

Introduction

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Work on older people's issues

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PURPOSE OF TODAY

- Hospital discharge guide for older people
- Firstly - Brief outline of a SCIE review leading to development of hospital discharge guide
- Main messages from the review

SCIE's ROLE

- SCIE is
 - dedicated to raising standards of practice across the social care sector
 - committed to social care which empowers users and promotes independence.
 - independent but influential

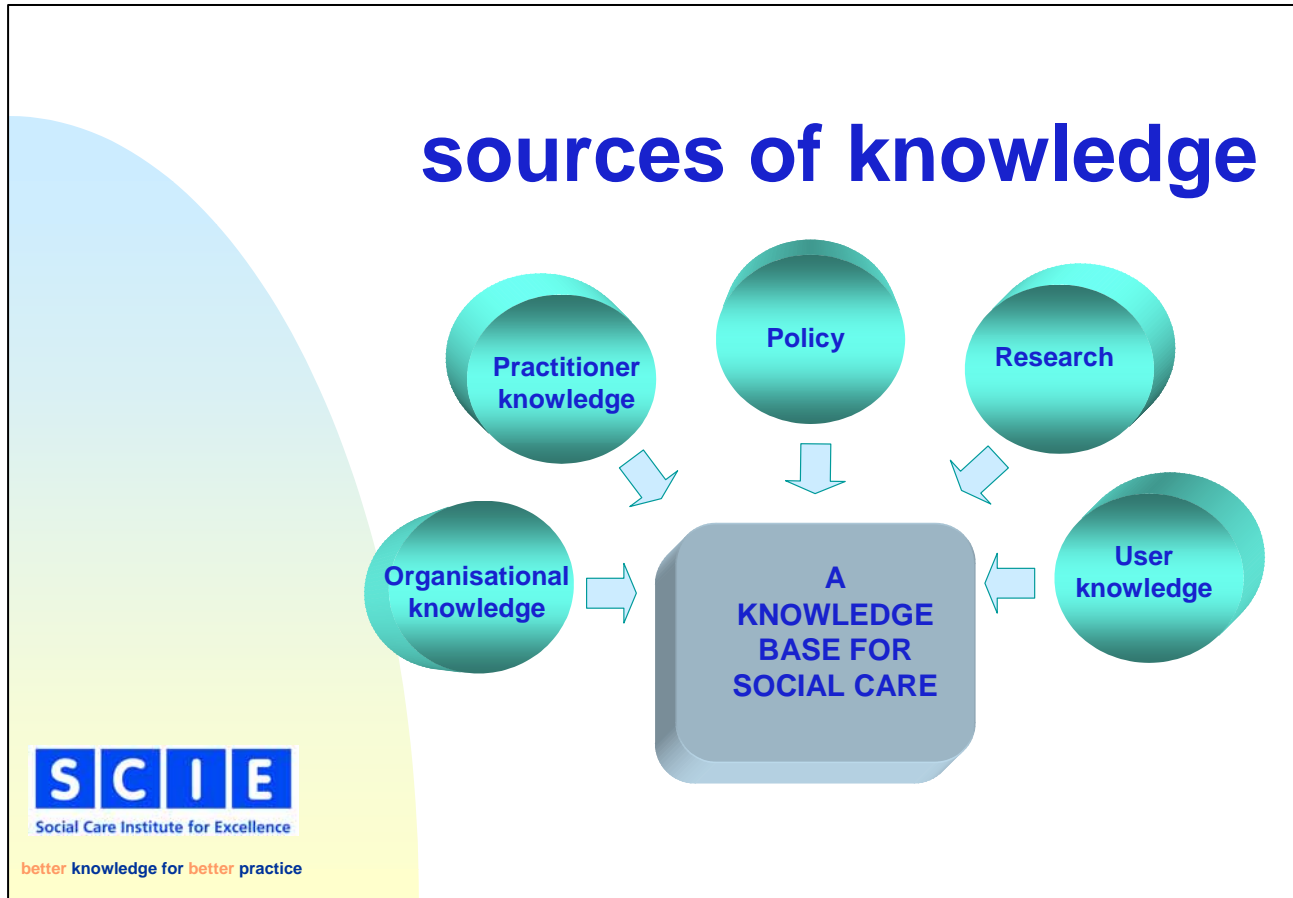
ROLE OF RESEARCH AND REVIEWS

- Undertake systematic reviews of the knowledge base for social care. This includes exploring what counts as knowledge, how to decide what knowledge to trust, and how to present it to users and carers, and to policymakers and practitioners.
- Help professionals involved in social care to make good use of evidence to improve practice in their day to day work.

