

HINTS AND TIPS



**Falkirk
Moving
Assistance
Project**

Home from hospital

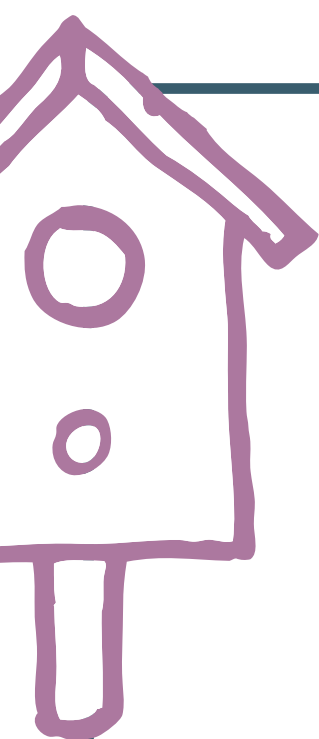
The Falkirk Moving Assistance project produced tips for people who are thinking about moving house. The suggestions came from the experiences of older people in Falkirk District and their families.

People told us that another situation where it would be good to have some tips is when someone is coming home from hospital.

This booklet is for people who are in hospital and for their families and friends. It also lets people plan ahead in case they have a spell in hospital.

It covers:

- The first few days of a hospital stay.
- When someone is in hospital for a longer period.
- Getting repairs and changes made to your house to help you get back home.
- Planning for the first few days after you come home from hospital.
- Once you are home and settled.



These are the other tips in the Moving Assistance series:

- **Do you want to move or stay?**
- **Choosing the house that's right for you.**
- **Reducing what you have.**
- **Making the move.**
- **Supporting your relative or friend.**
- **A directory that provides more information about the services and community groups in the area.**

These tips go alongside other useful advice and booklets from Health and Social Care professionals. There are useful phone numbers at the back of the booklet.

The first few days in hospital

Many people told us that the arrangements for getting home from hospital begin as soon as you go into hospital!

Some people have planned for a hospital stay but for many older people this is something that is unexpected. If you can get things right at this stage, life will be much easier.

- You will not be worried about the people who matter to you, or about what is happening to your home.

- It will be easier to get home if your house is ok.
- Things will be more convenient and comfortable when you do get home.

Also, many people who have a stay in hospital are only there for a few days.

These are the points you should check, especially if your stay in hospital was not planned.

You and the people around you

You will want to know that the arrangements are ok for people

you look after. The hospital staff will probably have asked you about anyone you care for at home. But there may also be friends and neighbours that you check in on, or family who you don't see every day who you help.

Check that someone is feeding and looking after any pets you have.

Tell your family where you are. The hospital staff might tell someone who you list as your 'next of kin', but that won't be everyone in your family. If family know where you are, they won't worry about not getting you at home. They will also be able to help you plan for getting back home.

Tell your neighbours where you are, if you look out for each other. Your neighbours may be able to help with some practical things, especially if you do not have family living nearby. They can also keep an eye on the house for you.

Tell someone for any volunteering that you do. This could be the person who organises the group or service. Or you could ask a friend to tell them. That way you know that the people or activities you support will all be ok. Also, this is often the sort of group

of people who can give you a hand if you need it when you get home.

Ask someone to rearrange any other appointments if you can remember them, or to check this for you if they can.

Your house

Get someone to check that your house is secure. Things to check include:

- The doors and windows are shut and locked.
- Appliances are switched off (apart from things like the freezer).
- Getting rid of food in the fridge that would go off in a few days.
- Tidying up – such as putting out the kitchen bin and sorting anything in the dishwasher and washing machine.
- Cleaning up – for example, if anything was stained or spilled when you were unwell.

Your support

Get someone to tell people who look out for you where you are, so they are not worrying about you.

Tell any support services who look after you at home where you are. It is also good to tell

places like day activities that you are missing a week and might be away longer. Again, this prevents people worrying or looking for you and makes it easier for them to help you when you get home.

If you need some extra support after you get home, the team at the hospital will discuss this with you. You may be referred to the Reablement Service or to a Care at Home service.

Suggestions for the future

People shared their suggestions on what has helped them feel more confident for the future, especially when they lived alone and did not have family nearby.

