

## FOR IMMEDIATE RELEASE

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### **What it's really like to be discharged from hospital: Healthwatch Leicestershire play a national role**

- Significant attention given to improving discharge processes in recent years
- Over 2,000 people, family and staff share their stories to help gauge progress
- Common failings continue to persist including problems sorting medication, transport and community care support

A new briefing launched on 5 October 2017 by Healthwatch England - ['What happens when people leave hospital and other care settings?'](#) - outlines where important steps have been made towards improving the discharge process for patients.

The 2,083 stories, taken from people across the country and used to compile the findings, continue to show significant variation. This highlights the need for good practice to be spread and properly evaluated, to ensure it is having the right impact.

In 2015 Healthwatch England's ['Safely Home'](#) inquiry (which also had contribution from Healthwatch Leicestershire) helped to galvanize system-wide leadership to tackle the underlying problems of transferring patients between services. Yet it is clear, from NHS statistics such as the numbers of delayed transfers of care hitting record levels, that the challenge is still growing.

This new briefing by Healthwatch England looks at what 46 local Healthwatches heard about people's experiences of the discharge process since 2015, including research taken from Healthwatch Leicestershire.

Key findings include:

- **People still don't feel involved in decisions** or that they have been given the information they need, including advice on possible side effects of new medications or who to call for advice out of hours
- **People continue to experience delays and a lack of co-ordination** between services, highlighting specific problems with hospital pharmacy services, patient transport, and care homes or family members not being notified when people are about to be discharged

- **People feel left without the services and support they need after leaving hospital**, with discharge plans not considering patients' other clinical needs or home environment, including whether or not patients have carer responsibilities

Healthwatch is calling for a fuller understanding of what's happening in local areas, with local leaders urged to use the experiences of the people behind the delayed transfers of care statistics to identify where improvements can be made.

Healthwatch Leicestershire has received two formal responses to their recommendations from University Hospitals of Leicester NHS Trust. One relating directly to [staff training](#) and the other relating to [medication, delays and cultural change](#).

The experience of a 75 year old lady, highlighted in [‘The Lived Experience of Hospital Discharge’](#) report was very typical of what Healthwatch Leicestershire, and indeed many other local Healthwatch, have heard about problems of coordination of services and communication with patients during the discharge process.

*“I was asked to vacate my bed space by 11.00am for a new admission, so I stayed in a day room for 6 hours, only to be told that my medication and discharge letter was not complete.*

*“I had to prompt the staff to give me antibiotics, whilst waiting in a day room, so that no doses of medication were missed, but they had nothing for me.*

*“I felt very unwell in the day room on chair for 6 hours and by the time I got home I felt more poorly than before I was admitted.”*

*“My son took me home and had to pick up my medication at 6.00am the next morning from the hospital.”*

The new Healthwatch briefing highlights a number of approaches that are already helping to reduce delays getting people out of hospital, such as [‘Discharge to Assess’](#) and [‘Red2Green’](#). However, wherever they are introduced, new programmes must be evaluated to ensure they are having the right impact, and that people are getting home safely and efficiently.

**Imelda Redmond, National Director of Healthwatch England, said:**

*“Getting people out of hospital and safely home is not about a single point in time. It is an ongoing process that requires thought, planning and support before, during and after the moment someone is actually discharged. Things work best when staff in all services work together to provide a seamless experience.*

*“Whilst we heard plenty of positive stories from people moving between hospitals, care homes and their own homes, the number of people stuck in hospital waiting to leave has increased significantly. From what people tell us, it is clear many of the common problems around communication and coordination are still ongoing. Healthwatch will continue to play our part, working with hospitals, community services and the public to improve people’s experiences.”*

## Notes to Editors:

### About Healthwatch Leicestershire

Healthwatch Leicestershire is an independent consumer champion for health and social care in Leicestershire. The organisation helps to shape and improve local health and social care in our community. Healthwatch Leicestershire is part of the Healthwatch national network, established by the Government to ensure local patients and users have a greater input to shaping and designing local services.

<https://www.healthwatchleicestershire.co.uk/>

### About Healthwatch England

Healthwatch is the independent champion for people who use health and social care services. We exist to ensure that people are at the heart of care. We listen to what people like about services, and what could be improved and we share their views with those with the power to make change happen. We also help people find the information they need about services in their area.

We have the power to ensure that people's voices are heard by the government and those running services. As well as seeking the public's views ourselves, we also encourage services to involve people in decisions that affect them. Our sole purpose is to help make care better for people.

[www.healthwatch.co.uk](http://www.healthwatch.co.uk)

@HealthwatchE

### Discharge in numbers

- In July 2017, the latest month for which data is available, an average of 5,861 NHS beds a day were occupied by patients who don't need them
- This is up 23.4% compared with July 2015 when we published our original report
- Last winter the delayed transfer of care figures hit an all-time high with an estimated 5.6% of the 131,000 NHS beds occupied by people who no longer needed them
- The majority of delays are still caused by the NHS (55.9%)
- There has been a significant increase in the number of delays attributed to social care services, which now represent 37.4% compared with 30.4% two years ago