# Phase 2 – Exploring older people’s lived experience of hospital

# Participant 1:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

Recover well from the first operation, but about less that a week I started to feel ill and I rang the ward they reassured me that it haven’t had anything to do with the operation, partly I had a very bad headache and I felt terrible. That was on Friday, on Monday I called MacMillan nurses because I still feeling bad and I said I can’t take a deep breathe so they immediately though it was thrombosis but it wasn’t it was cramped ..I don’t know.. when I was flat it was ok. Anyway they took me in and checked me, it wasn’t but I was obviously ill. It took them some time to find out that I had an infection, the wound I supposed .. something to do.. they said there was an abscess so I was given antibiotics and I stayed in until a doctor came in for a round and send everybody home, whether they wanted to go or not.

Total laparoscopic hysterectomy 21/8, stayed for 3 days

Infection 5/9, stayed for 4 days

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better).**

It’s a difficult questions because everyone were so kind, the staff super… but I don’t think they knew what to do with me. I was obviously ill but they didn’t really know what was wrong and I seem to be having to go for various tests to try and find what was wrong and I was just left basically to just sleep

**Can you please tell me in a few words about the discharge process?**

I don’t know whether they were trying to empty the wards for the weekend or what but this doctor, I am assuming that he was a doctor, came in with other people… and he just went round and started to say you can go home, you can go home… and we were basically all sent home and I could hardly walk emm… and that’s when the thrombosis was developing… after that emm in between but he just sent us home so everybody went home.

**Prompt:**

* **Who was involved in the decision of your discharge?**

It was the only one (the doctor referred above) we saw and I don’t know who he was I didn’t see him again… and two other people including me, I was one of them, were back in in a few days. Two of us were back in. (chuckles)

* **Would you prefer that something could have been done differently?**

Probably because you didn’t have the chance to say well… I don’t think I am quite ready to go home because well you said you can go home and you think well I can go home mmm… ok you struggle but you can go home. I don’t know… and the think is when you are in hospital you might want to go home but in hospital you feel more secure if you are not well… and you don’t want to go home to the unknown, so I didn’t know whether I was ok to go home or not, but I was obviously wasn’t.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

Not very good, bed most of the time hardly moving, couldn’t move, very unconfutable got bed sores, got very weaken wrists trying to move, because I couldn’t move properly and then I noticed my leg was getting swollen and fatter and then I rang again the Macmillan nurses because they immediately help you they were very good and they said go to A&E and they send me a package of chocolate.

Husband fed me, didn’t get much sleep because I was so sore my bottom got very sore and slight down the bed, not very good. I managed to washed managed to go to the toilet

 **Prompt:**

* **Did you receive any help from family or friends?**

Husband

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

No

**Can you please tell me about your hospital readmission experience?**

I went to A&E, I was there for some time and they were debating whether it was Lymphoma or thrombosis. I had many procedures that time, because the infection was still there. I had drains put in, more antibiotics. They were attentive actually, the third time. They decided that they wanted to do another operation and clean it out. I had a kind of umbrella inserted in my vein and I had some smaller bags in. It got a bit hard with the bags because they needed to be tight and I couldn’t move and in the night they were getting heavy because of the fluid. Eventually after the operation the fluid was draining away clear and they took one away and then the other and I went home.

**Prompt:**

* **What were the differences from the first admission?**

 I left a lot out because many happened, but they were very attentive that time because obviously things haven’t worked.

* **What do you think were the main factors that led you to be readmitted?**

Well, I don’t know... the factor that I get the thrombosis… infection haven’t gone… I think I was send home too soon, the staff, nurses, doctors and surgeon were absolutely super. The surgeon was toying with what to do and then he said I will do the operation. I wasn’t very happy with that and they went through the same wholes so I was already heal up more or less and they did it again, I wasn’t too happy with it.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

I don’t think anything could really prevent it, because I couldn’t move… because when my leg swollen up it was like I drugging a tree all around, it was swollen all the way down and it was heavy and whether I was home or hospital you still have the same problem. The fact that I was so ill and I didn’t want to do anything brought the thrombosis, probably my fault by not drugging out myself and walking out of bed I supposed. I can’t think anything could help but probably if a home visit or a district nurse would come she might identified it earlier.

**What was the most significant element from your whole experience of hospital readmission and why?**

I think the care was sogood, once they knew what was up with me. The only thing I will say is sometimes, like with the bedsores, they make a big thing of it but then they don’t always follow through, you must have this and that, some stuff will remember and some other simply forgotten, sometimes you need to remind the staff. I think I should have some antibiotics and they forgotten to give them to me, but I think it happened once. For the bedsores they came and photograph it and two weeks later a staff member asked me ‘you still have something put on your bedsores’ , no I haven’t seen anybody, there wasn’t always a continuity of care.

Some of the staff and some of the doctors were so sweet especially when they came to check in me. I am really got praised how caring they were all there wasn’t anybody who wasn’t.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

My second discharge I felt that I wasn’t included in the decision. My third one was much better, they told me when the second drain is removed I will be able to go home, so I was told all the time, so when the second one was taken out I was able to go home the next day. But the next day the junior doctor and other junior doctors were all very nice all fine of course. When people say about the health service you think there are all cracking wood clubs, without foreigners who come and help out our national health service, I mean there are few British few Irish but so many polish nurses and from other countries too, and there all very sweet. So yeah, they came and they told me I can go home that day but the surgeon wanted to see me, and I waited all day for the surgeon to see me. They were asking me about follow ups with the doctor, to see the nurse basically to change the plasters and she was going to make an appointment but then things drug out so long that you get to the point that you are not sure if you are going home or not. But anyway my husband came and we had to walk down the corridor sat down by the fire end where there were some seats. I was bit low thinking if I am going home and then he came along and sat down with us and said ‘alright you can go home now’. Then I was waiting for my discharge notice and for some medications. I think we got home around six o’clock. The whole process didn’t seem too organised, you needed to wait for certain people to say you can go home.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

That’s a difficult question, I can go only by what I have experienced and from another lady who was really afraid to go home and nobody came to reassured her that she will be ok. I mean I have my husband so… some people have nobody, so they are going home to look after themselves and is quite scary if you don’t feel alright and I think in some cases to have someone come in and just say you can go home, you can go home is a bit taunty. So if some people can come and reassure you that you are ok to go home or explain what is happening or even to ask questions.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

Definitely, you need a little bit more than just send home, is not enough. In my first operation I knew that I will be home in 24h. They kept an extra day because I couldn’t wee. They make me drink so much water, I think that was a mistake because it made me feel ill and they catheterise me. That was expected and that was fine. You know that when you pass wind and wee you can go home, it’s all lay down for you. The other one there was nothing, nothing at all, I supposed they just look out the notes and they say you are fine to go. In a room of four, two weren’t happy and two waited to go anyway, the two of us were back in a few days. I have nothing that praise for the staff.

# Participant 2:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

I went into hospital in 18/12, where a tumour in my right top of my lung. All was successful, absolutely fine, no problems I was made aware of, and I came out on the 22/12… but obviously things then, transpire that there was still some air, that hadn’t allowed to drive into the receptacle.

I went to A&E in 26/12, which is Boxing Day and Southampton wanted me back because obviously I still in their remit, so I was driven to Southampton, register was there waiting for me, inserted the chest drain and started the suctioning. I left from there on the 29/12 late afternoon

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

I can’t fought anything they did. It was brilliant, They were all brilliant, and I couldn’t say that there is any room for improvement, because they looked me after so well

**Can you please tell me in a few words about the discharge process?**

A little bit more lengthy the first time, because they had to get everything sorted, second time was just question to make the paperwork because I didn’t had any medications to bring back with me … so it was pretty quick.

