that further work would be carried out with a brief investigation in to care package arrangements following patient discharge. In addition to this Healthwatch Stockton-on-Tees also had data from feedback received during community engagement. This included that a suitable care package be in place when elderly patients are discharged, one 91 year old patient was discharged without a package of care and the family had to admit her to a private care home for a week.

The report explained that this work was a confirmed project on the 2015/16 work programme.

For reference please follow the link and see Executive Summary: <a href="http://www.healthwatchstocktonontees.co.uk/sites/default/files/final\_report\_d">http://www.healthwatchstocktonontees.co.uk/sites/default/files/final\_report\_d</a> <a href="mailto:ischarge\_from\_hospital\_0.pdf">ischarge\_from\_hospital\_0.pdf</a>

#### Aim:

• To establish and determine to what extent, care package arrangements are causing delays in patients going home.





#### **Objectives:**

- Research and gain an understanding of the hospitals care package arrangements including what policies and procedures must be followed, expected waiting times for transfer home with a package of care.
- Healthwatch staff planned to have conversations with patients / relatives / carers etc. to gather intelligence regarding patient experience and delays for patients being discharged with care packages.
- Analyse feedback and determine what, if any recommendations can be made to improve patient experience and reduce delays for patients discharged with a package of care.

## Methodology

Healthwatch staff arranged a meeting with University Hospital of North Tees Trust staff to discuss conducting the proposed work. An agreement was made to carry out this work with the support of the social care team to gather evidence of patient experience.

Healthwatch staff designed question prompts for gathering patient experience through conversation and questionnaires for the social care team staff, family members and carers. Healthwatch staff and volunteers visited the Local Authorities intermediate care home, Rosedale Centre. (see appendix 1 for staff questionnaire and appendix 2 for patient questionnaire)

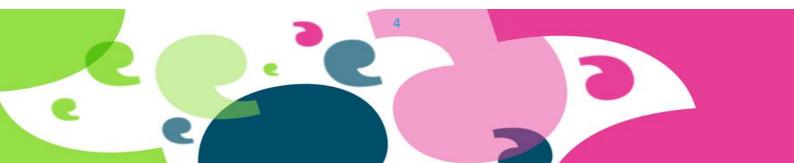
Following analysis of the feedback gathered, Healthwatch may provide recommendations to the Trust to improve patient experience throughout the discharge with care package process.

#### Results

#### Patient, family and carer feedback

Healthwatch Stockton-on-Tees spoke to patients in the community and at Rosedale Centre who had been discharged from University Hospital of North Tees with support.

Healthwatch asked patients if they had been fully informed of what was happening during their stay in University Hospital of North Tees. \*Text in pink are actual quotes from patients, family, carers or staff.





#### Comments included;

'probably to a family member'

'Hospital were waiting for a place at Rosedale'

'They don't tell you an awful lot' This patient's care package was being put in place and the social worker had explained to the patient this was being sorted out.

Another patient commented they had 'always found the hospital alright' they had had a discussion about coming to Rosedale and were 'well treated'

A patient from ward 42 who was transferred to Rosedale was told on the day of the transfer. She explained someone came and packed her belongings and she felt rushed. Her daughter who was on holiday commented 'the communication was dreadful, it's as though no one has time to discuss anything' She felt there was a lack of staff and therefore lack of care.

The social worker had informed the family the transfer might happen, and that it was more likely it would be on the Wednesday or Thursday of the following week, the patient was transferred on Monday and they didn't expect it to be that quickly. The patient's daughter had provided a mobile contact number for staff, however on the daughters return home there was a message on the answer phone informing her of her relatives move to Rosedale.

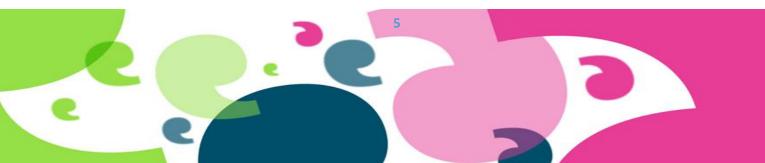
Healthwatch spoke to another patient who said 'North Tees arranged all and did not inform family' However, the family felt they may have informed the patient.

A patient who Healthwatch spoke to in Rosedale Centre said 'All very good in here'.

When patients were asked when a discussion about their package of care had taken place 37.5% said it was towards the end of their stay, 25% said no discussion had taken place and 37.5% did not comment or did not know. 75% of the patients we spoke to had not had a package of care in place before their admittance to hospital.

