

Reference Number: UHB 372 Version Number: 1	Date of Next Review: 6 TH Dec 2020 Previous Trust/LHB Reference Number: N/A
Discharge from Hospital Policy	
Policy Statement <p>To ensure the Health Board delivers its aims, objectives, responsibilities and legal requirements transparently and consistently, we will work in tandem with Social Care colleagues, and take all reasonable and practicable steps to provide individuals with a mutually agreed safe, effective and timely discharge based on their individually assessed needs.</p>	
Policy Commitment <p>The Health Board is committed to working with patients, their families and partner organisation to support patient's safe and timely discharge from hospital.</p> <p>To ensure this commitment is met the Health Board will ensure that these core principles are implemented</p> <ul style="list-style-type: none"> • Patients are involved • Patients are informed • Discharges are safe • Discharges are timely • Discharges are coordinated 	
Supporting Procedures and Written Control Documents <p>This Policy and the supporting legislations describe the following with regard to Hospital discharge.</p> <ul style="list-style-type: none"> • Social Services and Wellbeing (Wales) Act 2014 • Mental Capacity Act 2005 • Mental Health Act 1983 • Mental Health (Wales) Measure 2010 • Deprivation of Liberty Safeguards 2009 <p>Other supporting documents are:</p>	

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Approved By: Quality, Safety and Experience Committee		

- All Wales Framework for Continuing NHS Funded Care
- Discharge from hospital procedure and supporting multi agency choice of accommodation protocol
- Clinical Workstation: Simple /Supported/Complex Matrix
- Standard Operating Procedure for Integrated discharge Service
- Procedure for Requesting Non-Standard Equipment funded by Continuing Healthcare Funding
- Discharge Planning checklist
- Pharmacy Medication for Discharge

Scope

This policy applies to all staff working for Cardiff and Vale University Health Board in all locations including those with honorary contracts.

Equality and health impact Assessment

An Equality and Health Impact Assessment (EHIA) has been completed and found there to be a positive impact. Key actions have been identified and incorporated within this policy/supporting procedures.

Policy Approved by

Quality, Safety and Experience Committee

Group with authority to approve procedures written to explain how this policy will be implemented

Quality, Safety and Experience Committee

Accountable Executive or Clinical Board Director

Chief Operating Officer

Disclaimer

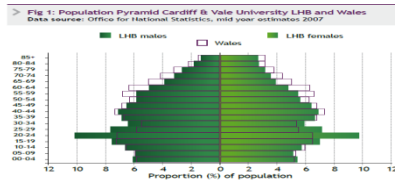
If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the [Governance Directorate](#).

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Summary of reviews/amendments			
Version Number	Date Review Approved	Date Published	Summary of Amendments
1	06/12/17	12/12/17	Version 1 New policy
2			

**Equality & Health Impact Assessment for
Discharge from Hospital Policy**

1.	For service change, provide the title of the Project Outline Document or Business Case and Reference Number	Not applicable
2.	Name of Clinical Board / Corporate Directorate and title of lead member of staff, including contact details	Corporate Operations Team Lead Contact Head of Integrated Care Judith.A.Hill@wales.nhs.uk
3.	Objectives of strategy/ policy	<p>To identify the key principles of discharge understand the links with other policies and how they impact upon the discharge process</p> <p>To provide a standard framework for staff to work within when discharging patients from hospital</p> <p>To clarify roles and responsibilities of key staff associated with discharge Promote a coordinated multidisciplinary team approach to discharge and care planning</p> <p>To promote a positive patient experience by ensuring that patients receive the right care at the right time in the right place</p> <p>Support good communication between clinical teams across the health community, patients and their families/carers</p>