**Prompt:**

* **Who was involved in the decision of your discharge?**

Yes, I mean… I think was quite unfortunate really, I am mean emm there was circumstances that made me leave probably a little bit too early because I hadn’t stop *bubbling* for long enough but it was one of those things, and it was possibly the time of the year, I think there were mitigating circumstances for letting me go… but it was alright, it was one of those things and I sorted it. It wasn’t a walk in the park but it done the job

* **Would you prefer that something could have been done differently?**

I think another 24h could probably circumvented all of these but it’s all it is. It was nobody’s fault

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

Well, obviously when I arrived on Christmas, the day after was absolutely fine and then of course I started to suffer the effects of the air leak and so Christmas day was quite a struggle and Boxing day I was readmitted so… in-between I hadn’t had a lot of time to do much I was with family on Christmas … emm… but it wasn’t … no it was because I was starting to swell and then readmitted on Boxing day. So, I didn’t get back in any sort of routine or anything in those days really.

 **Prompt:**

* **Did you receive any help from family or friends?**

Well, family made a little bit of shopping for me. I managed to do 1-2 bits for me but obviously I wasn’t into doing all the things I was used to do because I couldn’t

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

No, I didn’t

**Can you please tell me about your hospital readmission experience?**

No, there were still brilliant

**Prompt:**

* **What were the differences from the first admission?**

Only the discharge process, we are fitting you with a flatter bag you can have your letter and we will give you some packages of pills and you are off to go. Which was absolutely fine because they done everything that they could and that came to knowing that they will not be any recurrence because I had the flatter bag. And I had a day to go back to obviously see if it could be removed and that was it, so I could start to go back to living although I would have a little baggage to carry I and I am still having the effects of surgery but I would start to do things by myself although the family still helps with sort of bathing and … because I couln’d bath or showering because of the dressings… and the District Nurse came a couple of times and changed the dressings… emm… I did the shopping and some of the heavy lifting and some of the housework for me, but once I had the flatter bag removed from the 8/1 I was up and running more

* **What do you think were the main factors that led you to be readmitted?**

I would say the timing for my first discharge.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

No, I think it was just a question of, you know, those factors and I think another 24h in-hospital at the time, which to be fair the doctor did suggests’, should have been, would have possibly made all the difference. So, it was just a question of timing

**What was the most significant element from your whole experience of hospital readmission and why?**

The whole experience as said to you it was brilliant. I mean obviously I wasn’t particular well but the care, the attention, the attitude of the staff I can’t fault it, I think they were absolutely phenomenal. They were brilliant, all of them.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

It’s difficult one to answer actually, because I think it’s case has to be taken on merit, whether they are on medications, whether that’s a factor, whether they have mental health issues. I am sure that various health services do work together but I don’t always think them jell. But haven’t ever been in this situation of wanting various elements to get together to look after me that’s quite difficult question for me to answer. I don’t know the answer for that one.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

At the end of the day there was no gap really, when all started to manifest I phoned to Southampton on Boxing day they said ‘ look, you can’t just come back here you need to be referred, so popped up in A&E and I will take it from there, which I did, the register was literally waiting for me and sorted it right away’. So the way of communication was brilliant but of course didn’t involved social services, it didn’t involve community nurses or GP’s, it was actually the doctor in A&E and the Doctor in Southampton and they were brilliant they decided what to do and how to do it.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

No I don’t think so. I just hoping the information you got today to help you do what you need to do. I think my readmission was pretty simple case, really it didn’t involve a lot, it was just of those things. I just hope that has given you some food for though.

# Participant 3:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

I went to the UHS because I broke my R hip after a fall…

Then I went for rehabilitation in RSH, I don’t remember how long I was there. I had a fall there and I broke my other hip and that apparently had a result of an infection.