Healthwatch spoke to a lady at her home who had been discharged from University Hospital of North Tees. She waited on the ward to go home and was informed of the day she would go home in advance. She informed Healthwatch that her medication had been brought to the ward.

She didn't feel there had been a delay to her returning home due to care package arrangements.





She explained she had observed 2 elderly ladies being treated on the ward by staff who were 'not as kind and sympathetic as they could have been' she commented 'some are brisk' She also commented that the intermediate care team were 'good'.

A family member fed back to Healthwatch on her experience with delayed discharge for her elderly father. After 2 weeks in University Hospital of North Tees and medical needs met, he continued as an inpatient for a further 6 weeks. The patient had a needs assessment in place and the intention was to admit him to Rosedale Centre. He was last on a waiting list of 12 people for transfer to Rosedale and the family could see a deterioration in his health due to the long delay. Due to him not getting up and about he was becoming incontinent. The family also felt he was becoming institutionalised and made the decision to move him to a nursing home, themselves.

Another family member informed Healthwatch that her mum spent an extra night in the hospital due to the prescription not being ready on the day of discharge as it had missed the deadline in pharmacy.

Other comments collected from patients, family, friends or carers on their views and experience of University Hospital of North Tees included:

'Staff at North Tees had to be reminded to contact social services in order to arrange a care package. Social worker was very good and quickly put everything in place'

'My mother was well looked after on the ward. I cannot remember the ward number but it was the ward on the 7th floor on the right hand side after leaving the lift'

'No access to patient notes, staff very slow to respond to any requests. Unable to get clear answers on diagnosis, treatment, test results, etc not helped as mother has bad memory. I felt like a nuisance'

## **Staff** Feedback

During the meeting with the Trust to discuss the proposed plan Healthwatch Stockton-on-Tees were informed that the hospital plans to introduce a delayed transfer of care guidance and this is currently being drafted. They also asked the Healthwatch team to consider that there can be many reasons for a delay to a patients discharge. One example given was that a patient may not be aware that they cannot be discharged if the hospital are waiting for them to have a mental health assessment.





Healthwatch spoke to a member of staff from the re-enablement team who informed us that the care package support service may be set up in the hospital but the assessment is now done in the home.

Intermediate Care staff felt it was unusual for any delay in the discharge of a patient as they can assess support provision very quickly and delay would be either due to the wait for equipment, medication or transport.

The evidence gathered during Healthwatch's investigation suggests that rather than delays to discharge due to care package arrangements University Hospital of North Tees are under increasing pressure with a lack of available beds and are at times discharging patients inappropriately, or not coordinating the process effectively which impacts on the safety of the patient and quality of care.

The social care team were happy to comment on the discharge process with regard to care packages from University Hospital of North Tees.

When asked what works well regarding the referral process from the hospital feedback included;

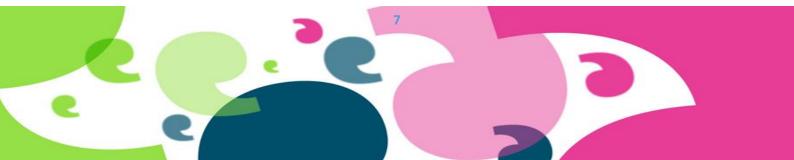
- 'Being able to liaise with discharge liaison team'
- 'Referrals now come through first contact team which helps'
- 'Referrals coming into Adult Social Care via one point First Contact Adults'
- 'When a discharge liaison team member is based on the ward'

Healthwatch received more comments regarding the positive impact of specific staff and Discharge Liaison Team (DLT) being present on wards, particularly on wards 32 and 33, where this was helping to facilitate the discharge process.

When asked what could improve regarding the referral process from the hospital the following comments were given;

- 'Having a DLT on each ward'
- 'More information on referral (ie.historical info)'
- 'Better communication with staff on ward'
- 'The actual referral information is sometimes difficult to read or incomplete/missing'
- 'Referrals being more timely'
- 'Receiving referrals from wards with up to date information to ensure patients are medically fit and would benefit from short term care'
- 'Better communications from the ward to the team'
- 'Prescriptions being made up in line with discharge times'

One member of staff felt that knowing the actual time a client would be discharged to enable care to be set up would be beneficial.





Feedback from social care staff highlighted to Healthwatch that information is not always accurate on referrals from University Hospital of North Tees with medical history not always up to date. Family members information can be missing and lack of other information can result in the referral going to the wrong team.

