



# Hip fracture: leaving hospital

## Planning for discharge

The hospital team will produce a *discharge plan* based on an assessment of the person you care for and how much support you are able or willing to provide as their carer. The plan will say when it's safe to discharge them, *who* will be involved in the next stages of their care and rehabilitation, and *what* measures need to be put in place to ensure effective recovery at home.

The discharge plan may include arrangements to provide equipment or home adaptations such as grab rails in the bathroom or a raised toilet seat. As their carer, it's important that you're involved in the discharge plan and understand what it means.

You should be invited to a planning meeting to discuss future arrangements for their care or rehabilitation at home. They will also arrange for any aids and equipment, such as equipment to help mobility and safety at home.

In understanding your loved one's circumstances, ward staff will take into account any care you are able or willing to provide. For example, some people are happy to help with cooking, cleaning and shopping but feel uncomfortable providing personal care such as washing, bathing and taking someone to the toilet. You may find it easier to discuss this without your loved one being present.

The hospital should make sure your loved one has enough medication for the first week so that it does not run out before their GP practice can prescribe more. If you are responsible for giving them their medications, and they normally take several different items, the pharmacist might be able to put them into a pre-packed container called a 'dosette' box. Many pharmacies will also deliver medications to the house on request.

Be sure to keep a written copy of the discharge plan for reference, along with the contact details of a key member of the hospital care team. If anything is unclear, speak to a member of staff or an adviser from the hospital's [Patient Advice and Liaison Service \(PALS\)](#).

## Bladder problems

Getting to the toilet can be very difficult after a broken hip. Even after surgery and rehabilitation, some people will still have problems with bladder control. Some patients will have had problems before they were admitted to hospital such as needing the toilet suddenly or more frequently, difficulty passing urine or leaking urine.

People are often embarrassed to talk about such things, but it is important to do so before the person you care for goes home. Bladder problems will affect the care they need once they're back at home, so it's important to discuss continence aids while they're still in hospital if possible.

If their bladder problems are likely to continue after discharge, ask staff about a follow-up appointment or a continence assessment by district nurses at home.

## How you can help

As a carer, you play a key role in ensuring that the transition from hospital to home runs smoothly and safely. For example, you could:

- Arrange appropriate transport for the journey home.
- Make sure the fridge and food cupboards are well stocked.
- Consider setting up a regular online supermarket delivery slot so that you be there on delivery days.
- Make sure the central heating is working and at the right temperature for the time of year.
- Make neighbours aware that the person you care for is returning home. You may want to give them your contact details in case any problems arise when you are not there.
- If the person you care for has a dog, arrange for someone to take them for a walk while they build up their strength.
- Make sure the person you care for has enough medication and that they or you know how and when to take it.
- Make sure the person you care for knows how to use any adaptations and equipment that have been provided for them.
- If you believe they need additional adaptations or equipment, speak to the rehabilitation team.
- Arrange to be with the person you care for when they receive their first visit from the rehabilitation team.

## A carer's assessment

When you provide unpaid care to a partner, relative or friend who can't get by without support, you're entitled to a carer's assessment. This will give you the opportunity to discuss what you are able and willing to do as a carer and what would make life easier for you such as:

- Someone to take over your caring role so you can have a break
- Gym membership, exercise classes and pamper sessions
- Help with taxi fares if you don't drive
- Help with gardening and housework
- Training on how to lift safely
- Attending local carers' support groups
- Advice about benefits

A carer's assessment is free and anyone over 18 can ask for one. To arrange for a carer's assessment, contact [adult social services at your local council](#). NB. If the person you care for lives in a different local authority area from you, your carer's assessment may be carried their local authority rather than your own.

## **The follow-up phone call or letter**

Today, surgery for hip fracture is so successful that, for most patients, a follow-up appointment at an outpatient clinic is no longer necessary.

However, the hospital may contact the person you care for (or contact you, if you have Health and Welfare Power of Attorney) by phone or letter to check on their progress 3 – 4 months after they return home. They will be particularly keen to make sure they've been continuing to take any bone-strengthening treatment they've been prescribed.

Even if you don't have a Health and Welfare Power of Attorney, it's a good idea to make sure you're with the person you care for when they take the call or reply to the letter (with their permission, of course).