		<p>Promote early engagement with the patient's GP; locality/neighbourhood team/case manager to ensure that the discharge plan is implemented and there is a safe and timely co-ordinated discharge.</p> <p>To promote IM&T communications i.e. e-discharge and e-bed management through the timely recording of inpatient admission and discharge record keeping on the clinical information systems</p>
<p>4.</p>	<p>Evidence and background information considered. For example</p> <ul style="list-style-type: none"> • population data • staff and service users data, as applicable • needs assessment • engagement and involvement findings • research • good practice guidelines • participant knowledge • list of stakeholders and how stakeholders have engaged in the development stages • comments from those involved in the designing and development stages <p>Population pyramids are available from Public Health Wales Observatory¹ and the</p>	<p>Cardiff & Vale University Local Health Board (LHB) area is the smallest and most densely populated LHB area in Wales, primarily due to Wales' capital city: Cardiff. 72.1 and 27.9 percent of the LHB area population live within Cardiff and the more rural Vale of Glamorgan respectively</p>  <p>The UHB's usual arrangement with regard to consultation was followed (ie. 28 days on the intranet). All comments were considered and policy altered accordingly .Colleagues within Cardiff & Vale LA Social Services made extensive comments to numerous draft versions of policy.</p> <p>A part of good practice, other policies from different organisations were considered.</p>

¹ <http://nww2.nphs.wales.nhs.uk:8080/PubHObservatoryProjDocs.nsf>

	UHB's 'Shaping Our Future Wellbeing' Strategy provides an overview of health need ² .	<ul style="list-style-type: none"> • Stakeholders were not engaged in the EHIA and/or policy development • Social Services and Wellbeing (Wales) Act 2014 • Mental Capacity Act 2005 • Mental Health Act 1983 • Mental Health (Wales) Measure 2010 • All Wales Framework for Continuing NHS Funded Care. • Encourage Prudent Healthcare
5.	Who will be affected by the strategy/ policy/ plan/ procedure/ service	<p>The policy applies to all UHB staff involved at any stage in the process of safe, effective discharge including those who hold honorary contracts.</p> <p>There will be an impact on patients their carers as well as local authorities and partner agencies where we are discharging to their care</p>

6. EQIA / How will the strategy, policy, plan, procedure and/or service impact on people?

Questions in this section relate to the impact on people on the basis of their 'protected characteristics'. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate

² <http://www.cardiffandvaleuhb.wales.nhs.uk/the-challenges-we-face>

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>6.1 Age For most purposes, the main categories are:</p> <ul style="list-style-type: none"> • under 18; • between 18 and 65; and • over 65 	<p>No documented evidence found from the assessment review of the information available on the date the search was performed to suggest that there are any statements, condition, rules or requirements which could potentially exclude or where applied cause an adverse impact against any group of individuals in respect of age</p> <p>Suggest positive impact to have policy that provides a standard framework for discharge planning across UHB</p>	N/A	Delayed Transfers of Care Operational Group and In Hospital working stream
<p>6.2 Persons with a disability as defined in the Equality Act 2010 Those with physical</p>	The UHB is aware from its demographic information that it employs staff who have disabilities as defined within the Act. As such, the Policy	N/A	Delayed Transfers of Care Operational Group and In Hospital working stream

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
<p>impairments, learning disability, sensory loss or impairment, mental health conditions, long-term medical conditions such as diabetes</p>	<p>has been made accessible to staff in both electronic and paper copy. patients discharged from hospital may have disabilities and their individual needs will be considered as part of the same discharge planning process within the framework of the policy</p>		
<p>6.3 People of different genders: Consider men, women, people undergoing gender reassignment</p> <p>NB Gender-reassignment is anyone who proposes to, starts, is going through or who has completed a process to change his or her gender with or without going</p>	<p>There appears not to be any impact on staff regarding gender. No documented evidence found from the assessment review of the information available on the date the search was performed to suggest that there are any statements, condition, rules or requirements which could potentially exclude or where</p>	<p>N/A</p>	<p>Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group and In Hospital working stream</p>

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
through any medical procedures. Sometimes referred to as Trans or Transgender	applied cause an adverse impact against any group of individuals in respect of gender. patients discharged from hospital will have their individual needs considered as part of the same discharge planning process within the framework of the policy, irrespective of their gender		
6.4 People who are married or who have a civil partner.	There appears not to be any impact. No documented evidence found from the assessment review of the information available on the date the search was performed to suggest that there are any statements, condition, rules or requirements which could potentially exclude or where applied cause an adverse impact against any group of	N/A	

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	individuals in respect of sexual orientation. patients discharged from hospital will have their individual needs considered as part of the same discharge planning process within the framework of the policy, irrespective of whether married or civil partners		
6.5 Women who are expecting a baby, who are on a break from work after having a baby, or who are breastfeeding. They are protected for 26 weeks after having a baby whether or not they are on maternity leave.	There appears not to be any impact. patients discharged from hospital will have their individual needs considered as part of the same discharge planning process within the framework of the policy,		Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group and In Hospital working stream
6.6 People of a different race, nationality, colour, culture or ethnic origin including non-English speakers,	There appears not to be any impact regarding race, nationality, colour, culture or ethnic origin. No documented evidence found from the	Whilst there doesn't appear to be any impact, if a member of staff was known to have difficulties	Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group and In

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
gypsies/travellers, migrant workers	assessment review of the information available on the date the search was performed to suggest that there are any statements, condition, rules or requirements which could potentially exclude or where applied cause an adverse impact against any group of individuals in respect of race patients discharged from hospital will have their individual needs considered as part of the same discharge planning process within the framework of the policy,	with the written word, good management would dictate that alternative arrangements be made, such as individual meetings. Members of the public would be supported by staff or family members as appropriate	Hospital working stream
6.7 People with a religion or belief or with no religion or belief. The term 'religion' includes a religious or philosophical belief	It is unlikely to be any impact on staff regarding their religion. There is documented evidence in relation to religion	Staff are able to raise any issues with their line manager/Human Resources.	Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group and In Hospital working stream

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	patients discharged from hospital will have their individual needs considered as part of the same discharge planning process within the framework of the policy,		
6.8 People who are attracted to other people of: <ul style="list-style-type: none"> • the opposite sex (heterosexual); • the same sex (lesbian or gay); • both sexes (bisexual) 	There appears not to be any impact on staff or patients. patients discharged from hospital will have their individual needs considered as part of the same discharge planning process within the framework of the policy,		
6.9 People who communicate using the Welsh language in terms of correspondence, information leaflets, or service plans and design	Bilingually patient information leaflets are available for patients. This is in line with our current Welsh Language Scheme and the future Welsh Language Standards. The	The policy prompts staff to ask patients which language the patient/service users would like to communicate in, either English or Welsh, in	Policy put out for consultation within the organisation and ratified by Delayed Transfer of care group and In Hospital working stream Delayed Transfers of Care Operational

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
Well-being Goal – A Wales of vibrant culture and thriving Welsh language	<p>leaflets are available in one the leaflet should be bilingual in one single document English on one side and Welsh on the other side.</p> <p>The aim of the ‘active offer’ is that staff should ask for the language choice (of either Welsh or English) of the patient. The language choice should then be integrated into the patient’s treatment. In other words the patient could request their treatment be in Welsh. If we are unable to provide a fully Welsh language service for</p>	line with the ‘Active Offer’ requirements of the Welsh Governments’ More than Just Words Strategy appropriate	Group
6.10 People according to their income related group: Consider people on low	No impact in relation to this policy		Policy put out for consultation within the organisation and

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
income, economically inactive, unemployed/workless, people who are unable to work due to ill-health			ratified by Delayed Transfers of Care Operational Group and In Hospital working stream
6.11 People according to where they live: Consider people living in areas known to exhibit poor economic and/or health indicators, people unable to access services and facilities	No impact in relation to this policy Policy is relevant to Cardiff and Vale residents but is also applied to residents from other areas who are currently in UHB beds		Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group and In Hospital working stream
6.12 Consider any other groups and risk factors relevant to this strategy, policy, plan, procedure and/or service	People who speak other languages other than Welsh or English will be impacted positively as the policy refers to issues of language accessibility. There are no	There have been new statements regarding language accessibility within the policy	Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group and In Hospital working stream

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate. Make reference to where the mitigation is included in the document, as appropriate
	other groups including Carers or risk factors to take into account with regard to this Policy.		

7. HIA / How will the strategy, policy, plan, procedure and/or service impact on the health and well-being of our population and help address inequalities in health?

Questions in this section relate to the impact on the overall health of individual people and on the impact on our population. Specific alignment with the 7 goals of the Well-being of Future Generations (Wales) Act 2015 is included against the relevant sections.