Healthwatch asked the social care team when assessing a patient for a care package what barriers could they identify?

Staff fed back that sometimes they are told a patient is medically fit, they assess and set up a service, as told the patient is going home, only to find that they don't go home as they were not medically fit.

Most echoed this with comments such as;

- 'Not actually medically fit'
- 'Medically fit from consultants point of view however if mobility issues OT/physio have to ensure safe discharge'

Healthwatch asked the team to feedback other reasons there may be delays to patient discharge from University Hospital of North Tees. Comments included:

- 'Given incorrect details'
- 'Given not enough information around medical conditions'
- 'Unable to contact family or friends'
- 'Not been 48 hours clear of D&V'
- 'If hospital haven't arranged a district nurse'
- 'No food or heating for patient'
- 'Setting up a long term care package can take time as they need notification of start date but I'm not aware if delays are due to this'

The team informed Healthwatch that if a referral is made late in the day, or late on a Friday, they will visit the ward as soon as they can or assess at home. As the team don't work weekends if a referral is made late on a Friday they can't visit until the following Monday.

It was highlighted to Healthwatch that they are aware of the pressures wards and ward staff are under at University Hospital of North Tees and one member of the social care team commented 'there is some very good goodwill around but sometimes I feel wards need some education around how community services work'

Client case studies were shared with Healthwatch to support the issues raised by the social care teams.

Evidence from one case highlighted a discharge that was not coordinated effectively, through lack of communication and planning, resulting in the social service team responding to a situation of potential crisis in the community.



Another case evidenced a client being discharged who had been assessed by rapid response previously, they felt he may have long term care needs, he was re-admitted and discharged without assessment. The lack of communication from the ward to the Intermediate care team was pointed out to the Staff Nurse who had responded by saying if she had to make calls all the time, she wouldn't get any work done. It was felt that if a discussion had taken place Intermediate Care (IC) could have facilitated the referral going to the correct team in a timely manner. On the day of discharge it was assumed without discussion that IC would start upon discharge despite the service for this patient been closed down previously and reassessment needed.

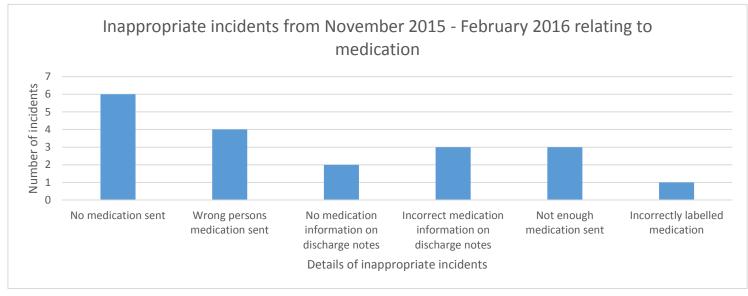
The IC team had to respond to avert a crisis on another occasion when a 92 year old patient, anxious about returning home, was discharged with the offer of support from one family member who did not live locally and was not supportive of his relative receiving care. Lack of discussions with other family members, who also did not live locally, resulted in a potential crisis situation for the vulnerable elderly client. A member of the IC team commented 'I feel that more information gathering and discussions with other family members should have taken place to ascertain exactly what the situation was, given that the client had expressed anxiety in going home'

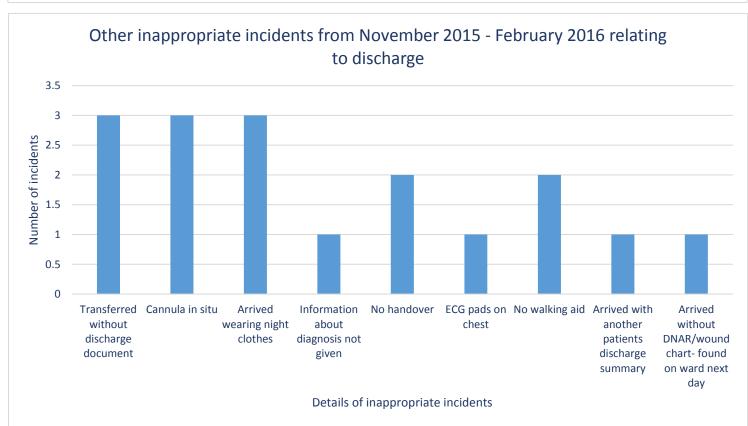
Another family member informed Healthwatch that her mum spent an extra night in the hospital due to the prescription not being ready on the day of discharge as it had missed the deadline in pharmacy.





