
Responses to the recommendations in our report “Carers’ Experiences of Hospital Discharge”

February 2022

Overview

All local acute trusts and Surrey County Council have provided full written responses to our recommendations.

These responses have informed us of:

- existing good practice and workstreams designed to improve the safety and experience of discharge for carers and local people.
- new initiatives and workstreams triggered by our report. Providers have reflected on their existing practices through the lens of our recommendations to identify gaps and opportunities; and new working groups have been set up to explore new ways of working to ensure carers are appropriately involved.

We are pleased to see that many of these workstreams will include co-design with carers.

We encourage all stakeholders to consider:

1. How best practice and innovation can be shared between providers to ensure all patients and carers in Surrey benefit from system improvements and there is no unwarranted variation in standards of care
2. How providers are held to account for the quality of patient handovers between hospital and carers.

Context

In Autumn 2021 Healthwatch Surrey and Action for Carers published our joint report “Carers’ Experiences of Hospital Discharge”. The full report is available on our website [Our insight reports - Healthwatch Surrey](#), along with a “Report-on-a-page”/poster that summarises the key findings and recommendations, and two patient experience videos.

Organisations have a statutory duty to respond to Healthwatch Surrey whenever we make recommendations relating to their practice. Our report made four recommendations relating to identification of carers, communication and teamwork with carers during the stay on the ward, during discharge planning and after discharge.

In October 2021 we wrote to our Hospital Trusts and to Surrey County Council, drawing the report to their attention and asking for their response to our recommendations. Given the pressures of the 21/22 Winter/Covid season we have delayed publication of the responses, but we have now received full written responses from all organisations we contacted.

We have also presented our findings and recommendations at meetings including the Surrey Heartlands System Board and the Carers Partnership Board.

Our recommendations will form the background to breakout discussions at the Surrey Carers and Providers Network Discharge Workshop in February 2022.

Our Recommendations

1. **Proactively identify patients who rely on unpaid carers.** Recognise carers may be unregistered/unacknowledged. Record a key contact for every patient and focus communication through that contact.
2. **Review practices and processes that govern hospital-carer communications.** Take the opportunity to develop new, post-Covid strategies that cover all touchpoints.
3. **Improve carers' understanding.** Explain the process of discharge including who's who, decision-making processes, what they should expect, and what support is available. Use co-design to develop a guide.
4. **Provide a professional, efficient handover of the patient to the carer.** As well as meeting the requirements of the current Policy and Operating Model this handover should be patient/carers-centric with appropriate language and contact information for all relevant providers/services.

Responses

Our report was positively received:

"As a Trust we very much welcome this feedback" Ashford St Peters

"...this data is really helpful and gives invaluable insight into our discharge processes" Epsom St Helier

"The trust appreciates receiving the feedback and the recommendations" Royal Surrey

"SCC welcomes the report and was pleased to be able to support Healthwatch and Action for Carers to take forward this important piece of work on the back of discussions at the 'Partners meeting'" Surrey County Council

All parties acknowledged that discharge continues to be challenging, and our findings triangulate with their local feedback:

"...we do recognise the themes from this report" Frimley Health

“...we recognise the comments within the report from our own feedback and communication with local carers and as such we know this is an area we want to focus on.” Surrey and Sussex Healthcare

“The Trust is committed to seeking ways to improve the service so other patients and carers don't have the poor experiences described in the report”
Royal Surrey

“We have worked hard to raise the profile of carers within the Trust but are aware there is still more work to be done.” Epsom St Helier

“The report's findings bring into sharp focus a number of key issues that the council and its partners in The NHS must respond to”. Surrey County Council

Providers told us of current workstreams designed to address some of the issues we raised, including:

- AStP launched their Compassionate Communications Policy in Summer 2021
- SASH recently refreshed its Carers strategy and supporting action plan
- Frimley are undertaking a full review of their carers booklet, staff guidance and carers promise; they are also training volunteers, PALS Teams and Nepali Buddies to identify carers
- RSCH are working with their Hospital Carer Advisers to return them to site which will also help raise awareness of the needs of carers
- Some wards in RSCH have a whiteboard in their MDT rooms detailing the date and time a staff member contacted the family and when the next call is planned. This idea has been shared across wards.
- Epsom St Helier have converted their Carers Guidelines into a Carers Policy, and changed their Patient Manager System to ensure Unpaid Carers are registered against a patient's record
- Surrey County Council have commissioned a “Supporting Carers In Hospital Settings” service

Our report prompted re-evaluation of existing approaches and suggested fresh initiatives:

- Ashford St Peter told us they would:
 - Place the requirement to proactively identify carers into a Standard Operating Procedure/policy and into their wider action plan
 - Review their compassionate communication policy to ensure it contains explicit reference to every touchpoint
 - Review website content and signposting, and use co-design to review and refine literature
 - Develop a SOP for carer referral and formal handover on discharge, codesigned with carers and their carer lead
- SASH told us “Through our Discharge Review Board we will develop a process and checklist to ensure there is a professional, efficient and informative handover of the patient to the carer.”
- From Frimley
 - “...the report...has contributed to changes in practice and the trust has been successful in securing funds from NHSE/I to implement a role...to improve our communication in the discharge to assess pathway and to refocus the work on supporting carers in the trust”
 - “We have the guidance [relating to handovers of patients to carers] but need to re-promote to ensure all staff are aware and that carers have previously been identified.”
- At RSCH our report and recommendations have been used to inform a Working Group to improve carer involvement in discharge planning.
- RSCH also told us “Staff do not always recognise that on discharging a patient with care needs to an unpaid carer that they are effectively handing over the patient’s care. We will develop a process and checklist to ensure there is professional and competent handover of care.”

- At Epsom St Helier a working group is being set up to explore current practices and processes around ward-to-carer communication; this will also explore how the hospital helps improve carers' understanding of the discharge process.

Summary

Our report highlighted the very real risks and consequences of poor communication with carers. While these experiences took place during the pandemic when hospitals were under exceptional pressure and visiting bans prevented carers meeting staff in hospital, hospitals acknowledge that discharge and relationships with carers have been a challenge for many years.

It is reassuring to hear that our hospitals are committed to improvement and investing in workstreams designed to improve carer identification, communication and support. We also welcome the involvement of carers and patients in many of those projects.

We will continue to share the experiences we hear from carers and patients in Surrey, and hope these stories are used as a positive catalyst to meaningful improvements.

Detailed responses from providers

(Some longer responses have been slightly abridged)

	Est H	RSCH	AStP	Frimley	Sash	SCC
Proactively identify unpaid carers	<p>Progress to date: Since the Healthwatch survey took place we have implemented a number of initiatives to help identify carers. Our Carers Guideline has now been converted into a Carers Policy, reinforcing the support we offer carers. We have introduced the following 2 questions into the admission booklet that staff complete for all patients admitted to a ward:</p> <ul style="list-style-type: none"> - Do you have an unpaid carer? - Has a Carers Passport been completed? <p>We have also introduced an Unpaid Carers tab in our</p>	<p>The Trust is exploring putting the Carer Awareness eLearning onto our My Learning platform for all staff to access. Patients are asked on admission about carers, next of kin and their contact details whether they receive any care but I appreciate that patients also may not identify the person as a carer. The new electronic patient record that the Trust will be moving to in 2022 will improve the identification of the carers and also enable us to identify whether this is being captured accurately. We are working with our Hospital Carer Advisers to return them to site which will also</p>	<p>Partnership working with our Action for Carers Lead to identify, obtain consent and refer Carers to our Lead. We have a referral form amongst our suite available for staff to access. Key contact/NoK is recorded on our nursing assessment and admission systems. Our Compassionate Communication Policy was launched in the Summer and we are embedding this in practice. Action the proactive identification on admission and referral as standard practice. This will be placed into a SOP/Policy in development and our wider action plan.</p>	<p>Currently we have one carer support attending FRIMLEY Park Hospital one day a week, this was identified as a missed opportunity in regard to cover for the other days so we have developed a training package for our hospital volunteers, PALS teams and Nepali buddies to identify carers and be able to signpost to relevant services. This is replicated at Wrexham Park. The hospitals will be supporting Carer Awareness Week, Carer Rights Day and Young Carers Day</p>	<p>Within our mandatory induction training there is a session on carers and carers support. The Trust also requests that all staff in clinical settings undertake the carer awareness training provided by SCC to educate them and promote carers within our organisation. This will aid staff with the knowledge and skills they need to identify carers early in the pathway so that they can be involved in decision making from assessment through to discharge planning. It will also emphasize the importance of good communication between the ward staff and the carer. Providing them with information around</p>	<p>Adult social care recognises the importance of early identification of carers. SCC are working in partnership with NHS colleagues will support acute staff to recognise and identify unpaid carers as soon as the cared for (loved one) enters hospital. 2As part of the new Prevention and Wellbeing services for unpaid carers, we have commissioned a 'Supporting carers in Hospital Settings service'. The aims of the service cover each of the recommendations. The overall aims of the Supporting Carers in Hospital Settings are:</p> <ul style="list-style-type: none"> •To improve identification and

	<p>Patient Manager System. The answers to the 2 questions above can then be logged against the patient's record within this tab, along with a number of additional items. The tab covers the following:</p> <ul style="list-style-type: none"> - Does the patient have an unpaid carer - - If yes please completed contact details of the unpaid carer - Has a Carers Passport been completed? - Date passport issued - Have you completed a Surrey Carers prescription? - Can the Patient Experience Team contact the unpaid carer about their hospital experience 	<p>help to raise awareness of the needs of our carers. They will be able to help identify and liaise with patients and carers.</p>	<p>Embedment of the Compassionate Communication Policy</p>		<p>support that is available to carers and how to refer on to the carer support services that we work with. The Trust is currently updating its carers information page on Cerner(our patient information system) to included additional questions, a text box for recording carers contact details, recording the issue of a carers passport and referral to the carer support services. The questions in the carers tab are identical to those in the nursing assessment admissions booklet. Our Carers Lead will run regular reports to identify if there are any wards that are not fully utilising the carers tab and will then do some targeted work with that ward around</p>	<p>recognition of carers in the hospital setting</p> <ul style="list-style-type: none"> •Contribute to carer-friendly hospital experience through establishing strong links and presence within the hospital/s •To improve the carers experience by helping them effectively understand navigate the hospital system and processes •To facilitate the prevention of carer breakdown and in turn prevent unnecessary, temporary or permanent, admissions to residential care and prevent unnecessary hospital readmissions
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	<p>We invite all staff, both clinical and clerical, to attend our Carers Awareness Training as anyone within the Trust may be in a position where they identify someone as an unpaid carer.</p> <p>Moving forwards we will be:</p> <p>Promoting carers awareness training to all staff – to help everyone understand the term ‘unpaid carer’, to fully understand how to implement our new Carers Policy and the new Unpaid Carers tab, to make the connection between logging these details and utilising them to</p> <ul style="list-style-type: none"> • improve the experience of the patient whilst in our care (utilising the carers passport to agree with the carer what they can help 				<p>awareness and identification.</p>	
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	<p>with on the ward and extending or flexing where possible visiting times so that the carer can visit the patient)</p> <ul style="list-style-type: none"> • improve communication between the ward and the carer, enabling them to be part of discharge discussions and plans, ensuring the carer is willing and able to continue with the care the patient requires <p>Ward visits – the Patient Experience Team will regularly visit the wards to ensure that all staff are communicated with and trained to use the Ward Pack. This allows for an opportunity for the team to also speak to carers whilst they visit the ward.</p> <p>Audit – the Patient Experience Team will</p>					
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	<p>receive reports to inform us when the tab has been used. We will review to see if it is being completed correctly, we will set up formal audits via the Trust Audit Team to check the system and confirm that copies of the Carers Passports are saved in the patient notes. We can target our visits to wards that aren't using it to ensure staff are fully aware of what is available and how to use it.</p>					
Review hospital/carer communications	<p>Our previous response outlines the mechanisms the Patient Experience Team have implemented for capturing the carer details. We will need to fully embed this work with all staff. In order to review and adapt existing practices we</p>	<p>An initial review showed that some wards have a white board in their MDT rooms which details the date and time that staff member contacted the family and when the next call is planned. This has been shared with the Senior Sisters for them</p>	<p>The Compassionate Communication Policy is in place. Action: Review of Compassionate Communication Policy to ensure explicitly reference to every touchpoints. To embed the policy into practice.</p>	<p>This is underway with a full review of our carers booklet, staff guidance and carers promise which was developed in 2019</p>		<p>ASC's carer practice advisors will influence and improve frontline practice going forward to promote awareness of the needs of carers within their own right. During carers assessments we have increased Carers involvement in decision making by</p>

