

## **DISCHARGE PLANNING CHECKLIST FOR PATIENT & CARER**

This checklist is to prompt you (the patient) and your carer, family and friends to consider a range of practical aspects about your return home after being in hospital. It is very important that, during the time you are in hospital, you make time to talk through all of the items on this list with your visitors to make sure that you are fully prepared for discharge.

The items on this list have been identified by other patients like you, as things that worried them after they had been discharged from hospital, and which they wished had been brought to their attention before discharge. Being safe and confident after leaving hospital will happen if you consider the practical aspects of managing at home when you are not feeling the best. This checklist will get you started. Not all the concerns on this checklist may be relevant to you, and there may be other things that we have not mentioned that are important. Please write these down and sort them out before going home.

Remember, if there are any issues that worry you about going home, make sure that you have worked out a solution before you leave

This checklist was prepared by the South Australian Discharge Planning Research Team. Karen Grimmer and Michelle Guerin [International Centre for Allied Health Evidence, University of South Australia], John Moss [Dept of Public Health, University of Adelaide] & Julie Falco [Lyell McEwin Hospital].

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hospital! If you cannot find a solution yourself, your nurses and doctors can advise you and can help you make plans. Don't leave any problem to sort itself out!

### GETTING HOME SUCCESSFULLY

Q1 Do you, or your family, have the keys to your home?

YES  NO  *If this is a problem, how can it be solved?*

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Q2 How will you get home from hospital?

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*If this is a problem, how can it be solved?*

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Q3 Do you have sufficient money with you for the first few days out of hospital?

YES  NO  *If **NO**, can you arrange to have money available?*

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*If this is a problem, how can it be solved?*

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Q4 Does your home need to be cleaned before you get out of hospital?

YES  NO  *If **YES**, who can do this for you?*

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*If this is a problem, how can it be solved?*

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see over

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Q5 Are there fresh groceries at home in preparation for discharge? (e.g. fresh bread, milk, fruit, meat and vegetables?)

YES  NO  *If **NO**, is there anyone who can organise these for you?*

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*If this is a problem, how can it be solved?*

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Q6 Do you have adequate heating/cooling immediately you get home?

YES  NO  *If this is a problem, how can it be solved?*

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Q7a Do you need to pay any urgent bills in the first few days after going home?

YES  NO

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Q7b Who might help you do this?

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*If this is a problem, how can it be solved?*

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Q8 Do family/friends need to be contacted to advise them that you are going home?

YES  NO  *If **YES**, who will do this?*

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*If this is a problem, how can it be solved?*

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Q9 Does anything else worry you about going home?

YES  NO  *If this is a problem, how can it be solved?*

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### STAYING AT HOME SAFELY

Q10 Do you feel confident about preparing and eating food when you go home?

YES  NO  *If this is a problem, how can it be solved?*

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Q11 Do you have adequate lighting in your house, particularly over steps, in the bathroom and toilet?

YES  NO  *If **NO**, can you organise short term solutions?*

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*If this is a problem, how can it be solved?*

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Q12 Would you like to take home a brochure or information about personal alarms, or other services?

YES  NO  *If this is a problem, how can it be solved?*

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Q13 Does anything else worry you about managing once you are at home?

YES  NO  *If this is a problem, how can it be solved?*

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### AVOIDING ISOLATION

Q14 Is there anyone who can give you a phone call every day for the first few weeks that you are home?

YES  NO  *If this is a problem, how can it be solved?*

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### SOMEONE TO CARE FOR YOU

- Q15a Do you have a carer (someone who can assist you with aspects of daily living after you leave hospital)?  
YES  NO  *If **NO**, do you need assistance at home?* YES  NO
- Q15b *If **YES**, does this person live at the same address as you?* YES  NO   
*If this is a problem, how can it be solved?*
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- Q15c Have you discussed with this person what they might need to do for you, and how often this will happen?  
YES  NO  \_\_\_\_\_
- Q15d Are you and your carer confident that you can both manage every day?  
YES  NO  *If **NO**, you will both need to discuss this with hospital staff and work out a solution*  
There may be someone who could come and stay with you for a night or two.
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### ARE YOU ARE A CARER FOR SOMEONE ELSE?

