

# Discharge and Leaving Hospital

## *Brain Injury* *Support* in Northern Ireland

This leaflet is part of the series:  
Brain Injury Support in Northern Ireland

## Leaving the Acute Hospital Setting

When a patient is medically stable, they may be ready to be discharged or transferred for specialist inpatient rehabilitation. What happens next will depend on the severity of the injury and the difficulties that remain. As a carer, your involvement in this process is important and you should ask about the options available and the reasons for the choices suggested.

## Possible Options

Before discharge, your relative's health and social care needs should be assessed by one or more health care professionals. A discharge planning meeting will be held and attended by the relevant professionals.

When your relative's health and social care needs have been assessed they should receive one of the following care options:-

- Discharge home – with specialist follow-up and/or community rehabilitation
- Discharge home with GP support and follow-up
- Specialist Inpatient Rehabilitation
- Transfer to a residential setting or nursing home

## Discharge Home with Specialist Follow-up and/or Community Rehabilitation

Your relative may be able to return home straight from hospital. Attendance for follow-up at a rehabilitation medicine clinic will be arranged. They may receive rehabilitation as an outpatient either at a local hospital or specialist rehabilitation centre.

Alternatively, therapists from the community brain injury rehabilitation team may visit them at home. Whatever the rehabilitation setting, rehabilitation staff will carry out assessments and work out a programme of activities and plan goals to promote day-to-day functioning.

## **Discharge Home with GP Support and Follow-up**

Your relative may have recovered enough to go home without needing therapy. Coming home may be a tremendous boost to their morale but can also be a strain on all the family.

Some patients just want to go home and think “everything will be fine once I am back in my own surroundings”. You may feel pressurised by your relative to take them home, even though you do not feel ready to look after them.

Make sure you have talked through potential difficulties with the appropriate staff before you make a decision. There should be a plan for early outpatient clinic follow-up to ensure that any difficulties that may arise can be addressed quickly.

## **Specialist Inpatient Rehabilitation**

For persons with moderate and severe brain injury, there will probably be ongoing physical, communication and/or psychological problems that will benefit from a period of specialist inpatient rehabilitation, followed up by community based rehabilitation. The decision making process for this should include family members, to ensure that the patient's and family needs are being fully addressed.

## **Residential/Nursing Care**

Following assessment, the discharge team may decide that complex care is required and that looking after a patient at home may be impractical. In this case a residential or nursing home placement may be most suitable. A plan for review and reassessment of rehabilitation needs will be developed.

In such circumstances, there should be a plan for review of the patient at a later stage to reassess whether further rehabilitation would be beneficial. Some residential settings provide therapy input, called '**slow stream rehabilitation**' which provides a programme of support delivered at a pace appropriate to the individual's level of capability and understanding. This is important because many people still have the potential to make gradual improvements, even years after their injury.

## Questions to Ask if Your Relative is being Discharged Home

- Can you realistically cope?
- Can they come home for a trial visit?
- Who will look after them during the day if you need to go back to work?
- Are any adaptations needed at home?
- If equipment or adaptations are needed, will they be in place in time for your relative's return?
- Who do you contact in an emergency?
- What will happen if you cannot cope?
- How much input will there be from professionals?
- What support will be available for the family?

## Things to Do if Your Relative is Being Discharged Home

- Do not be pressurised into making a decision until you feel able to cope
- Ask if your relative can come home for a visit initially so you feel confident about coping once they are discharged.
- Think about practicalities
- Make sure that your relative has had a Continuing Healthcare Assessment or a Community Care Assessment, you have received a Carer's Needs Assessment and support is in place before discharge
- Have contact numbers readily available for advice if there are unforeseen difficulties
- Make sure you are familiar with any therapy exercises they are having so that you can continue with these once they are home
- Make sure you are confident in administering any medications they will need and that you have support with this if necessary
- Make sure you are familiar with any special feeding arrangements and dietary advice.
- Find out what support there will be once they are at home
- Check that arrangements for follow up appointments have been made
- Check that your relative's GP has been notified.