

## Healthwatch Oxfordshire Report for Information

### Section 1: Patient Voice and Healthwatch Oxfordshire Discharge Project Outline

#### 1. Background

1.1 Patient Voice and Healthwatch Oxfordshire are concerned that the voices of patients and carers have not been sufficiently heard, or responded to, in the on-going debates between health and social care providers and commissioners about how to improve the discharge of patients from Oxfordshire's hospitals.

1.2 The two organisations will therefore be collaborating on a project which aims to bring the voices of those being discharged and those caring for them into this debate by exercising our powers to enter and view, in order to interview patients, relatives and carers about their experience of being discharged from Oxfordshire's acute and community hospitals.

1.3 Given the importance of this issue to the whole system, Patient Voice and Healthwatch Oxfordshire would like to undertake this project in collaboration with OUHT, OCC, OHFT and OCCG, and those professionals providing health and social care after discharge from hospital.

1.4 We have created a project steering group to oversee this work which also includes representation from the following organisations:

- Oxfordshire Clinical Commissioning Group
- Oxford University Hospitals Trust
- Oxford Health Foundation Trust
- Oxfordshire County Council
- The Oxfordshire Association of Care Providers
- The Local Medical Committee
- The Local Pharmaceutical Committee

#### 2. WHAT WE WANT TO KNOW

2.1 This project seeks to discover, and share:

- i. People's experience of being discharged from Oxfordshire's acute and community hospitals.
- ii. The impact that their discharge experience has had on their health and wellbeing, and the health and wellbeing of their families and/or carers.
- iii. The impact of poor discharge processes on on-going care from the perspective of other care professionals.
- iv. How the quality of the discharge process impacts on people's ability to live independently at home after a stay in hospital.
- v. The extent to which the discharge process is meeting the quality standards and/or processes agreed in contracts between commissioners and providers.
- vi. Examples of well managed discharge that the whole health and care community can learn from.

- vii. Examples of poorly managed discharge, and the key things providers need to work to improve.

### **3. WHY DO WE WANT TO KNOW THIS**

- i. Patients have raised the issue as a concern with Healthwatch Oxfordshire both through Patient Voice and individually.
- ii. Oxfordshire remains one of the worst performers in the UK for delayed transfers of care.
- iii. Commissioners remain committed to working with providers to improve discharge processes in Oxfordshire.
- iv. Local GPs have raised the issue of the quality of the discharge process as an area of ongoing concern with OCCG.
- v. Healthwatch England has been sufficiently concerned about this issue to undertake a national special enquiry on the topic.

### **4. SCOPE OF THE PROJECT**

- 4.1 This project will explore the experience of patients being discharged (or who have been discharged in the calendar year of 2014) from all OUHT hospital sites and from OHFT community hospitals. It will not explore discharge from mental health wards run by OHFT, discharge from private hospitals or discharge of Oxfordshire patients from hospitals outside Oxfordshire.
- 4.2 This project will focus on the experiences of adults and older adults, and in particular those aged 70+, and will be designed and delivered in ways that enable dementia patients and their families, and the homeless, to participate.
- 4.3 The project will seek the views of GPs, care workers (domiciliary and residential), social workers and pharmacists about the impact of the discharge process on on-going care.
- 4.4 This project will focus predominantly on the collection of qualitative data about the experience of being discharged, and the impact of the discharge process on ongoing wellbeing and care and rates of re-admission. It will not review the wealth of quantitative data already examined regularly by OCCG and OCC.
- 4.5 In addition to a published report, it is hoped the project will result in a new patient information leaflet about how discharge is supposed to be planned and managed and video clips that can be used for staff training.

### **5. PROJECT METHODOLOGY**

- 5.1 The views of patients, carers and relatives will be sought via:
  - 5.1.1 Structured interviews, based on a formal questionnaire, and conducted by HWO volunteers (including members of Patient Voice) who have been trained to undertake enter and view. These interviews will take place in hospitals, hostels, care homes and at home.

5.1.2 Self-completion of an online questionnaire, widely promoted to the public via HWO communications and media leads and available via HWO website.

5.2 The views of professionals responsible for patients' on-going care post discharge will be sought by emailed questionnaire sent from the HWO office to relevant professionals, where possible via their representative bodies such as the Association of Care Providers, Local Medical Committee, Practice Managers Forum and Local Pharmaceutical Committee.

5.3 A desktop review of published information on what constitutes good discharge and why it is important will set the context for the findings.

5.4 Findings will be analysed by the HWO team, who will prepare a report that summarises the key themes to emerge from this analysis.

## 6. PROJECT MILESTONES

DATE	ACTION	KEY PARTNERS
5/9/14	Seek initial feedback on this proposal from Patient Voice	Patient Voice (PV)
8/9 – 19/9	Circulate v2 to relevant organisations seeking: <ul style="list-style-type: none"> <li>views and comments</li> <li>nominations for project steering group</li> </ul>	PV, OCCG, OCC, Association of Care Providers, LMC, LPC, OHFT, OUHT, HWO Board.
Early October	1 <sup>st</sup> meeting of project steering group to approve final project proposal for submission to HWO Board.	PV, HWO, OCCG, OCC, Association of Care Providers, LMC, LPC, OHFT, OUHT, patient and carer reps
14/10	HWO Board approve finalised project proposal	HWO Board
End October	Enter and view volunteers recruited ( to include members of PV)	HWO, PV
Mid December	Enter and view training complete Develop and agree questionnaires	HWO PV and HWO for agreement by steering group
Early January	Enter and view trial sessions to test: <ul style="list-style-type: none"> <li>Questionnaires</li> <li>Interviewing skills</li> <li>Housekeeping and safeguarding arrangements with provider partners</li> </ul> Draft questionnaires for LMC, LPC and Care providers tested with relevant partners and content	PV, HWO and OUHT and OHFT

	agreed.  Launch awareness raising campaign	
Mid January	Evaluation of test/rehearsal sessions Project plan and materials adjusted accordingly	Project steering group
February	<ul style="list-style-type: none"> <li>• 100 enter and view interviews conducted in variety of care settings</li> <li>• Questionnaires circulated to relevant professionals, via their professional bodies for return by the end of the month</li> <li>• 1 month campaign promoting Self completion questionnaire</li> <li>• Desk research</li> </ul>	PV, HWO, OUHT, OHFT, Association of Care Providers, LMC, LPC.
March /April/May	Analysis complete and draft report circulated for comment/accuracy checks and to inform final contract negotiations.	PV, HWO, OUHT, OHFT, Association of Care Providers, LMC, LPC, OCC, OCCG
June	Report launched	HWO

**HWO - Healthwatch Oxfordshire; PV- Patient Voice; OCCG – Oxfordshire Clinical Commissioning Group; OCC – Oxfordshire County Council; LMC – Local Medical Committee; LPC – Local Pharmaceutical Committee; OHFT – Oxford Health Foundation Trust; OUHT – Oxford University Hospitals Trust.**