# PART B

**PART** B will help keep you up-to-date about hospital care and what needs to happen after the person you support leaves hospital. Some of the information in this section may be in the *My Health Record* if the person you support has one.

# > Summary Medical History - What you know

On admission to hospital, a health professional may ask you for some of this information. They may also obtain it from a previous hospital record, a *My Health Record* or referral letter.

Known medical history includes

(e.g. high blood pressure, depression, arthritis, pressure sore, infections, diabetes, cataracts):

What operations have they had? (e.g. hip replacement)

What are they allergic to? (e.g. foods, medications, adhesive tapes, scented products)

What happens if they have an allergic reaction?

# > Current Medicines

Medicines includes all tablets, liquids, creams and inhalers. Much of this information will be in a *My Health Record*, if the person you support has one. If over the counter medicines or doctor prescribed medicines have been commenced and there is no *My Health Record*, obtain information about them from the label and show this record to the health professional on admission. Alternatively, you can take the medicines to hospital.

Medicine name	<ol> <li>How often is it taken?</li> <li>How much is taken &amp; when?</li> </ol>	What do you understand as the reason for taking the medicine?
Example: Prescribed medicines (e.g. Warfarin)	One tablet each morning before food	To thin the blood
Example: Over the counter medicines (e.g. Paracetamol)	Two tablets four times a day	For joint pain
Example: Herbal medicines (e.g. St Johns Wort)	5mls twice a day with food	To improve mood

# > A guide to help you be informed and involved about what happens in hospital and prepare you and the person you support for discharge

Even with your best efforts there may be things discussed during the hospital stay that you will not have thought about before. Start asking questions and getting information from the time of admission to hospital. Space has been provided for you to record the information you gather should you wish to do so. At the time of discharge or transfer the hospital should provide a copy of the hospital discharge or transfer plan for the person you support. A hospital health professional may also attach the discharge or transfer plan to their *My Health Record*.

Date admitted to hospital:

Reason for admission to hospital:

Is there an expected date of discharge or transfer from hospital?

### Questions to ask to become involved

- Who do I ask about becoming involved in discussions with health professionals about the health care of the person I support?
- How can I participate in meetings with health professionals while the person I support is in hospital? Notes:



### Treatments, procedures, tests, and assessments while in hospital

Each time you visit the person you support, look for an opportunity to ask a health professional about what treatments, procedures, tests and assessments have been done so you have a general understanding.

Notes:

### Questions to ask about preparing for care at home after hospital

Will I be able to continue to care for "x" at home?

Is there someone at the hospital who will help me to organise extra help I will need at home? Who will arrange it? When will it commence? What will it cost?

For example:

- District nursing service/community nursing service
- Help with cleaning and housework
- Alterations to the home and installation of equipment
- Meals on wheels
- Respite care (e.g. a break for a few hours, days, or weeks)

Who can I contact at the hospital if I have any questions or problems?

Who else can help me after I leave the hospital?



# Questions to ask about preparing for care at home after hospital (continued)

Notes:						
Living arrangemen	ts after hospi	ital				
At some time during t conversation/s with h					d expect to	o have a
After hospital	/ly home		Other:			
support will be	heir home Rehabilitation unit	t/facility				
	esidential aged c					
	)ther (specify in n	ext column)				
They will be transported	from hospital by	?	Other:			
Ambulance or a pat	ient transport ser	rvice				
Other (specify in next column)		Date and time this will occur?				
			Date:/_	/	Time:	
After hospital help						
Before leaving hospita person you support ne	•			after discha	arge/transf	er if the
Name of person	Title or designation	Name of ho	spital/service		t phone ber/s	Best time to contact
		<u> </u>		<u> </u>		



### Equipment, medical/nursing supplies, or home modifications

Has someone spoken to you about equipment, medical/nursing supplies, or modifications to the home that may be needed?

Do you know:

- Whether your needs as the carer will be assessed and who will assess them?
- Whether an assessment will be completed before discharge from hospital?
- What will be provided free of charge or if not, at what cost?
- Who will provide the equipment and or medical/nursing supplies and how will you get these?
- When supplies will be delivered and when home modifications will be completed?
- How to use any new equipment?

Notes:

## Appointments after hospital discharge

Before discharge/transfer you should know about any appointments that have been made for the person you support.

1.	Name of health professional/clinic/department/service provider:			
	What the appointment is for:			
	Where it will take place:			
	Has the booking been confirmed? YES NO	Date of appointment	Time of appointment	
	Contact details:			
	What I need to bring:			

# PART B

2.	Name of health professional/clinic/dep	partment/service provider:		
	What the appointment is for:			
	Where it will take place:			
	Has the booking been confirmed? YES NO	Date of appointment	Time of appointment	
	Contact details:			
	What I need to bring:			
3.	Name of health professional/clinic/department/service provider:			
	What the appointment is for:			
	Where it will take place:			
	Has the booking been confirmed? YES NO	Date of appointment	Time of appointment	
	Contact details:			
	What I need to bring:			
4.	Name of health professional/clinic/dep	Name of health professional/clinic/department/service provider:		
	What the appointment is for:			
	Where it will take place:			
	Has the booking been confirmed? YES NO	Date of appointment	Time of appointment	
	Contact details:			
	What I need to bring:			



# Changes to medicines

The person you support may have had their medicines changed while in hospital. They may have stopped taking a medicine, the dose may have changed, or they may have started taking a new medicine. Information about medicines the person you support will be taking when they are discharged can be provided below.