A number of inappropriate referrals from University Hospital of North Tees to Rosedale intermediate care home were recorded and shared with Healthwatch. The graphs below show the inappropriate incidents recorded from 24<sup>th</sup> November 2015 to 22<sup>nd</sup> February 2016 relating to medication and discharge.







## **Supporting Information**

NHS England confirm that the work on refreshing the 'Delayed Transfer of Care (DTofC)' Guidance was identified and commissioned earlier in the year in response to a number of ongoing operational issues and concerns from local health and social care systems. University Hospital of North Tees made the following comment to Healthwatch;

'The guidance has recently been changed and we are working with key stakeholders towards implementing this new guidance. We already have in place a process for managing and reporting delayed discharges from hospital'

Healthwatch were also informed that it is rarely one person's responsibility to implement a discharge plan.

'The discharge process is complex and often involves different professionals from different organisations'

#### Conclusion

Healthwatch Stockton-on-Tees gathered a range of feedback from patients, family members, carers and staff. Most patients who Healthwatch spoke to praised the staff from the University Hospital of North Tees, the Intermediate Care and Community Care teams about the care they received. However it was brought to Healthwatch's attention that recommendations could be made to improve the transition from the hospital to receiving care in the home or in to Intermediate Care. The recommendations would improve patient experience, facilitate enhanced coordination of services and also reduce risk for patients being transferred to the Intermediate Care facility. Improvements to communication in particular would increase quality, safety and patient experience.

## References

- University Hospital of North Tees website: <a href="http://www.nth.nhs.uk/hospitals/north-tees/">http://www.nth.nhs.uk/hospitals/north-tees/</a>
- Rosedale Care Centre: <u>http://www.nhs.uk/Services/careproviders/Overview/DefaultView.aspx?id=70254</u>
- Intermediate Care Team: <a href="http://www.nth.nhs.uk/services/intermediate-care/">http://www.nth.nhs.uk/services/intermediate-care/</a>



#### Recommendations

- 1. Healthwatch recommend that timely and coordinated discharge should be facilitated by the University Hospital of North Tees ensuring patients who require additional care and support are not discharged late in the day or on Friday's. This would support the safe return of patients to their home with management of assessments and services put in place soon after discharge, increasing patient confidence and improving patient experience.
- 2. Healthwatch recommend a review of the procedure for supply and distribution of medication for discharge with prescriptions being made up in line with discharge times, to facilitate timely discharge and eliminate inappropriate incidents.
- 3. Recommendations to improve communication:
  - Healthwatch recommends the need for more effective and timely communication to ensure a more joined up approach to the care and discharge of patients. Coordination between ward staff and community services needs improving along with an increased understanding of the other services and roles involved in the facilitation of discharge and care package arrangements.
  - Healthwatch recommend that referral assessment and information is accurately evaluated to ensure it is concise, legible and correct.
  - It is also recommended that procedures are put in place to ensure family and carers are fully informed of the patients condition and discharge pathway. Healthwatch recommend this information and the discussions had with family members is recorded accurately to avoid inappropriate discharge of vulnerable patients and management of appropriate care to be set up prior to discharge.
- 4. Healthwatch recommend that the Trust take steps to ensure the safe transfer of patients in to Intermediate Care and the community with an evaluation of the procedures for transfer to eliminate inappropriate incidents, reducing risk to patients.
- 5. Healthwatch recommend the Discharge Coordinators are given the opportunity to review their role and processes.
- 6. Consideration should be given to the Discharge Facilitators covering weekends to encourage a seamless discharge process 7 days a week.



## **Acknowledgements**

Healthwatch Stockton-on-Tees would like to thank the patients, their families, friends and carers who contributed to this work by providing their views and experiences of care package arrangements. Healthwatch also thank the University Hospital of North Tees for their advice and support with this work. Healthwatch would like to acknowledge special thanks to the Intermediate Care team and Rosedale Centre staff for their full support in the sharing of experiences and information.