- Q16a Do you regularly care for someone else? (an ill spouse, child, friend, neighbor or grandchild, etc.?)  
YES  NO  \_\_\_\_\_
- Q16b What arrangements have been made for this person whilst you are in hospital?
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Q16c What arrangements need to be made to assist you both when you go home?

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### YOUR GENERAL MEDICAL PRACTITIONER [GP]

Q17a Do you have a regular GP?

YES  NO

*If this is a problem, how can it be solved?*

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Q17b Do you see more than one GP?

YES  NO

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Q17c Which GP needs to be told about your trip to hospital?

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Q17d Does he/she do home visits?

YES  NO

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Q17e Who will let him/her know that you are coming home from hospital?

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### MEDICATIONS

Q18 Do you feel you need more education and/or assistance with your medications before you leave hospital?

YES  NO

*If this is a problem, how can it be solved?*

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Q19 Do you understand about how any new medications work along with the ones you were taking previously?

YES  NO  *If this is a problem, how can it be solved?*

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Q20 Are you taking any herbal / naturopathic remedies?

YES  NO  If **YES**, make sure you tell hospital staff about these, as some can react with your medications

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Q21a Do you have enough medication to last for the first few days after discharge?

YES  NO  *If **NO**, how will you obtain your medications?*

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Q21b Within the next few days, you may well need to visit your GP for further supply of your medications and then arrange for the prescription to be filled by a Pharmacist. Think about how you will do this.

## SERVICES THAT COULD HELP YOU MANAGE AT HOME

Q22a Were you receiving community health or support services before coming to hospital?

YES  NO

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Q22b Do these services know you are in hospital?

YES  NO

Q22d Are you expecting these services to be available for you as soon as you leave hospital?

YES  NO  If Yes, make sure that someone tells the service when you are going home

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- Q23 Do you know if new community health or support services have been arranged for you?  
YES  NO  Make sure you have their details so you can follow them up
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## EQUIPMENT THAT COULD HELP YOU MANAGE AT HOME

- Q24a Do you feel you need any equipment to help you manage in your house (eg walking frame, stick, rails etc)?

YES  NO  *If YES, do you have all the advice that you need?*

- Q24b If you have been given equipment whilst in hospital, are you confident that you can use it properly at home?

YES  NO  *If this is a problem, how can it be solved?*

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- Q25 If you already have equipment at home, will it still be adequate?

YES  NO  *If this is a problem, how can it be solved?*

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## PETS, GARDEN AND HOUSE CARE

- Q26a What arrangements have you made for your pets while you are in hospital, and after you go home?

- Q26b Are you worried about managing your pets when you go home?

YES  NO  *If this is a problem, how can it be solved?*

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Q27a Do you think you can manage the house and garden when you go home?

YES  NO  *If **NO**, what tasks are urgent?*

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Q27b Do you know of anyone who could help you with house or garden chores?

YES  NO  *If **NO**, do you know who to contact for assistance?*

## DRIVING and TRANSPORT

Q28a Do you drive a car?

YES  NO  \_\_\_\_\_

Q28b If **YES**, have you discussed with staff whether you are still well enough to do this?

YES  NO  \_\_\_\_\_

Make sure that you ask hospital staff before you leave, when you might expect to return to driving.

Q28c If you are unable to drive, what alternatives are available to you for transport?

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Q28d *Think about how many times you currently go out to shop each week.*

Will your shopping habits have to change if you can no longer drive a car?

YES  NO  *If this is a problem, how can it be solved?*

## THINGS TO DO BEFORE YOU GO HOME

Speak to at least one hospital staff member about how long it might be before you will be feeling better and can expect to resume usual activities.

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If your physical abilities have changed as a result of your illness, make sure you understand about what you can and can't do when you go home.

Ask staff questions about what has happened to you, and what changes you can expect in your health and daily activities once you return home.

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