OUR PRODUCTS

- Knowledge Reviews
- Practice guides
- Resource guides
- Social Care Online

SOURCES OF KNOWLEDGE



FOCUS ON USER KNOWLEDGE

- Today's example is specifically about **user knowledge**
- SCIE review has led to guide
- Next slides – Briefly describes why we did the SCIE review and main findings

PROBLEMS WITH CURRENT SYSTEMATIC REVIEWS

- Current methods of systematic review in social care focused almost exclusively on effectiveness studies- i.e. whether a method of social intervention works or not
- Little work on synthesising messages about ***why interventions do or do not work, or if they produce outcomes that matter to users.***
- Hence review

WHY HOSPITAL DISCHARGE (HD)?

- SCIE review focused on views of older people because:
 - HD - Policy area which has been subject to high quality systematic review (Parker et al. 2002) but lacks good evidence on what older people and their families or carers value in terms of process and outcomes.
 - HD is highly topical

POLICY BACKGROUND

- Increasing older UK population.
- Main users of health and social care.
- Older people occupy almost two-thirds of general and acute beds (DH 2003).
- Pressure on hospital resources.
- Discharge of older people from hospital has become a central policy issue for both acute health and community care policy and practice.

FAILURES IN THE SYSTEM

- Marks (1994) has noted factors that may place vulnerable elderly people at risk:
- Not routinely asked about home circumstances or about how they will manage on return home.
- Little information is provided for patients about their medication and possible side effects.
- Information regarding discharge policy and procedures are not widely available on wards.
- Patients and/or their family members are frequently given inadequate notice of their discharge from hospital.
- Transport arrangements are often poor.
- There are often delays and other inadequacies in the provision of community services.

DISCHARGE PLANNING

- Proper discharge planning essential to ensure older people receive appropriate health and social care in community.
- Reduces hospital stay and unplanned readmission to hospital, and improves co-ordination of services following discharge from hospital.
- Responsibility of the NHS together with social services to carry out assessments of continuing health care needs.

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SCIE REVIEW ON OLDER PEOPLE'S VIEWS OF HOSPITAL DISCHARGE(1)

Process

- SCIE review involved looking for wider evidence about the **views of older people** on the discharge process.
- RR team searched for published research which had included older people's views.
- 104 studies identified but 28 were relevant.
- Older people with experience of discharge fed into process

SCIE REVIEW ON OLDER PEOPLE'S VIEWS OF HOSPITAL DISCHARGE(2)

Review question framed as:

- What are older people's experiences of HD and how are they influenced by staff views and behaviours
- Sub questions
 - older people's reasons for level of participation in discharge planning and factors influencing this
 - Staff views (within same hospital) about older people's levels of participation and factors influencing this

SCIE REVIEW ON OLDER PEOPLE'S VIEWS OF HOSPITAL DISCHARGE(3)

Role of older people's advisory group

- Work guided by advisory group of older people with experience of hospital discharge
- Made important contribution in terms of what studies to include, what themes were important
- This influenced literature searches, definition of outcomes considered important, etc.

SCIE REVIEW ON OLDER PEOPLE'S VIEWS OF HOSPITAL DISCHARGE(4) - SOME FINDINGS

Review published in Jan 2006. Some findings:

- Older people should be encouraged to ask questions of staff.
- Older people rarely took part in decision making about hospital discharge.
- Personality and levels of education.
- Deference to authority of professionals.
- Did not feel well enough to argue or assert.

SCIE REVIEW ON OLDER PEOPLE'S VIEWS OF HOSPITAL DISCHARGE(5) - SOME FINDINGS

cont

- Older people experience anxieties before discharge – fear of falling, worries about how they would manage, anxiety about burdening others, personal losses and what might have to be given up.
- Essential that older people have access to information that fosters independence and retain control.

FINDINGS cont.

- Peoples anxieties before discharge relate to how they will manage in future
- Education and information can reduce anxiety and fear but only when older person has returned home will issues become clearer
- Health staff know about physical affects but less about likely impact on daily life of older person.

FROM SYSTEMATIC REVIEW TO DEVELOPMENT OF A GUIDE

- Suggestion from advisory group to develop a guide.
- Current provision does not address needs of older people, too technical, or does not exist in some places.
- Issues to consider from the review- fostering independence, how to help people retain control, improve confidence and well being, help with life planning
- Ultimate aim to improve quality of life and prevent hospital readmission

REMIT OF GUIDE

- Will not duplicate local information
- Will not provide information on clinical conditions
- Aim is to focus on the emotional, psychological issues that conventional guides do not cover

PROCESS

- Met with older people and gave them opportunity to identify issues at first meeting
- Older people involved as authors
- Clear themes emerged in which to frame guide - anxieties, feelings, how to help oneself, what help to get from professionals
- Subsequent meetings held to discuss more in-depth issues
- Chronological approach from pre-admission to discharge and long-term recovery

NEXT STEPS

- First draft produced
- Will be piloted with older people
- Consult with health and social care professionals
- Incorporate changes to form a revised guide by summer 2006
- Disseminate – NHS Trusts, community centres, GP surgeries, etc.

CHALLENGES

- Ensuring that information is relevant
- Conveying information in a way that is not patronising and able to address all older people
- Conveying information simply but able to get across key messages
- Brevity

REFERENCES

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