I went back to UHS for a second operation and the infection for 20d.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

The ambulance crew was perfect, there was very little delay in A&E, X-ray was done very quickly and I was in a ward in what appear in no time at all. Very very quick

**Can you please tell me in a few words about the discharge process?**

**Prompt:**

* **Who was involved in the decision of your discharge?**

As I understand it, it was the specialist who was making the ward round, that I should be transferred into rehab. It might be physiotherapist too. They have not discuss it with me, I was told I was moving… and I thought it will help my younger brother with the parking… RSH is easier to park rather than the general

* **Would you prefer that something could have been done differently?**

I found everything worked very smoothly, very, it was like moving from one ward to another

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

My general care require did not change from the general to rehab, my habits didn’t change- I read a book every day and that took time away, I didn’t watch tv or listen to the radio. Reading a book a day was a challenge and I am still doing it. I found the staff very helpful and they didn’t like the fact that I tender to get out of bed when I shouldn’t and have falls when I shouldn’t…ha…but that’s just me being stubborn and independent, I have been independent for 3 years now, I have lost my wife 3 years now and I become more independent during that time and I don’t like relying on other people when I think I can do it on my own

 **Prompt:**

* **Did you receive any help from family or friends?**

My family and friends visited me and spend time with them

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

I was in a rehab centre, I was having regular physio sessions, I could manage most of my personal care, with dressing I found very difficult to put on trousers I tended to go for a gown rather pyjamas which make life easier for everyone

**Can you please tell me about your hospital readmission experience?**

I don’t really remember much, whether it was my infection or not. I didn’t really know anything about the infection until my younger brother told me about it

**Prompt:**

* **What were the differences from the first admission?**

Not really, the care I received was the same as the first time, everything was done on time and very quick.

* **What do you think were the main factors that led you to be readmitted?**

I would say the fall and the infection.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

I didn’t help by breaking the other hip did I… most of my falls were because of dizzy spells, I had one the day before my discharge, I was going to the toilet in the ward and I had a nurse with me and I was through the door and I said dizzy spell and she grabbed me and ask for help to get me back, so I would have them all the time through hospital, no warning. At the beginning I thought it was because I was standing up and I have low blood pressure but I was getting them lying down as well so I don’t know… they seem to be gone

**What was the most significant element from your whole experience of hospital readmission and why?**

Being back to the general again I had learned some bits and pieces of my exercises and also the staff who quite honestly you couldn’t pick between the two of them, they were both places great

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

Slightly bitter I had a hospital appointment last week, my younger brother organised the transport and they never turned up and they didn’t contact. Since then everything I *ding ding* and I am going again this week and I am promised that the transport will turn up. It wasn’t severe disappointment because it’s probably my pacemaker and I will get it sorted.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

Yes and no, the transport that brought me home turned up on time brilliantly driver and me supposed to be 2 man for getting me down the steps in the garden and he forgot to put the zf in the ambulance but it was here the same day so it wasn’t a big problem, I was so bloody cold in here I didn’t want to get out of bed anyway. The heating wasn’t working for all this time and when I got back it didn’t work.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

No, I wish you very well with your study and hope it gives you the answers you want. I am pleased that I was able to help.

# Participant 4:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

I was seen in November by a doctor about my knees. I had x-ray on both of them and the Dr said that I have osteoarthritis and asked me which knee I would like to do first.

I was admitted on 8/1 Tuesday and d/c on Saturday. A physio showed me how to get off bed how to use the stairs, send me home. Then I went to my surgery for physio they told me *I don’t need any*. Then I get a call from Andover physio *yes we got you booked in*, and by then it started weeping so I went back to the general because of the weeping knee. And I don’t know why, seems nobody know … it’s just under the surface.

I was there from 7/2 for 8 day. I had some tests, no physio and send home. Still weeping with a bandage on and I am still stiff but I had at least a physio therapist now.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

The care was fair. No, problem with that. Food could be hotter, it was cold. In the first hospital food was on trails without cover so until it reaches you it was cold. In the general, the food is contained in a big container so it comes hot.

**Can you please tell me in a few words about the discharge process?**

You can go home tomorrow, we will check you on the stairs, have you got transport, cheerio. Nobody saw me out .. it was just, that’s it off you go, two pair of crutches, one show horn and a gripper to help pick things up, and out the door you go, your own.

