

## CAHE Discharge Planning

### Program Evaluation: Patients

Please complete this evaluation after watching the CAHE Discharge Planning DVD.

- A. Are there any issues or problems you might encounter when you are discharged from hospital that you had not thought about before watching the CAHE Discharge Planning DVD and reading the CAHE Patient Discharge Planning Checklist (please tick):**

Issue Raised	✓
1. Do you, or your family, have the keys to your home?	
2. How will you get home from hospital?	
3. Do you have sufficient money for the first few days out of hospital?	
4. Does your home need to be cleaned before you get out of hospital?	
5. Is there fresh groceries at home in preparation for your discharge? (e.g. fresh bread, milk, fruit, meat and vegetables?)	
6. Do you have adequate heating/cooling immediately when you get home?	
7. Do you need to pay any bills in the first few days after going home?	
8. Do your family/friends need to be contacted to advise them that you are going home?	
9. Does anything else worry you about going home?	
10. Do you feel confident about preparing and eating food at home?	
11. Do you have adequate lighting at home, particularly over steps, in the bathroom and toilet?	
12. Would you like to take home a brochure or information about personal alarms, or other services?	
13. Does anything else worry you about managing once you are at home?	
14. Is there anyone who can give you a phone call every day for the first few weeks that you are home?	
15. Do you have a carer (someone who can assist the patient with aspects of daily living after you leave hospital)?	
16. Have you discussed with your carer what they might need to do for you, and how often this will happen?	
17. Are you or your carer confident that you can both manage every day?	

Issue Raised	✓
18. Do you regularly care for someone else? (an ill spouse, child, friend, neighbour or grandchild, etc.?)	
19. What arrangements have been made for this person whilst you are in hospital?	
20. What arrangements need to be made to assist you and your charge when you return home?	
21. Do you have a regular GP?	
22. Do you see more than one GP?	
23. Does the GP do home visits?	
24. Do you feel you need more education and/or assistance with your medications before you leave hospital?	
25. Do you understand about how any new medications work along with the ones you were taking previously?	
26. Are you taking any herbal / naturopathic remedies?	
27. Do you have enough medication to last for the first few days after discharge?	
28. Were you receiving community health or support services before coming to hospital?	
29. Do these services know you are in hospital?	
30. Are you expecting these services to be available for you as soon as you leave hospital?	
31. Do you know if new community health or support services have been arranged for you?	
32. Do you feel you need any equipment to help you manage in your house (e.g. walking frame, stick, rails etc)?	
33. If you has been given equipment whilst in hospital, are you confident that you can use it properly at home?	
34. If you already has equipment at home, will it still be adequate?	
35. What arrangements have you made for pets while you are in hospital, and after you go home?	
36. Are you worried about managing pets when you go home?	
37. Do you think you can manage the house and garden when you go home?	
38. Do you know of anyone who could help with house or garden?	
39. Do you drive a car?	
40. If you are unable to drive, what alternatives are available for transport?	
41. Will your shopping habits have to change if you cannot drive a car?	

**B. Are there any Patient Discharge Planning issues that you, your carer or family think should be included in the DVD or Checklist:**

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**C. Please comment on the quality of the DVD, including content and voice-overs:**

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**D. Please comment on the quality of the printed Patient Discharge Planning Checklist, including how the questions are asked and the layout:**

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**E. Would you recommend the CAHE Discharge Planning DVD and supporting documents to other friends who may have to stay in hospital? Please comment:**

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**F. Do you have any additional comments on CAHE's Discharge Planning package:**

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