The response received from North Tees and Hartlepool Hospitals NHS Foundation Trust on the 20<sup>th</sup> July 2016 can be read below

As agreed I have distributed the report amongst colleagues and thank you for giving us the opportunity to comment on its findings and we would like Health watch to consider the following responses on behalf of the Trust -

- The report is gratefully received and the comments very supportive in sharing positive areas and highlighting areas where we can improve patient experiences, processes and the services we provide concerning the discharge process which includes packages of care.
- The comments do mirror some themes that we pick up as part of internal SPEQS processes and friends and family themes.
- In terms of improving the processes in Stockton we as an organisation are
  working very closely with Stockton Borough Council and their plans to
  implement the new 'Assessment and Rehabilitation Team' in August
  2016. This team will be collocated with the Discharge Liaison Team at
  the University hospital of North Tees and will support all aspects of
  hospital discharge. Working together we aim to improve the discharge
  process into Rosedale and reduce the number of incidents in regards to
  this process.
- The Discharge Liaison team are fully recruited to and work across all hospital wards with a focus on safe and timely discharge planning. The team work with ward staff, community staff and social care to manage the transition between hospital and home. Any incidents that arise during this transition are investigated individually and lessons learnt accordingly. We are also in the process of looking at our services to support discharge across 7 days and we will keep you informed of this piece of work as it transpires. This will be done in conjunction with



Stockton Local Authority who have said they will support us in this new initiative if it is deemed to be productive and supports a safe and timely discharge.

• In the Trust we are working with CCG and Local Authority partners to improve our discharge process and adopt the concept of 'discharge to assess'. This concept means Patient's receive the right care in the right place at the right time and a prolonged hospital admission is avoided unless it is clinically necessary.

The discharge process can be a complex area with close working with colleagues, agencies, patients and carers a necessity to ensure timely and appropriate packages of care are agreed and in place.

We will keep you informed of the progress with this piece of work as you require and do also offer to come and present the working, processes and updates if that will help with understanding and reassurance of progress.



# Appendix 1



OHNT Care package work, 25 " Feb – 26 " February 2016
Questions for social care team /staff
Date
1. Regarding the referral process from the hospital:
What works well?
What could improve?
2. From consisting a matient to core analysis most stone what however con you identify?
2. From assessing a patient to care package next steps what barriers can you identify?





individual receiving a care package. Additional comments on other issues relating to UHNT and patients requiring assessment/care packages are also welcome.

3. Please provide additional comments on the reasons why there may be delays to an

 $\label{thm:complete} \mbox{Healthwatch Stockton-on-Tees would like to thank you for taking the time to complete this questionnaire.}$ 

Website: <a href="www.healthwatchstockton.co.uk">www.healthwatchstockton.co.uk</a> Email: <a href="mailto:healthwatchstockton@pcp.uk.net">healthwatchstockton@pcp.uk.net</a> General Telephone: 01642 688312

Information and Signposting Query: 08081729559

Post: Healthwatch Stockton-on-Tees, Catalyst House, 27 Yarm Road, Stockton-on-Tees, TS18 3NJ

# Appendix 2



Date:	
Initials:	
Age:	



# <u>Care Package Arrangements at The University Hospital of North</u> <u>Tees – Rosedale patients</u>

1.	Which area do you live in? Please provide the first half o	r your postcode e.g. 153
2.	Were you transferred from North Tees Hospital     Yes	es No
3.	3. Did you have a care package in place before you were a	dmitted to hospital?
	O Yes	
	О №	
li	If yes what services were you receiving?	
4.	a. When did a discussion about your package of care take p	place?
	O When I was admitted to North Tees Hospital	
	O In the first few days of my stay	
	O Towards the end of my stay	
	O On the day I was getting discharged	
	O There has been no discussion	
5.	<ol> <li>During your stay in hospital were you fully informed of v you explain who informed you of what was happening p</li> </ol>	





6.	Who is supporting you now you are here?
7.	What could have been improved during your stay in North Tees Hospital?

Healthwatch Stockton-on-Tees would like to thank you for taking the time to complete this survey, your feedback is very important to us and will help shape improvements in care package arrangements.

If you wish to share more of your views and experiences of health and social care services in your area then please get in touch using the contact details below. If you would like to become a member of Healthwatch Stockton-on-Tees and find out more about the work we do, then please fill in a membership form which can be found on our Website: <a href="www.healthwatchstockton.co.uk">www.healthwatchstockton.co.uk</a>

Email: healthwatchstockton@pcp.uk.net

General Telephone: 01642 688312

Information and Signposting Query: 08081729559

Post: Healthwatch Stockton-on-Tees, Catalyst House, 27 Yarm Road, Stockton-on-Tees, TS18 3NJ