



Care & Repair

Hospital to a Healthier Home

Good Practice Guide



Introduction

Increased admissions, and delayed transfers of care of older patients can be a significant feature of winter pressures in our hospitals.

Welsh Government's National Programme for Unscheduled Care, through its winter delivery budget, is funding services delivered by Care & Repair in 12 hospitals across Wales during winter 2019/20.

The service has been operational since January 2019, and an Evaluation Report on the first 3 months can be found at:

www.careandrepair.org.uk/files/2715/6578/0045/Hospital_to_a_Healthier_Home_Winter_Pressures_Pilot_Evaluation_E.pdf



The Evaluation Report provides comprehensive information on the experiences of patients, hospitals staff, and Care & Repair staff, and outlines the key learning points. This short guide highlights some of the good practice identified so far, and aims to help Hospital Managers, clinical staff, and Care & Repair managers and staff make the best use of the resources at their disposal through Hospital to a Healthier Home.

Where is Hospital to a Healthier Home (H2HH) operational?

The service is currently available at the following 12 hospitals from Care & Repair Agencies:

- **Glangwili and Prince Philip Hospitals**
Carmarthenshire Care & Repair
- **Neath Port Talbot and Morrison Hospitals**
Western Bay Care & Repair
- **Royal Glamorgan and Prince Charles Hospitals**
Cwm Taf Care & Repair
- **Princess of Wales Hospital**
Bridgend County Care & Repair
- **Llandough Hospital**
Cardiff and the Vale Care & Repair
- **Royal Gwent Hospital**
Newport Care & Repair
- **Wrexham Maelor Hospital**
North East Wales Care & Repair
- **Ysbyty Glan Clwyd**
Conwy and Denbighshire Care & Repair
- **Ysbyty Gwynedd**
Gofal a Thrwsio Gwynedd a Mon



What resources are available?

Each Care & Repair Agency has a Hospital to a Healthier Home (H2HH) Caseworker, whose role is to work directly with hospital teams and patients to identify and resolve housing problems that may lead to a delayed discharge when the patient is medically fit to be discharged.

The Caseworker has direct access to funding to pay for things to be done quickly, where this will mean a patient can be safely and more quickly discharged.



What sort of things does the service cover?

Examples of the things that the service covers, that can delay speed up discharges are:

- quick home adaptations such as hand-rails, grab rails and small ramps;
- moving beds from upstairs to downstairs;
- carrying out essential small repairs that makes a patients home safe to return to; for example repairs to electrics
- providing key safes;
- preventing falls by making properties safer; by
- making the home warm by improving heating and insulation.



These are just examples. The reality is that there will be many other housing problems the service can solve, and free up clinical staff's time troubleshooting, identifying who can help, and problem solving.

What have we learnt, and what does good practice look like?

- Best results are achieved by fully integrating Care & Repair H2HH Caseworkers into the Hospital's multi-disciplinary teams, discharge hubs, or other local arrangements for planning safe discharges. The more informal, day to day conversations hospital teams are able to have with H2HH Caseworkers, and vice versa, the more understanding of potential problems and solutions will follow.
- Making sure H2HH Caseworkers can have conversations with patients as early as possible helps identify housing problems and solutions as early as possible. In the past conversations have happened too late, or even at the point where safe medical discharge is possible, leading to delayed discharge and poor patient flow.
- Facilitating H2HH Caseworkers spending time talking to patients in Emergency Departments, clinics, pre-op clinics, and wards can all help identify and resolve housing problems quicker.
- Discharging a patient is not the end of the journey. There are often wider housing problems that need to be addressed to ensure a patient can live independently and safely at home, and to prevent re-admissions. A key element of the service is the longer term relationship the H2HH Caseworker, and the wider Care & Repair Team can have with the patient to resolve bigger housing problems such as the need for large adaptations, more major repairs to make their homes fit to live in, or tackling cold homes and fuel poverty which often lead to respiratory illness, circulatory problems, and further admission to hospital. The best impact is achieved where all patients returning home are offered as routine a Care & Repair "Healthy Home Assessment".
- Health and wellbeing after discharge can be adversely affected by disposable income levels and poverty. The H2HH Caseworker and Care & Repair have the skills and resources to ensure all patients are claiming benefit entitlements, personal independence payments (PIP) and Attendance Allowance. This can mean thousands of pounds for older patients, and make a huge difference to their future health and wellbeing.
- Other third sector and support services in hospitals can be a vital source of referrals into H2HH, and vice versa. Where there are services such as those offered by British Red Cross, Age Connects, Age Cymru, RVS and others, that support patients with help such as transport home, and settling in, H2HH Caseworkers should develop cross referrals and joint working to maximise the help provided to each patient.

This service is operational at Ysbyty Gwynedd

To find out more and make a referral, please contact your Care & Repair Hospital to a Healthier Home Caseworker or local Care & Repair Chief Officer:

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