- Think about getting a key safe, even if there is not a regular support service using this. You can then tell a friend or neighbour what the code is if you ever need it. (And this is useful for you if you ever lose your keys.)
- Check out local services that deal with things that are important to you, such as looking after pets and house cleaning. Keep a list of their phone numbers in your handbag or wallet.
- Keep the phone numbers of a few people who are good at knowing what is happening

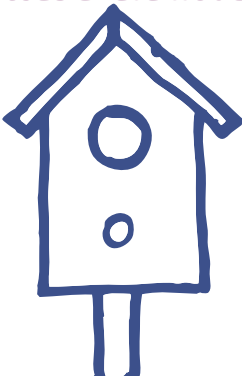
in your community. They can then track down things like volunteer support if it is needed.

“I fell when I was out in town. The ambulance took me straight to the hospital and when I found I had a complicated fracture I knew I would be there for a while. But I had just popped out for a few hours. My daughter came to be with me at the hospital and a neighbour looked after the house – took the cat to stay with her, sorted my washing, emptied the fridge and locked up. You have no idea what a relief it was to know that was all looked after.”

“My tip is make sure someone nearby has a key. My son has a spare key but he was away in London when the GP sent me to the hospital. It was a real palaver to get word to a neighbour and then her getting up to the hospital to take my key and get in to look after things in the house and bring my nightie to me. Now we have each other’s keys, just in case.”

“I never thought about what had happened at the house. I just went straight up to the hospital to see Dad and was only thinking about him. It was only when I went round a few days later to get his glasses and so on that I found the back door wasn’t locked, the carpets were a mess where he had been sick – you know the sort of thing. It all turned out ok and we got it all cleaned just in time for Dad coming home. But my tip is to get someone to check the house as soon as you can.”

“We thought that because mum was in hospital that the GP would know and they would cancel other health appointments. But it doesn’t seem to work that way. We missed an important appointment and had to wait for months for another because she was a ‘did not attend’.”



“If someone is going to your house, they could bring the wall calendar or your diary in to you, so you can both check what needs to be done. My son did that and we remembered all sort of things – the car share for going to church, the chiropodist, putting out the bins on the right night, all sorts of day-to-day stuff that is a real nuisance when it goes skew-wiff.”

When you are in hospital for a longer spell

Your priority will be getting well and planning for when you get home. But there will still be things to do for the house that will make it easier for you to get home.

You and the people around you

Hospital can be lonely even through you are surrounded by people and you will want to keep in touch with friends and people who care about you. If you are in longer than a few days there may be more people who visit or get in touch.

- Ask someone to bring your post round to you and check for phone messages.
- Usually Patient Information Areas within the hospital will have internet access. You can use this to keep in touch with family and friends.

Your house

It is good to know that someone will check your house, especially in winter months.

- Ask someone to pop round and check everything is as it should be.
- Make sure the boiler is ok if it has not been used for a while.
- Have the heating on for hour or so each day so that the house is not getting too cold and to ensure you don't get a burst pipe.
- You won't need to keep the heating on for long periods if the house is empty as this will be costly for you.

Age UK has handy tips for everyone on looking after your house in colder weather: www.ageuk.org.uk/health-wellbeing/keeping-your-body-healthy/winter-wrapped-up/preparing-for-winter/

If you have been in hospital for a while, it is good if someone

can get the house cleaned and freshened up for you just before you get home. You can give them a list. Here are some ideas to get you started – you can change this and add other things, so it is done the way you like it.

- Even an empty house gets dusty, so someone dusting and giving it a vacuum clean makes it nicer.
- Open the windows and get some fresh air in for an hour or so.
- Put fresh sheets on the bed.
- Get in food essentials. The top items on our lists were tea, milk, bread and packets of biscuits, plus some things that are easy to prepare and give energy to someone who is recovering but still a bit poorly.

“Coming back to my own bed with my own sheets and blankets, all lovely and waiting for me. If you can do that for someone it will make such a difference for them.”

“My grandchildren insisted on adding a tub of ice cream as their treat for Grandpa coming home from hospital. But that's the thing that he wanted! Lots of energy and easy to take.”

If you rent your home, let the landlord know that you may be away for a while, even if you are not sure how long. That will let them know that you are planning to come back home even if the house is empty for several weeks or longer. They can also arrange to keep an eye on the place.

Taking care of bills and other money matters

You may be worried about bills and how they will be paid. You will want to know that someone is looking out for bills, especially if you pay household bills as they come in rather than through the bank.

- You can ask someone you trust to bring your chequebook in to you. Or you can ask them to look after the chequebook for you and bring it in when you need it.
- Ask someone you trust such as a neighbour or family member to keep an eye out for bills to bring in and post letters for you.
- It can be easier to set up a Direct Debit for your bills so that they are paid for automatically meaning you don't have the added concern of keeping on top of things as they come in.

