POLICY REVIEW: HOSPITAL DISCHARGE - ISSUES HIGHLIGHTED BY THE 2010 SURVEY OF PATIENTS ON LEAVING HOSPITAL

REPORT OF THE CHIEF EXECUTIVE

1. Purpose of Report

1.1 To provide the Scrutiny Committee with the key findings from national patient surveys which are relevant to leaving hospital services in support of the evidence for the policy review of hospital discharge.

2. Background

- 2.1 At its meeting on 6 June 2011 the Scrutiny Committee agreed to carry out a policy review with the following aim: To establish how effectively health and social care services are working in partnership to support timely discharges from hospital and promote independence in community settings.
- 2.2 At the Scrutiny Committee on 6th September 2011, the Committee received a comprehensive report setting the scene for the policy review. This report included information about the discharge planning process, services that support discharge, and statistics for delayed discharges.

3. Introduction

- 3.1 The Care Quality Commission (CQC) survey was carried out between September 2010 and January 2011, and gathered the views of patients who were discharged between June and August 2010. Natinally, over 66,000 patients from 161 acute and specialist NHS trusts in England responded to the survey, a response rate of 50%.
- 3.2 The results from the survey are primarily intended for use by NHS trusts to help improve patient experience and their performance.

4. Leaving Hospital – National In-Patient Services

- 4.1 There were no statistically significant changes from the 2009 survey in the proportion of participants feeling involved in decisions about their discharge from hospital. Fifty-four percent said they 'definitely' felt they were involved and 30% felt this was the case 'to some extent'. Sixteen percent said that they did not feel involved in decisions about their discharge from hospital.
- 4.2 Waiting for discharge from hospital Two fifths of respondents (40%) said that their discharge from hospital was delayed, no change from

2009. For those who were delayed, the most commonly cited reason was to wait for new medicines (61%) followed by; waiting to see the doctor (16%), waiting for an ambulance (9%) and 'something else' (14%).

- 4.3 There were no statistically significant changes in the reported length of the delay from the 2009 survey. Sixteen percent of those who experienced a delay to discharge from hospital said that it was 'up to one hour', 28% said they were delayed between one and two hours, 33% between two and four hours and 23% longer than four hours.
- 4.4 Medication Of those who had medication to take home with them, three quarters (75%) said that a staff member 'completely' explained the purpose of the medicine in a way they could understand, no change from 2009 though a decrease from 79% in 2002. Seventeen percent said that they received an explanation 'to some extent', with almost a tenth (9%) saying that a member of staff did not explain the purpose of medicines they were to take home with them.
- 4.5 Thirty seven of respondents said that a member of staff 'completely' told them about medication side effects to watch out for after they went home which, while not being statistically significantly different to 2009, is a decrease from 39% in 2002. Almost a fifth (19%) said that medication side-effects were explained 'to some extent', not a statistically significant change from 2009 but an increase from 16% in 2002. This leaves 44% who said that they were not told what medication side-effects to watch out for after they went home, though this is an improvement from 45% in 2009.
- 4.6 Three quarters (75%) of respondents said they were 'definitely' told how to take their medication in a way they could understand, 15% said they were 'to some extent' and 10% said they were not told in a way they could understand.
- 4.7 About two thirds (67%) of respondents who took medicines home responded 'yes, completely' when asked if they were given clear written or printed information about their medicine. Sixteen percent responded 'yes, to some extent' and 17% 'no'.
- 4.8 Information at discharge Sixty-five percent of respondents said that they were given written or printed information about what they should or should not do after leaving hospital, an improvement from 63% in 2009. The remainder (35%) said that they did not get this information (37% in 2009).
- 4.9 Respondents were asked if a member of staff told them about any danger signals they should watch for after they went home. Forty one percent responded 'yes, completely', an increase from 39% in 2009. There was a corresponding decline in the proportion responding 'no'