1.	Name of medicine
	What does it do?
	When is it given?
	For how long?
	What should I look out for and do?
	What if they won't take it?
2.	Name of medicine
	What does it do?
	When is it given?
	For how long?
	What should I look out for and do?
	What if they won't take it?
3.	Name of medicine
3.	Name of medicine What does it do?
3.	
3.	What does it do?
3.	What does it do? When is it given?
3.	What does it do? When is it given? For how long?
3.	What does it do?         When is it given?         For how long?         What should I look out for and do?
	What does it do?         When is it given?         For how long?         What should I look out for and do?         What if they won't take it?
	What does it do?         When is it given?         For how long?         What should I look out for and do?         What if they won't take it?         Name of medicine
	What does it do?         When is it given?         For how long?         What should I look out for and do?         What if they won't take it?         Name of medicine         What does it do?
	What does it do?         When is it given?         For how long?         What should I look out for and do?         What if they won't take it?         Name of medicine         What does it do?         When is it given?



# Involvement in care after hospital discharge

At some time during the hospital stay you should have a talk with one or more health professionals
about your involvement in care after hospital. Be honest about what you are able to do and what is
too difficult for you.

I have had a discussion with a health professional about	what I have to do with:
Wound dressings	YES NO
Catheter care	YES NO
Moving the person I support (e.g in and out of bed)	YES NO
Helping take medicines	YES NO
Medical equipment purchase/hire and use	YES NO
Physiotherapy	YES NO
Other (specify below)	YES NO
Other:	
Notes:	



### **Education needs**

Being in hospital can change the support you will need to provide at home. There may be new things you need to know so that you can provide support. Ask to have any care changes explained to you. You may be asked to do a 'trial of care' to see how you are able to cope and to identify if you need more help. The following points are provided to help you start a conversation with health professionals about your education needs.

Before discharge from hospital I have been taught or have received information about:

#### Pain

- How I know they have pain
- What the best ways to relieve their pain are
- Who can help us manage pain

#### Toileting

- How to manage toileting
- How to establish and/or continue a toileting routine
- How to apply and dispose of continence aids
- Know when continence aids need to be changed

#### Bathing, showering, dressing and grooming

- How to bathe/shower
- The types of clothing and/or equipment that can make bathing and dressing easier
- How to put on and take off compression stockings
- How to protect a wound dressing so it does not become soiled or wet
- How to replace a wound dressing that has become soiled or wet
- When to replace a wound dressing

#### Sleep

- How to help the person I support sleep at night
- What I can do if they can't sleep and they move around the house at night

#### Meals

- Whether I can get 'meals on wheels', or other help to prepare meals
- How I access help with meals and what it costs
- Helping with eating
- Any special dietary requirements

#### Behaviours and confusion

- How a particular behaviour/s can be a result of an unmet physical and/or emotional need
- How to work out what the unmet need is
- Different ways that can be used to prevent behaviour/s resulting from an unmet physical and/or emotional need
- Different ways that can be used to respond to behaviour/s resulting from an unmet need
- What I should do if I think the level of their confusion has changed making care more difficult
- Who should I contact if I need help

#### Transport

What options are available for assistance with transport to attend appointments

#### **Treatments and procedures**

Any new treatments or things I will have to do



#### **Education needs (continued)**

Notes:

# Community Services needed

Before the person you support is discharged from hospital community services may need to be organised. Community services used before hospital admission and stopped may need to be recommenced and others started. Someone at the hospital should have a conversation with you about what services are available in your local area.

- Have you been provided with information about what community services are available to assist you and the person you support?
- Have you spoken with a health professional at the hospital about the need to recommence a community service/s you received before hospital admission?
- Have you spoken with a health professional at the hospital about any new community service/s you and the person you support will need at home and how they will be arranged?



#### **Community Services needed (continued)**

#### Notes:

# Hospital discharge/transfer plan or summary

All patients discharged from hospital have a discharge or transfer plan or summary completed and you or the person you support should receive a copy, which will complement the information you have gathered in this guide.

A written copy of the hospital discharge/transfer plan or summary of care should include:

- A summary of the treatments, procedures, tests and assessments including information about any test results still to be received
- Date and time of discharge/transfer and transport arrangements
- Services after hospital or care that has been organised or is needed
- Referrals, follow up appointments or planned therapies
- Information about any equipment, medical supplies or home modifications needed
- Medication changes and current medications
- Changes to previous treatments
- Instructions about any assistance you might need in order to provide care at home
- Discharge support hospital contact details for assistance after discharge
- Details of care arranged after discharge

If this is not available at the time of discharge from hospital, ask whether a copy will be sent to you.

Notes: