

## What to expect on discharge from hospital

Healthcare professionals will work with you and the people most important to you, to ensure that your transfer out of our hospital is to a safe, appropriate place and happens at a time suitable for you. You will be able to discuss your needs and how they will be met after leaving hospital with the team looking after you. If you have any questions about the discharge process, please do contact the ward sister or the nurse assigned to your care.

### The decision to discharge

Our hospital is the right place to be when you need your orthopaedic treatment or surgery under the care of a consultant. Once this is complete and you no longer require consultant led care within the acute hospital, it is important that your transfer out of our hospital is not delayed. The consultant in charge of your care will work with many allied healthcare professionals to agree when it is safe for you to leave our hospital. Orthopaedic surgery often changes mobility (most often temporarily) and this may mean you need additional support and equipment on discharge. On admission to hospital your individual needs are reviewed, and these are carefully considered as part of planning your discharge.

### The transfer of your care

East Sussex Healthcare Trust offers a range of services and works closely in partnership with NHS social care and private providers. As your condition improves during your stay in our hospital, you may be transferred to the care of one of our Community Hospitals, sometimes called Intermediate Care Units, or sent home with support from other appropriate Community Services to meet your needs. The Discharge Co-ordinator for your ward will help plan the most appropriate support.

If it is decided by you and the team looking after you that you will benefit from being transferred to one of our Intermediate Care Units your name will be put on a waiting list. At the inpatient rehab unit your team will discuss and agree personalised goals with you which they will collaborate with you to achieve. This will enable you to progress to a safe level in able to return to your usual place of residence. When you no longer need intermediate care in one of our community hospitals, our team will work with you to plan your discharge and agree any ongoing rehab support

### When will I be discharged?

Your discharge date will be guided by the rate at which your health and mobility improves while you are in hospital and what support you will need after leaving our care. Our discharge teams can support your transfer out of our hospital seven days of the week, and on bank holidays. We have a lounge where you may be asked to wait on the day of your discharge.

### Planning your discharge/transfer home

Leaving hospital can be a daunting experience, especially if you have been in hospital for a while or cannot manage everyday activities the same way you did before.

We consider your individual needs to support your discharge home as soon as you are admitted into hospital. It is helpful if you consider arranging certain things as soon as you know your discharge date, if you are going home. These include:

- Suitable transport to collect you
- Access to your property
- Adequate food supplies and heating
- Suitable clothing and footwear to leave hospital

If you have any concerns about being discharged, please make your nurse aware, so that they can discuss your support needs with the appropriate healthcare professionals. You will be kept fully informed about what to expect when you leave our hospital.

A range of staff may be involved in the process of helping to meet your needs, such as doctors, nurses, occupational therapists (OTs), physiotherapists (PTs), speech and language therapists (SLTs), dieticians, rehab support workers (RSWs), healthcare assistants (HCAs) and colleagues working in adult social care.

## Your transport home

If possible, please make arrangements for a relative or friend to collect you on your day of discharge. Please let your nurse know if you cannot arrange this. Patient transport is only provided to those with a medical need. The hospital patient transport service need notice in advance if they are required, if you feel you are suitable for this service, please let your nurse know in advance.

You must not drive for 24 hours after a general anaesthetic or sedation, some car insurance policies do not cover you if a doctor has advised you not to drive. Please contact your own insurance company for further details. Your nurse will be able to give advice, but the time it takes to recover and be able to safely drive varies from one patient to another.

## Letting your GP know

Unless your GP was directly involved in your admission to hospital, they may not be aware that you have been a patient in our hospital. It is important that your GP is provided with information about your hospital stay, operation/ treatment, medication, details of any further investigations required and follow-up appointments. This information will be directly linked to them electronically so you do not need to worry about passing this information on, unless informed otherwise. You, as our patient, will also be provided with all of this information.

If you are given a letter for your district nurse, please pass it to them when they visit you.

Alternatively, if you are given a letter for your practice nurse, please make an appointment and take this letter with you.