	<p>intend to set up a working group within the Trust to review discharge and communications with carers to ensure that we provide regular, proactive and informed communications. We will identify the key people required to input to this workstream and the Patient Experience Team will act as a support to the group to help shape and track progress. We will also look at developing measures to ensure that any adapted or new practices and processes we are implementing are delivering improvements.</p>	<p>to explore how this could work in their areas. The working group will explore other processes for enhancing communication with the carers.</p>				<p>implementing some workflow changes that force Social workers to indicate they have actively involved carers. SCC are co-producing a new mental health Pilot for carers of people with Mental Health needs. This is a new service building on our existing mental health services for carers and arising from feedback received during the development of the Carers Strategy. Through close partnership working, a key aim of the new service(s) will be to establish 'carer friendly' environments within Mental Health acute settings. We recognise that improving communication is paramount to establishing a carer friendly environment.</p>
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<p>Improve carer understanding</p>	<p>As mentioned in recommendation 2, we will set up a working group with the appropriate team members involved to explore what practices and processes are currently in place and how we can adapt these to ensure that the carer is involved appropriately. We expect the output of this workstream to result in a number of different deliverables and ultimately an overall guide to discharge. We will utilise our Carers Forum to help us shape and co-design this work to ensure that it is delivering what is required.</p>	<p>The working group will develop a carers' guide which will include information about the discharge process, who is involved in the process, what carers can expect and how and where to access additional support. Representatives of the Trust Patient Panel will be asked to be part of this work. As part of the Discharge to Assess pathway, staff are ensuring that patients and carers are provided with the Surrey Heartlands D2A information leaflet. Once the above work has been completed, the Trust will complete a review of the Carers information on the Trust website to ensure the documents are available and that there is good signposting to</p>	<p>The Welcome Pack contains all information regarding discharge for patients. This is provided for all patients on admission. This is also available on our website for carers/public. A longer more descriptive leaflet is also available for carers/families. Action: To review the website content- and signposting. To embed the offer and receipt of leaflets by carers. Use co-design to review and refine as required our available literature/develop new as required.</p>	<p>The report from HwSy containing feedback from recent discharges an carers has contributed into changes in practice and the trust has been successful in securing funds from NHSE/It implement a role on both sides of the Trust to improve our communication with our relatives of patients in the discharge to assess pathway and to refocus the work on supporting carers in The Trust. The EPIC workstream (patient/proxy held records) should improve communication from trust to patient and patient/carer to Trust</p>		<p>We are working systematically on improving our information and advice offer not only for carers by all surrey residents as we recognise this is an area we need to improve on. The new hospital support service will provide short-term, responsive, person-centred advice, information, and support to carers of all ages when the person they care for is in hospital or is receiving treatment in a hospital setting. ASC are currently working partnership with our NHS Senior Leaders in Acute hospitals support improvements on the wards. The new model and approach to carers services is designed around improving carers understanding of both issues relating to</p>
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		organisations that can offer support.				caring e.g. Understanding the diagnosis of the cared for, and navigation of the wider system e.g. Support within hospital settings.
Provide a professional handover to the carer	As part of the discharge workstream we will review the current policy and operating model to ensure we are compliant and deep dive into our current handover process to identify any changes required to ensure that the carer is involved appropriately and that conversations take place to ensure that we are supporting the carer. Their caring responsibilities may increase upon the patient's discharge, so we need to ensure that we are communicating with the carer to confirm they are both willing and able to	We recognise that staff do not always recognise that on discharging the patient with care needs to an unpaid carer that they are effectively handing over the patients care. The working group will develop a process and checklist to ensure there is a professional and comprehensive handover of the patient to the carer. This process will ensure the carer (with the patients consent) has been involved in the discharge discussions and that their views and ability to continue to provide	Discharge leaflets have contact details and signposting for local relevant groups for Carers. Action: Developing a SOP/Policy for Carer referral and formal Handover on discharge. This will also be Co design and with our Carers Lead.	We have the guidance but need to repromoted to ensure all staff are aware, and carers have previously been identified but handover in general is a workstream for our FRIMLEY excellence team in engaging a robust, consistent and complete handover to next of kin/carers.	Through our Discharge Review Board we will develop a process and checklist to ensure there is a professional, efficient and informative handover of the patient to the carer. This will include: Increased inclusion to ensure all professionals included in the patients care post-discharge are included i.e. social workers Does the handover meet the requirements of current Policy and Operating model re. fully informed Carer consent Ensure carers have been consulted in discharge plans and their views have been	NHS Acute Colleagues have been addressing handover to the carers as part of the discharge process. This is led by the NHS and fully supported by ASC. •More broadly we are working on our Discharge to assess arrangements with NHS partners and what will happened beyond the end of March and processes, communications, handovers/handoffs are all being looked at within this workstream. We are also exploring work around follow up after discharge.

	<p>continue to support the patient. We are handing over the patient's care to the carer so that the patient can continue their recovery.</p>	<p>care have been taken into account.</p>			<p>taken into account) Check that the carer is willing and able to take on the caring responsibilities post-discharge) Carers are provided written record of 'what next' - a discharge letter for carers in patient/carer oriented/language) Carers are offered detailed signposting and support available from other organisations including social care) Carers are given the name and contact details of a HCP upon discharge so they know who to contact if conditions change etc.) Utilise Action for Carers Surrey and Carers Support West Sussex Hospital Carer Support Advisors to identify and liaise between carers</p>	
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Additional Responses

Some responses contained information that did not relate to a specific recommendation – these are given below for completeness.