You can ask the staff on the ward about how the hospital can help by looking after money or valuables for you while you are there.

If you find that keeping on top of money matters is becoming too difficult, you might prefer to have someone else looking after money. This can also be helpful if you are likely to be in hospital for a longer time. You can get information about how to do this from the Citizens' Advice Bureau.

The CAB can give you or anyone who is your family carer advice on what happens when someone is in hospital for longer than a few weeks.

Your support

Staff at the hospital will have been planning what support you need to get home, and will have been talking to you and your family about this. This will include staff such as the Occupational Therapists as well as the medical and nursing staff.

Some people get support from the Reablement Team. This is arranged by the hospital. The Team members will come to you at home to help you work on exercises and so on. They can also help you work out how you will manage in your own house.

The team will also have talked to you about a care plan if you are going to need more support. The social work team will do the assessment with you.

It is also a good idea to think about what you want in a wider way, such as the support you get from ordinary services like shops, as well as from care services.

If you do not need support paid for by the Council, you can still decide to arrange some help yourself.

- The social workers and other members of the team will give you good advice on what may be helpful and where to find a service that will be right for you.
- There are voluntary organisations where staff have experience of what can work and know about local sources of support. The phone numbers are at the back of the booklet.
- The Over the Fence project has good ideas, based on what other people across Scotland found worked well: <http://www.overthefence.org.uk/home/in-detail/how-to-work-out-what-i-want/>

Getting repairs and changes to the house

Our general tips

Think small as well as big. Often there are wee gadgets that let you feel independent and confident. Examples are chopping boards that let you chop things with just one hand, kettle tippers that let you pour boiling water safely, and handrails and bath seats in the bathroom.

If you are in a rented house, especially from a Housing Association or the Council, it is a good idea to let them know early as possible that you may need some changes at home. They may be able to suggest more options. They will also be able to help you with changes such as handrails and may be able to suggest places for helpful equipment.



You may need to think about what sort of house you live in, as that might limit the bigger changes that can be made. We all know that you can't put in an extension if you live in an upstairs flat. But other things may not be so obvious – such as where the pipes are and what sort of building material your house is made from.

When to make changes – when someone is in hospital or after they get home?

Some people find it better to organise changes to their home when they are in hospital so that things are ready for them when they get home.

- The Occupational Therapist or Physiotherapist might suggest equipment or other things that will make your house easier and safer for you. If these get ordered while you are in hospital, they are more likely to be there for you getting home.
- It can be good to get repairs or other changes done while you don't have to be bothered by any mess or inconvenience.

Other people find that it is too difficult to decide about changes and it is better to wait until they get home.

- It is easier to make a good decision when you are not worried about other things.
- It is also easier to make decisions when you have more people to talk to and get ideas and advice from them, and can take your time over those conversations. Hospital visiting is not ideal for that.
- It can be harder to concentrate and think about all the options and details when you are feeling unwell.
- What seems like a small decision to other people can feel like a very significant decision for you.

There are situations when it is better to wait, at least for some of the changes.

- It can be important that some equipment is in the right position for you.
- Sometimes you want to wait and see what you will be able to do in your own room with your furniture etc before you make any decision.

It is a good idea to be clear about any risks there might be for you going home.

- Some people have already got good informal supports or practical arrangements in place, such as when they

have already arranged that a relative or friend will be staying with them. Other people might be worrying about a risk that is not there.

- Sometimes a lack of communication can mean you are not coming back to an arrangement that you thought was in place – so there is a risk you did not know about.
- Sometimes people are happy to accept situations which other people think are risky.
- It is important you are clear about what support is in place for you when you get home and what options are available to you.

“I had 2 falls in the bathroom and this time decided I had to get the bath changed to a shower. My family got that done for me while I was in hospital. I still got to choose the tiles and so on. We decided I could have a bath at my daughter’s any time I wanted a soak, but in the last year I’ve never been bothered about it. I should have done it years ago.”

Remember this is not an ‘all or nothing’ choice: you can decide to make some smaller changes about things that need done in

order to get home, and leave the bigger decisions until later.

- You can talk over what changes can be done before and what needs to wait.
- Be willing to put up with something that is not ideal if that is easier to change later.
- Think about temporary changes like small equipment or things that can be taken out easily and don’t cost too much.
- If you do find that some things work well and you still want them, you can always get a better or stronger piece of equipment that will last longer.

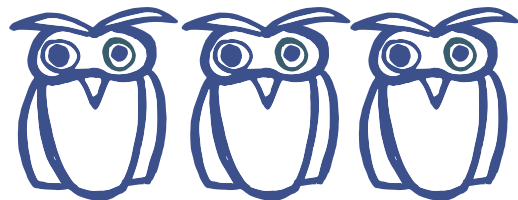
“People at the hospital were telling me I couldn’t manage in my house and I needed to decide where I was going. But I knew I could not make a decision until I was back home and sleeping in my own bed. In the end my family arranged something that I knew was not ideal, but it was good enough and it got me back to my own home. A few months later I knew what I could do and what needed to change, and we got it sorted then. I’m glad I waited.”

“The one mistake was putting up the grab rails before Dad got home. They were too far apart for his wee shuffling steps and he had to stretch to reach them. So that made him lean forward and fall - not what was intended!”

“You need to remember that for many older people this is yet another loss that they are facing - accepting that they cannot be as independent and that they are getting more frail. For me, that spell in hospital was the time I came to terms with my husband’s death and having to manage on my own.”

“It is temporary bits of equipment, not temporary adaptations. I was talking about things I would change later if they did not work and the person at the hospital got anxious - but she thought I meant big expensive changes being done twice. Sometimes people use the same words to mean very different things.”

“We got the lighting improved in the hall, as that was where dad was falling when he was going to the bathroom at night. We got good clear overhead lights with no more dull spots and motion-sensor so the lights came on when anyone went in to the hall, plus a wee table lamp that was on all night. Then we realised that the other rooms were also not good enough for his eyesight now, and got the good lights for the bathroom and kitchen too. The OT suggested other equipment that would make it much easier for dad. We had it all in place so he got home as soon as the doctor said he could go. That was a few hundred pounds shared between the 3 of us, and a lot cheaper (and less upsetting) than mum and dad having to move house.”



What to include and how to make the changes

Don't just think about changes that are linked to the reason why you went into hospital.

- Think about any changes that will make life easier or safer.
- It can be useful to get a Fire Safety Check, and get any of this equipment or changes done at the same time.
<http://www.firescotland.gov.uk/your-safety/hfsv-form.aspx>

The way that changes are done is as important as what gets improved. These are tips for families or workers who are organising changes for someone who is in hospital.

- Remember that people want the changes to happen in a way that lets them still be in control of their home and their life.
- If things need to be changed, give the person as much choice as possible. Examples are choosing colours and fittings as well as seeing plans.
- Make enough time for the person to think about things and make decisions throughout the process.
- You can ask them how much detail they want, and what things they want to decide and what you should just get on with.

- Pay attention to details that matter to this person.
- Remember that it is harder for someone to make decisions or to concentrate when they are not feeling well. This can vary even day-to-day.
- Use photographs to show the person what the changes will look like and how the work is progressing.

Think about outside the house as well as inside.

- Better banisters at the front or back door can help the person get out again.
- Getting a non-slip surface on the path to the street can help the person feel confident they will not have a fall there.
- A hut or some other way of storing items can let the person – and other people such as deliveries – store items there or leave them until someone else is able to bring them in.
- Look at the place where the bins are kept. Can that get made safer and easier? Or is there a neighbour who will help the person put the bins out?

The families we talked to suggested tips that would make it easier for the person once they got back to their home.

- Take photographs before you start doing any work in the house. That way you can refer to them and arrange things in a similar way afterwards.
- Ask the person how they want things done. For example, they may prefer you to leave stuff out of cupboards and then help them put it where they want it over the next few days or even weeks.
- List what is in drawers and cupboards if any of that has changed.
- Put labels on any new equipment or fittings, so the person knows what they are for and how they work.
- Leave the instruction manuals in a really obvious place. And get a copy in larger print if the person will find this useful.
- Make sure several relatives or friends know how to work the new cooker, shower or whatever. That way you can all help the person if they, or someone like a care worker, is uncertain what to do.
- It helps to have photographs or a film clip of how the changes work – such as going from the bathroom to the bedroom, putting on the new shower, and so on.

“Mum had been saying for a while that she felt the place needed freshened up, but being in a small flat makes it awkward to decorate. So while she was in hospital my brother got everywhere painted the way mum wanted it and all the furniture back.”

“I know the family meant well, and the new kitchen is a lot safer, but I could find NOTHING when I got home. It was a real effort looking through cupboards and drawers every time, especially when I was still tired and not quite myself. My tip would be to talk to the person about how they want things and put labels on anything that is new. Remember that it is their house.”