**Prompt:**

* **Who was involved in the decision of your discharge?**

I am assuming my Dr, just the nurses and physio said to me you are going home on Saturday. You were told that you will be in for a few days, so you already knew that much, but no it was just … *yes you are doing alright you can go home tomorrow.*

* **Would you prefer that something could have been done differently?**

It will be nice to been seen outside the door, to make sure I went down alright but other than that I supposed no because it as a Saturday you know people are busy

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

Personal hygiene I arranged with Red Cross for a bath board, because I need to climb in a bath which I found difficult having a shower but I managed it. Daily activities slow moving around the house. I have bought a trolley and I am keeping it, as it helps me move around with my food on it

 **Prompt:**

* **Did you receive any help from family or friends?**

My children I’ve got 2 boys living with me and a girl married, they have done all my books, I just sat at home and sorted the books because I am a distributer.

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

You are joking aren’t you… no. In fact I had to beg for physio, they told me I had to wait for a month until I see my Dr, so when I was readmitted I phoned Andover and pleased them not to cross me off their books, I still need help. So I ha physio in my admission but nothing between.

**Can you please tell me about your hospital readmission experience?**

It was completely a different hospital, my son took me in. They were expecting me in Trauma unit, they decided that I will be staying for the night. Next morning Dr came around and I still don’t remember his name, *yes we will keep you in*. That night I was transferred to surgical day unit and a few days later to another ward.

**Prompt:**

* **What were the differences from the first admission?**

The hospital was different, the food was much better and the care was the same.

* **What do you think were the main factors that led you to be readmitted?**

I supposed, not knowing why, a month after an operation you started weeping, the knee is red hot to the touch, the top of the wound has healed over the middle part had 3 spots weeping and nobody really said why … it’s just under the surface.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

I was send home with one dressing on the wound, which is fine, told to change it after a few days and made a mess of it, so I went to my surgery asking for the same dressing and believe it or not she put a piece of gauze along the wound then iodine gauze then a couple of coverings and top it off with waterproof covering, which the next day find me back to the hospital trying to get rip of it, because it was so tied. The nurse that was there said *why did she do that?* , I said because she wanted to prevent infection, so is a possibility that she did the opposite I don’t know.

**What was the most significant element from your whole experience of hospital readmission and why?**

The one thing that stayed was, *I see you moving you don’t need physio,* ok I am walking but I am not walking like this I am walking like that, that’s not how I should walking. I should have more encouragement to do the exercises that told you instead of left to do it on your own and not be checked upon. That’s the one thing that hurts.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

Somebody to check the dressing instead of being left to do it on your own in case is going green or red or whatever. Somebody to follow up on you, ok you’ve been in you had it off you go and absolutely nothing. The physio, I was release on the 12th and it took 2 weeks for the paperwork even though it’s electronic to go across we’ve got your referral. That should have been done instantaneously, so you didn’t have the break you have continuously care one-way or another. That I think is necessary instead of having to beg and be told you are not entitled, you don’t need it, and you are not getting it which is basically what I was told.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

Continuity of care or follow up

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

No complains for the care I received only just why it happened.

# Participant 5:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

In the early hours of 3/9/18, I got up to go to the bathroom and I had a blackout which was cause due to too much insulin, which resulted to lose too much weight about 15 pounds over 6 months. When I came too, I was lying on the floor with my right leg tug under my body and when I looked over my right shoulder I could see my foot bottom, I manage eventually to get back to my bed and I went back to sleep. When I woke up in the morning, normally I felt I had a nightmare. I didn’t have immediate pain or swelling that came about 3 weeks later.

I then went to hospital for x-rays and they told me I was luckily I had a bad sprain ankle. They told me the best cure for that, *live normally and walk on your ankle and it may be a bit painful but it would come right.* It was about 3 weeks later I had a phone call from my GP, who said to me *I have just review your x-ray and you have broken your foot.* This was very unwelcome news, and he told me to go to A&E as soon as possible. A friend of me took to A&E the next morning, it wasn’t busy yet. The Dr said from the x-rays that it was already heal and that I could not have a plaster cast but he gave me a big plaster boot and you can take off when you go for sleep or if it bothers you during the day you can take it off.