Epsom St Helier

This work will be one of our priorities for 2022/23 once we are through the winter period and its challenges. In light of the continued COVID-19 crisis our focus for the next few months will primarily be to ensure that we are identifying carers coming into our organisation. Whilst we recognise this is a critical piece of work, we are navigating a challenging time and believe it is important to ensure that the foundations are in place to then build on recommendations 2-4.

We are also taking part in the Surrey Carers and Providers Network Discharge Workshop, being held in February. This will enable us to work collaboratively with other Trusts to share ideas and learnings. We will also work with the SWL Hub, and specifically St Georges Hospital as part of our new working group structure to ensure we are offering carers the most comprehensive support available.

Discharge Action plan		
Action	Responsibility	Timescale
Drop in support to wards to embed the new policy (carers ward pack, unpaid carers tab)	Patient Experience Team	Monthly
Set up a formal audit plan with the audit team to enable us to monitor and	Patient Experience Team and audit	Daily spot checks and quarterly audit

present back regularly at IPEC.		
Present findings of this report and plan to IPEC	Head of Patient Experience and Partnership	January
Attend Surrey Carers and Providers Network Discharge Workshop	Head of Patient Experience and Partnership	February
Raise awareness of Carers Policy within the Trust	Patient Experience Team	Monthly training sessions
Identify the key members of Discharge Working Group	Patient Experience Team, and the Senior Nursing Team (NMEC) Clinical Directors of Divisions, Safeguarding, Pharmacy, Carers Support Advisor, member of the Carers Forum, Discharge Team	3 weeks
Identify all current discharge and communication processes	Discharge Working Group	4 weeks
Review and adapt/design additional processes	Discharge Working Group	8 weeks
Approval of adapted/new processes	Discharge Working Group, IPEC	IPEC mtg TBC
Communicate work approved from the Discharge Working Group	Patient Experience Team, NMEC, Communications Team	Ongoing

Royal Surrey Foundation Trust

The Trust recognises the significant role that carers play and supporting them with this is a key priority for us. We have a Carers Steering Group which is chaired by myself and includes representatives from the Trust, Social Services, Hospital Carer Advisers from Action for Carers and people with caring responsibilities. The group meets bi-monthly and is in the process of reviewing our processes and further developing our carers' strategy and action plan. A working group has been established to look at improving staff awareness of the role of the unpaid carers and to ensure they are included in the discharge planning discussions, ensuring that their needs are also considered. This group will also look at accessible opportunities to be part of MDT meetings and discussions, whether that is remote or face to face. *(The trust asked us to acknowledge that these plans are work in progress).*

The report also gives examples of good experiences and we will be using those to see if there is learning that can be shared from these as well.

Surrey and Sussex Healthcare

The Trust recently refreshed its carers strategy and supporting action plan. Within the strategy and action plan we feel there are a number of things that will address the issues raised in the report relating to carers and their experiences around discharge. One of our aims is to strengthen our requirements to include carers in the assessment process, MDT meetings and discharge planning. To achieve this we will be formulating a focussed task and finish group. The task and finish group will include an appropriate number of carers and membership from ward managers, nurses, doctors and other health professionals from all of the divisions across the hospital. The group will be responsible for: Developing a carer's guide to increase develop a shared understanding. This will include the following information

- A guide for carers of inpatients (co-design approach)

- Who's who on the ward and in discharge
- The assessment process
- The discharge decision-making process and assessments
- Planning for the practicalities of discharge
- What patients and carers can expect
- Support available and how to get help.

The group will also look at creating accessible opportunities for carers to be part of MDT meetings either remotely or face to face. If a carer is unable to attend members from the clinical team will seek their views prior to the meeting.

We would also like to make you aware that we have been successful in securing funding to deliver a project on behalf of NHS England/Improvement around Commitment to Carers. This is a short-term project running December 2021 to 31st March 2022. The funding will be used to recruit to two-part time, fixed-term posts that will be responsible for driving forward our carer's strategy. The post holders will predominantly be working with staff in clinical areas (i.e. the inpatients wards, emergency department and discharge unit), raising the profile of carers with a focus on education and awareness e.g. educating staff through conversation, signposting to formal training that is available, promoting use of the carers passport, ensuring carers are aware of all resources including an Associated University Hospital of Brighton and Sussex Medical School medication helpline, improving identification of carers and fully involving them from assessment through to discharge, ensuring carers are seen as equal partners in providing care. We are confident that this project will further support the recommendations you have made