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
7.1 People being able to access the service offered: Consider access for those living in areas of deprivation and/or those experiencing health	No impact in relation to this policy		Policy put out for consultation within the organisation and ratified by Delayed Transfers of Care Operational Group

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
inequalities Well-being Goal - A more equal Wales			
7.2 People being able to improve /maintain healthy lifestyles: Consider the impact on healthy lifestyles, including healthy eating, being active, no smoking /smoking cessation, reducing the harm caused by alcohol and /or non-prescribed drugs plus access to services that support disease prevention (eg immunisation and vaccination, falls prevention). Also consider impact on access to supportive services including smoking cessation services, weight management services etc Well-being Goal – A healthier Wales	No impact in relation to this policy		
7.3 People in terms of their income and employment status: Consider the impact on the availability and accessibility of work, paid/ unpaid employment,	No impact in relation to this policy		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
wage levels, job security, working conditions Well-being Goal – A prosperous Wales			
7.4 People in terms of their use of the physical environment: Consider the impact on the availability and accessibility of transport, healthy food, leisure activities, green spaces; of the design of the built environment on the physical and mental health of patients, staff and visitors; on air quality, exposure to pollutants; safety of neighbourhoods, exposure to crime; road safety and preventing injuries/accidents; quality and safety of play areas and open spaces Well-being Goal – A resilient Wales	For this policy, there will be no impact.		
7.5 People in terms of social and community influences on their health: Consider the impact on family organisation and roles; social support and social networks; neighbourliness and sense of belonging; social	For some individuals there may be positive impact on socialisation as a result of needs based assessment		

How will the strategy, policy, plan, procedure and/or service impact on:-	Potential positive and/or negative impacts and any particular groups affected	Recommendations for improvement/ mitigation	Action taken by Clinical Board / Corporate Directorate Make reference to where the mitigation is included in the document, as appropriate
<p>isolation; peer pressure; community identity; cultural and spiritual ethos</p> <p>Well-being Goal – A Wales of cohesive communities</p>			
<p>7.6 People in terms of macro-economic, environmental and sustainability factors: Consider the impact of government policies; gross domestic product; economic development; biological diversity; climate</p> <p>Well-being Goal – A globally responsible Wales</p>	<p>No impact in relation to this policy</p>		

Please answer question 8.1 following the completion of the EHIA and complete the action plan

<p>8.1 Please summarise the potential positive and/or negative impacts of the strategy, policy, plan or service</p>	<p>On reviewing the previous policy and writing the latest version, improvements have been made in people who communicate using the Welsh language, people with a religion or belief or with no religion or belief. Overall, there appears to be very limited impact on the protected characteristics and health inequalities as a result of this policy. All discharges should be planned according to each person's individual circumstances</p>
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Action Plan for Mitigation / Improvement and Implementation

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
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	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.2 What are the key actions identified as a result of completing the EHIA?</p>	<p>On reviewing the previous policy and writing the latest version, improvements have been made in people who communicate using the Welsh language, people with a religion or belief or with no religion or belief. Overall, there appears to be very limited impact on the protected characteristics and health inequalities as a result of this policy.</p>		1 month	Action in accordance with UHB Employment Policies and Procedures.
<p>8.3 Is a more comprehensive Equalities Impact Assessment or Health Impact Assessment required?</p> <p>This means thinking about relevance and proportionality to the Equality Act and asking: is the impact significant enough that a more formal and full consultation is required?</p>	<p>As there has been potentially very limited impact identified, is unnecessary to undertake a more detailed assessment.</p>			

	Action	Lead	Timescale	Action taken by Clinical Board / Corporate Directorate
<p>8.4 What are the next steps?</p> <p>Some suggestions:-</p> <ul style="list-style-type: none"> • Decide whether the strategy, policy, plan, procedure and/or service proposal: <ul style="list-style-type: none"> ○ continues unchanged as there are no significant negative impacts ○ adjusts to account for the negative impacts ○ continues despite potential for adverse impact or missed opportunities to advance equality (set out the justifications for doing so) ○ stops. • Have your strategy, policy, plan, procedure and/or service proposal approved • Publish your report of this impact assessment • Monitor and review 	<p>On reviewing this policy minor positive changes have been made. The EHIA has been consulted.</p> <p>It has been approved by the and will continue to be reviewed every 6 months as part of the groups Terms of Reference. When this policy is reviewed, this EHIA will form part of that consultation exercise. This EHIA will be reviewed three years after approval unless changes to terms and conditions, legislation or best practice determine that an earlier review is required. The UHB standard is that all policies are reviewed within 3 years (1 year if a statutory requirement).</p>			