## Taking medication home

Our hospital pharmacy will ensure you go home with a supply of your regular medication and any additional medications you have been prescribed whilst in hospital. Further supplies must be obtained from your GP. Your hospital doctor will inform your GP of changes made to your medicines. It is important to take the additional medications you have been prescribed, for example, any blood thinners that aim to reduce your risk of developing a clot. You should take these for the entire duration that they have been prescribed.

Before you leave hospital, you or your carer should understand:

- Which medicines you should be taking and any additions or changes to your regular prescription
- When and how you should take your medicines

All medication provided by the pharmacy are given to you with a patient information leaflet detailing the correct dosage and instructions for administration. If you have any questions please ask your nurse and they will be in contact with the appropriate professional.

Please note:

- If you suffer any side effects speak to your GP or pharmacist
- Dispose of all unwanted medicines safely via your pharmacy

## Community Support

When you are discharged from hospital you may be offered support, this can consist of carers and therapists who aim to promote your independence at your destination of discharge. Social services may be involved in your care whilst you are in hospital, they offer help, practical support and advice to aim the transfer from hospital. They can also provide information regarding residential and nursing homes where required. The most common service offered is provided by care staff that can come to your home to help with washing, dressing and meals. If this service is suggested to you it is definitely worth consideration and will aid the transition process. Our service is not long term and may only cover a few weeks; if you require a more long term package of care this will be assessed and provided by a community care manager (your community care manager will explain the cost of this). In some cases, care needs required go beyond what can be offered within your home and you may be offered placement in a care home.

## Volunteers

There are local volunteer services that may be able to help you when you are at home: Age UK can offer advice and access to certain services.

The East Sussex Age UK Helpline is 01273 476704.

The National Age UK Helpline is 0800 678 1602.

British Red Cross can offer help with shopping and light housework. They can also lend equipment.

The contact line for support is 08081963651

## Follow up appointments

If you require a follow up appointment it will likely be made for you before you leave the hospital and detailed on your discharge letter or details will be given to you at a later date through the post or via a telephone call. Please let the ward staff know if you will require hospital transport services to attend any follow up appointments, they will give you the contact information. If you do not have a follow-up appointment and have questions about your diagnosis, treatment or future medical care, please make an appointment to see your GP. At your follow up appointment you will receive information about removal of cast where applicable. If you have suffered a Neck of Femur fracture you will receive a telephone follow up 120 days after your operation.

## Physiotherapy

You will have been seen, assessed and discharged by our team of orthopaedic physiotherapists during your stay in hospital. After discharge you should continue with the advice they have given you and if they have recommended further outpatient make sure you attend.

## Needing time off work

If you are employed you may need to give a sickness certificate to your employer. If you have been off work sick for seven days or less you can fill in a self-certification of sickness on return to work. After one week of sickness your employer will require an additional certificate provided by a doctor. The length of time this would cover depends on the injury suffered; you would need to discuss this with your discharging doctor. If sickness continues beyond what is issued on hospital discharge, consult with your GP.

If you develop any of the following symptoms you may have a Deep Vein Thrombosis (blood clot); Swelling, redness and/or pain in the calf, shortness of breath and/or coughing up blood. This is a medical emergency and you should come to hospital as soon as possible. If you believe you are suffering with a medical emergency, please contact 111 or 999.

## Sources of information

Trauma Coordinators, Ward Nurses, National Guidelines, Trust Guidelines and Trust Intranet

## Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

## Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or [esh-tr.patientexperience@nhs.net](mailto:esh-tr.patientexperience@nhs.net).

## Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

## Other formats

**If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department on 0300 131 4434 or [esh-tr.AccessibleInformation@nhs.net](mailto:esh-tr.AccessibleInformation@nhs.net)**

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

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## Reference

The following clinicians have been consulted and agreed this patient information:  
Eleanor Hitchen and Sarah Davey, Trauma Coordinators  
Jacinta Isles, Head of Nursing

The Clinical Specialty/Unit that have agreed this patient information leaflet:  
Diagnostic, Anaesthetic and Surgery - Governance

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Responsible clinician/author: Eleanor Hitchen and Sarah Davey, Trauma Coordinators