“The family brought me photos of the bathroom being done and wee film clips on their phones of them doing the painting and cleaning up. They were funny. It also made me feel that there was progress happening somewhere, and that was good on days when I wasn’t improving.”

“Our advice to other families is to also check out what will make the house work for someone who has dementia. There are things like lighting that is gentler with no bright and dull spots, or replacing the kitchen cabinet doors with clear plastic, that can help someone be independent and comfortable in their own home for longer. The Dementia Team will give you advice - it is worth asking them for their suggestions.”

Planning to move house

Sometimes the best option is to move to a different house, or to live somewhere else.

There are good suggestions in the other Moving Assistance Tips. These are the main points people said are important:

- Remember that moving house can be very emotional. It is ok to feel upset, especially when it feels like another loss in your life. And it is ok to feel upset about moving away from one house and pleased about moving to a new one at the same time.

- If there is more than one person involved, go at the pace that is right for both of you.
- Think about where you live as well as the type of house. If possible, you want to be able to keep in touch with friends and activities that you enjoy and keep you well.
- Ask if you will still be able to get support from services that work well for you if you move. For example, can you still have the same GP or home support team?
- Also ask about the other supports and activities that are in the area you might move to.
- Don't rush clearing out possessions if you are moving to a smaller house or moving in with family. You can put things in boxes and clear them out when you are ready.

If you are in a rented house, especially from a Housing Association or the Council, it is a good idea to talk to them about this early on. They may be able to suggest more options.

If you own your home you can still contact Falkirk Council for housing advice by contacting the local housing office.

Around the time you come home – the first few days (and planning for it)

Planning for the first few days

If you have been hurt or unwell, there may be practical things at home that will be difficult for you.

- Think about what you do each day – getting out of bed right through to going to bed at night. Is there anything where you feel you need some extra help for the first day or so?
- Think about what – or who – can help you with that.
- If you are not sure, ask the staff at the hospital. They may have suggestions on ways to make it easier.

Think about just the first few days. Often it all becomes easier after that.

These tips are also useful if you have gone to stay with someone else for a while after getting out of hospital, and you are now going back to your own house.

Remember that it is ok to feel anxious when you are going back home. Give yourself enough time and you will get more confident.

You and the people around you

Tell people that you are home – family, neighbours and friends. That way, they will be able to help you manage.

Tell people about the support you need.

It can be easier to spread tasks between several people, if they each offer to help. For example, you can ask someone with a car to pick up a prescription and another person to make the tea.

Be realistic about what each person can do.

- Don't let someone say they will help if you all know that they will not manage this, or not this much, however good their intentions.
- If you came home from hospital before, everyone might be assuming that the same arrangements will work this time. But it is best to check this for your family and friends, as their circumstances could have changed.
- Check out the timescales. Someone may be able to stay over or do lots of errands for the first few days but then has to get back to work, for example.

- Be clear about what you and the people around you can do when you are talking to staff at the hospital or in other teams.
- Everyone needs to remember that if someone is not able to help in some ways it does not mean that they do not care about the person who was in hospital.

Decide what you want to do about getting pets back.

- It might be easier for both you and your pet to wait a few days, until you are more confident and feeling up to coping with a pet who has missed you and now wants more attention.
- It is ok to ask friends to carry on helping after your pet is home with you. Examples are taking a dog for a walk, bending down to put out food and changing cat litter.

Some people find it helps to have someone with them the first time they do something that feels like a challenge. For example, you can ask a friend to just be in the house the first few times you have a shower or bath if you are worried about slipping.

Some people find it helps to have someone to stay for first few days. Or sometimes that is more about reassuring the other person if they are worried about you.

It can also help when someone else does the cooking for the first few days.

Think about getting out and about. You may want to have someone with you the first few times you go out, or get on a bus, or are driving the car.

Your house

Ask someone to go in before you get back to heat the house. If that is not possible, try to get one room warm and comfortable as quickly as you can when you get back home.

Even if it is summer, it is a good idea to get hot water.

Check that your home is safe for you now, such as lighting and trip hazards. There may be things that cause problems just now if you are less steady or find it awkward to do some things, even though they will be ok in the longer-term.

Ask for an OT (Occupational Therapy) assessment if you were not offered one before

and you think it would be helpful. An Occupational Therapist can give good advice on equipment and other ways to let you manage better at home.

Your support

The team at the hospital will have contacted services that provide care at home and supports such as day care. If you want to be sure about this, it is ok to ask the staff there when they contacted the community service and what they have arranged about the support starting.