- (38%, an improvement from 40% in 2009.) The remaining 21% answered 'yes, to some extent'.
- 4.10 The proportion of respondents who reported that hospital staff told them who to contact if they were worried about their condition or treatment after leaving hospital increased from 75% in 2009 to 76% in 2010, while the proportion of those saying 'no' decreased correspondingly from 25% in 2009 to 24% in 2010.
- 4.11 Forty-four percent of respondents said that doctors or nurses 'definitely' gave their family or someone else close to them all the information they needed to help care for them, with 23% responding 'yes, to some extent'. Just under a third of respondents (32%) said that a doctor or nurse did not give their family or someone else close to them all the information they needed to help care for them.
- 4.12 Copies of letters Department of Health guidance states that patients should receive copies of letters sent between the hospital and the patient's family doctor. For the first time since the question was first asked in 2005 the majority of respondents (53%) reported that they did receive copies of these letters, an increase from 47% in 2009.
- 4.13 Respondents who did receive these letters were asked if the letters were written in a way they could understand. Seventy four percent reported that they 'definitely' were, an improvement from 73% in 2009. There was a corresponding decrease in the proportions responding that the letters were 'to some extent' written in a way they could understand (23% in 2010 and 24% in 2009) and those responding that the letters were not written in a way they could understand (3% in 2010 and 4% in 2009).

5. City Hospitals Sunderland NHS Foundation Trust

5.1 At the end of 2009, a questionnaire was sent to 850 recent inpatients. Responses were received from 429 patients at City Hospitals Sunderland NHS Foundation Trust.

	Based on patients' responses to the survey, this trust scored:	How this score compares with other Trusts
Being involved in decisions about their discharge from hospital, if they wanted to be	7.1/10	About the same
Not being delayed on the day they were discharged from hospital	8.6/10	Better
Whether they were given written or printed information about what they should or should not do after leaving hospital	6.9/10	About the same
Having the purpose of medicines explained to them in a way they could understand, when given medicines to take home	8.7/10	About the same
Being told about the side effects to watch out for,	5.2/10	About the same

when given medicines to take home		
Being told how to take medication in a way they could understand, when given medicines to take home	8.9/10	Better
Being given clear written or printed information about their medicines, when given medicines to take home	8/10	About the same
Being told about any danger signals to watch for after going home	5.9/10	About the same
Information for family and friends for information being given to their family, or someone close, about how to help care for them	5.8/10	About the same
Being told who to contact if they were worried about their condition or treatment after leaving hospital	7.8/10	About the same
Receiving copies of letters sent between hospital doctors and their GP	5.7/10	About the same
Letters between the hospital doctors and family GP being written in a way they could understand	8.7/10	About the same

6. National Mental Health Services

- 6.1 The 2009 CQC survey of people who had recently had an inpatient stay for acute mental health problems was the first of its kind and collected responses from over 7,500 people. The survey asked people all about their experiences of acute inpatient mental health services along the pathway from admission to leaving hospital, including the care and treatment they received, day-to-day activities, and relationships with staff.
- 6.2 Respondents were asked a series of questions about their discharge from hospital. The majority (74%) of people said that they were given enough notice about their discharge from hospital, meaning that 26% were not. Just under a quarter (22%) said that their discharge date had been delayed, the main reason being that they had to wait to see the doctor or nurse in charge of the ward (cited by 34%). Other reasons cited were 'having to wait for suitable accommodation' (9%), and 'having to wait for community services to become available' (7%), 'having to wait for financial help' (1%). Another unspecified reason was given by 49%, and we would encourage trusts to explore the reasons for these delays. Respondents were asked whether hospital staff took their home situation into account when planning their discharge from hospital. Just under half (49%) answered 'yes, completely', 31% answered 'yes, to some extent' and 21% said no.

7. Northumberland, Tyne and Wear NHS Foundation Trust

7.1 At the start of 2009, a questionnaire was sent to people who had recently had an inpatient stay for acute mental health problems. Responses were received from 77 service users at Northumberland, Tyne and Wear NHS Foundation Trust.

	Based on patients' responses to the survey, this trust scored:	How this score compares with other Trusts
Being given enough notice of discharge from hospital	7.6/10	About the same
Not being delayed on the day they were discharged from hospital	8.2/10	About the same
Staff taking their family and home situation into account when planning discharge	6.4/10	About the same
Having a contact number for someone from their local mental health services to phone out of office hours	7.2/10	About the same
Being given information about how to get help in a crisis before leaving hospital	7.5/10	About the same
Being contacted by a member of the mental health team after discharge from hospital	6.6/10	About the same

8. Conclusion & Recommendations

8.1 The Committee is asked to receive this report in relation to patient information about leaving hospital as part of the evidence gathering for the policy review.

9. Background Papers

Care Quality Commission National in-patient survey results 2010

Contact Officer: Karen Brown 0191 561 1004

karen.brown@sunderland.gov.uk