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**Notes of Brighton and Hove LINK  
Hospital Discharge Action Group (HDAG)  
14.00-16.00, Tuesday 30<sup>th</sup> March 2010, Clifton Room, Brighthelm**

<b>Present:</b> Robert Brown MBE (Chair of HDAG/LINK Chair) Sheila Killick (LINK participant, Carers Centre) Mary Kirby (LINK participant)		<b>Apologies:</b> Dawn Webb (LINK participant, Care Home Manager) Rita Bowman (LINK participant, Crossroads)	
<b>In attendance:</b> Claire Stevens, LINK Manager (minutes)		<b>Providers:</b> None	
<b>Minutes of last minutes (9<sup>th</sup> February)</b> The minutes were agreed as an accurate record of the meeting.			
<b>Matters Arising (9<sup>th</sup> February)</b> (outstanding actions below) Action from February meeting - find out how often difficulties with the pharmacy impact on hospital discharge i.e. cause delays. Brighton and Sussex University Hospitals NHS Trust (BSUHT) responded that 80% of delayed discharges were due to a delay in medication although this is not a formally recorded figure.			
<b>Agreed Action</b>		<b>Who</b>	<b>Date Completed</b>
<b>Outstanding Actions from 9<sup>th</sup> February Minutes</b>			
Dawn will contact Ambrose Paige (who manages care home contracts) who can pass this on to other care homes in the area.		Dawn	
Dawn to contact some nursing and/or residential homes to ask for their experiences on hospital discharge.		Dawn	
Check with BSUHT whether they use Jonah (Discharge Planning Tool).		Host	
Email SECAMB's discharge policy again to HDAG.		Host	31.03.10
<b>Actions from March Meeting</b>			
Ask Social care: How many patients do hospital social workers assess per week? and how many discharges do they think (approximately) are delayed due to home care not being available or not having suitable accommodation?		Host to ask Social Care	30.03.10
Sheila to review the survey prepared by Claire and amend according to a carers' perspective.		Sheila	Completed

Produce survey – online and hard copy.	Claire	03.04.10
Use survey at April Falls event	Val (Host)	Not completed as the event was earlier than we had anticipated. The survey went out with the March newsletter and also will be rolled out in outreach activities.

### Summary of Discussion

- Claire described the outcomes of the evaluation of the two LINK action groups. Claire and Neil (LINK Steering Group member) had devised protocols and templates to strengthen the work of the action groups.
- The main focus of the action groups should be outcomes and making recommendations to the Trust/Providers. These recommendations should be made to the Steering Group each month.
- Other improved ways of working include the balance of LINK participants should be equal or more than the number of providers. There will also be a confidential section at the end/start of each meeting (without providers) to enable participants to speak freely.
- Mary explained that she could no longer be part of the group but maybe able to do some work in July.
- Claire encouraged the group to formulate an action plan which would help focus the group on actions/outcomes.
- HDAG also need to gain more views and opinions from patients and carers and this would be reflected in the work plan.
- Claire explained that Pete Flavell (BSUHT Patient Experience Manager) had suggested the LINK may want to ask patients in the discharge lounge for their experiences. **AGREED**
- It was agreed that the HDAG should focus on the social aspects of hospital discharge and on patient transport/ambulance.
- It was agreed that a short survey would be useful – one specifically for patients and one aimed at carers.

### Recommendations to Brighton and Sussex University Hospitals NHS Trust (BSUHT)

- Hospital discharge leaflets to be given to all patients and carers
- Staff must use the BSUHT discharge checklist
- LINK hospital discharge action group to have an input into the discharge leaflet and be given a date when the leaflet will be reviewed.
- Letters stated in the BSUHT Discharge Policy are utilised.
- Discharge summary must be legible and preferably typed.
- BSUHT to ensure they have a more robust collation of data on pharmacy related delays.
- BSUHT to reduce discharge delays due to pharmacy/medicines by 60% in 2010
- Patients and carers should receive written information and appropriate contact number/s where they can get help or advice after leaving hospital. (Improved communication is key to making sure that patients and their relatives/carers have all the information they need about the patient's condition, their medication, any

follow up treatment or support, and information about support services in the community).

**Attached Papers**

- HDAG work plan.

Date of next meeting: Tuesday 11<sup>th</sup> May, 14.00-16.00, Clermont Room, Brighthelm, North Road, Brighton, BN1 1YD. For apologies and assistance please contact: [charlotte@cvsectorforum.org.uk](mailto:charlotte@cvsectorforum.org.uk) 01273 810235