Most people get help from the community nursing services if they need help with dressings or medications. You should be told what is happening, but it is ok to ask (again) and ask the person to write it down if you are not sure you remember it or want to be certain you know what has been arranged.

“Make sure you are ok for the most important aspects of daily life: being warm, having food and something to drink, and knowing that you are safe.”

“Think about who will help you make a cup of tea and get food in for the first day or two.”

“Remember that it is normal to feel less confident, especially if you had a fall or became unwell when you were on your own. That will have been frightening. It is natural to feel anxious about going back to where it happened.”

“Think about what will help you feel more confident, such as having an alarm in case you fall, or knowing someone is coming in each day.”

“Talk about anything that worries you. That makes it easier to plan out what will prevent it happening.”

“I tripped and broke my wrist. The first few days back home were awful. I felt I couldn’t manage to do anything myself. Then we worked it out – a mix of my daughter helping out and some wee gadgets that let me do things with just one hand.”

“Get someone at the hospital to write down all the arrangements. My sister went to the hospital to bring Mum home. But between Mum being so relieved to be getting home and my sister worrying about the car park, neither of them really listened to what the nurse told them. When they told me and my brother we got even more muddled. I ended up spending ages on the phone trying to find the right person at the hospital to check what we were supposed to be doing.”

“Get a wall chart if you have several people involved in helping the person once they are home. And think about having a backup arrangement, just in case. My brother kept offering to do lots of things, but then his shifts were changed and he couldn’t do it. It was an effort to convince him that it was better for him to help with things round the house that could wait a few days.”

Once you are home and settled

You and the people around you

You might feel a bit low around this time. The relief of getting home has passed and you are now realising that you are still poorly and not (yet) as well as you were before.

Remember it may take time to build up to your routine, or to find a new routine.

Your house

You might find that you need some new furniture, such as a chair that is higher and easier to get out of, or some kitchen equipment.

You can look again at arrangements that you needed when you came home from hospital and decide if you still need them.

You may find that there are other, bigger changes that will let you continue to be as independent and safe as possible, and that you want to make these now.

You may find that you need the heating on more if you are home more or are not moving about as much as before. If you are worried about the costs of heating you can talk to the CAB.

Your support

If you are getting support from the Reablement Team, this usually lasts for up to 6 weeks. If you are going to need any of the care beyond this, they will talk to you and your GP about how this will happen.

Remember that you can always go back to your GP or to the social work team if your circumstances change and you find you need a bit more support again.

Talk to family and friends who helped when you got home at first and ask what they can do now, or for longer.

- Expect that people will be able to do less over time, as they have other commitments.
- Take account of the costs, such as when they are travelling a distance or buying items for you. Have a conversation about this and work out what is fair.

Think about what you will do when any family or other people who have been spending time with you for the first week or so have gone away. Suggestions from the people who helped with this booklet include:

- Make a conscious plan to move from them doing something for you, to doing it together, and then you doing it for them.
- Give your house and your day-to-day living a 'MOT check', so you both know that you will be ok.
- Remember that you have still contact by phone and talking to each other on the computer, even if the person is not physically there so much.

"About a month after I came home I got my daughter to walk round the house with me. We went round every room and made a list of what worked for me now and what I wanted to change."

"Before I was unwell I had a busy social life. After I was home from hospital I was still pretty tired and walking was still difficult. People were coming to the house, which was good of them, but I wanted out. So I asked someone to give me a lift up to the coffee group at the church. I go there each week now. It's part of my new routine."

Contacts and more information

Falkirk Council Housing Services

01324 501 976

There is useful information on their website: <http://www.falkirk.gov.uk01/services/homes-property/council-housing/>

Outside the Box

Unit 10, 150 Brand St, Glasgow G51 1DH

0141 419 0451

admin@otbds.org

www.otbds.org

There is a directory with more details on useful services for people living in Falkirk. We have copies of the other Moving Assistance Tips.

These are useful contacts if you have questions about support you will need when you get home:

Falkirk and Clackmannanshire Carers Centre

Falkirk: 01324 611 510

Clackmannanshire: 01259 226839

www.centralcarers.org

Self Directed Support Forth Valley

01324 508 794

Citizens Advice Bureaux

General advice line: 0808 800 9060

Falkirk: 01324 626 070

They also do outreach sessions at Forth Valley Hospital

Grangemouth: 01324 483 467

Denny and Dunnipace: 01324 823 118



Make It
Happen Falkirk
District Forum



Falkirk Council