These issues have been identified within the confines of the hospital (1-3). However very little is known about what happens beyond the hospital doors (after discharge), and whether knowledge and understanding improves once an individual returns to the community.

Older individuals (>65 years) knowledge and understanding of their discharge from hospital into the community has consistently been identified in the literature as being insufficient. Prior to leaving hospital older individuals frequently report not knowing what to expect when returning home, potential complications and available community supports and services (1-3). This lack of knowledge can result in anxiety and uncertainty for these individuals regarding whether, and how, to actively seek support and be involved in the discharge process (1,4).

Background

Older individuals’ experiences of leaving hospital and returning to the community, with community services support. The focus is on older individuals’ discharge knowledge and understanding, and how this changes over time from hospital to home.

Methods

Descriptive methods were used to explore older individuals’ experiences of their discharge. The study setting was a large South Australian Healthcare region, comprising four acute care public hospitals and a range of community services.

Design

In-depth, semi-structured interviews were used to gather information from older individuals being discharged from hospital into the community. Semi-structured, face-to-face interviews were conducted with ten individuals on the day of their discharge from hospital, and a series of follow-up phone interviews were undertaken once individuals returned home.

Interviews were audiotaped and transcribed verbatim. Transcripts were analysed by hand using thematic analysis.

Objective

This poster reports on older individuals’ experiences of leaving hospital and returning to the community, with community services support. The focus is on older individuals’ discharge knowledge and understanding, and how this changes over time from hospital to home.

Findings

Limited discharge knowledge and understanding

Throughout the entire discharge process older individuals lacked even basic discharge knowledge and understanding. Prior to leaving hospital many did not know about their intended discharge time, recovery process, follow-up treatment and/or the community services which had been arranged. This lack of discharge knowledge and understanding persisted once an individual returned to the community. At home many individuals continued to lack knowledge regarding who was providing services, what these services entailed and the supports and services available.

Uncertainty about returning home and managing in the community

"Maybe …… I don’t know, I feel alright I just don’t know what it will be like to go on home…"  
"And the day that they were kicking me out I was imagining that thinking, I don’t know, I don’t know whether I can do it…"

Lack of knowledge and understanding through the discharge process contributed to some individuals feeling uncertain and anxious about leaving hospital, and managing in the community.

Passive recipients of hospital and community services

"I don’t know. I really don’t know."
"I don’t know for sure because I know that somebody rang me."
"No, I wouldn’t have a clue."

Limited discharge knowledge and understanding rendered many older individuals passive throughout the discharge process. Not knowing which community services were available, which organisations were engaged to provide support, how to contact them and what their rights were, rendered many individuals passive and without a voice.

Clinical Relevance

Hospitals and community services need to develop joint, local discharge policies to ensure that older individuals have sufficient discharge knowledge and understanding and are able to be as involved as they want to be in their care. While immediate discharge knowledge and informational needs should be met prior to an individual leaving hospital, community services have a critical role to play in ensuring individuals continue to understand the discharge process and are able to actively participate.

References

4. King R. “What is going to happen to me now?” Systemic uncertainty and complexity between hospital and home for older people, people with disability, carers and services providers. School of Population Health and Clinical Practice (2009); University of Adelaide.

Funding Sources

This project was funded by the Central Northern Adelaide Health Service.