I managed to walk without the boot for a matter of 3 months, no much pain not a lot of swelling, but all of the sudden I did developed a lot of pain and I found I was walking on the side of my foot that really worried me.

I went back to general and they x-ray and the next thing knew they were admitting me to hospital to get the swelling down and to relieve me from any further pain. I was in hospital for 3 weeks. Because there wasn’t anything wrong with me and managing well, I have a good appetite no sickness and I was in to check my feet temperatures.

In three weeks I had 4 plasters, the first one had a metal in the bottom of in order to help me walk on it. The next I went home, and that night I developed tremendous pain in my ankle because the cast was rubbing on it, and actually was bleeding. Extremely painful, I could barely take one step at the time. I went back in, they replaced the plaster with a new one which had a window on it. In order to observe the sore. The nurse call for a Dr to come and have a look on the sore. After 20 min 2 Dr’s arrived and said we think you need to be admitted to hospital. I stayed for 3 weeks. I had a new plaster cast each week and they were checking my temperatures. Everything was getting better, the physios were happy and I was send home with a ZF. Now on reflection I think I should have stayed in hospital for 1-2 weeks because my Dr wasn’t happy with my feet temperatures and the swelling reduction. The swelling was coming back. I came back home rather disappointment because instead of getting closer to the operation date I am now seeing to getting further away.

This has been a very long road very difficult road, taking a lot of patience and meeting lots of different people. Initially I was dealing with 4different hospitals. So, I am hoping in the next 2 weeks I will receiving an operation date, only from then I could be looking for recovering, apparently I have developed a Charcot’s foot as a result of walking on it when I shouldn’t. I confirm that nobody told me not to walk on that foot. Thank you very much.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

The level of care I felt that it was very good considering we know our hospital s are short staffed and the available nurses have to spread their time, they work very hard. I found sleeping in hospital being extremely difficult because I live alone its very quiet. Also, they wake you up in the morning to take your blood pressure and as soon you get back to sleep they wake you up to take your blood sugar level. I think the degree of care is surprisingly good if one thinks the extent of NHS. The food was extremely good plenty of it possibly even too much. Also, communication was a bit difficult because of my hearing aids, as they need to be checked and I haven’t had the chance yet.

**Can you please tell me in a few words about the discharge process?**

The decision I am sure it was taken by looking on my record of blood pressure, age and blood sugar levels. I must say that I feel included, as I mentioned anybody in hospital that is well and not sick, you feel that the hospital isn’t the place for you and you are taking the bed of other people who are in need of it. I felt a little bit guilty about it. Thank you.

**Prompt:**

* **Who was involved in the decision of your discharge?**

That would have been the ward manager. Naturally when you are used to be a free soul and getting on with your life and being active and all of the sudden it’s cut short when you are offered the opportunity of being relieved from hospital life and to going home you begin to feel a bit like a drowning man clatching at a straw

* **Would you prefer that something could have been done differently?**

I was supposed to be d/c on Thursday but the transport that was meant to come at afternoon, it arrived at 9 o’clock at night, so I went into the bed which I was sitting in it all day and went home the next day.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

During my 3 weeks in hospital I only managed to have shower once and that was only because of the nurses’ hard press but I had a wash daily. When I managed to come home I had a shower as I have a wet room shower which has a stool in it. It was a very pleasant experience. I didn’t have any difficulty with moving or personal care.

 **Prompt:**

* **Did you receive any help from family or friends?**

My children visited me as much as they could in and out of hospital.

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

Yes, a carer is visiting me twice a day and every week I have outpatient appointment with my doctor.

**Can you please tell me about your hospital readmission experience?**

**Prompt:**

* **What were the differences from the first admission?**

The only difference was the ward that I was admitted, 1st one was in trauma ward and 2nd one was in a step down ward, which had calmer atmosphere and it was quieter. Thank you.

* **What do you think were the main factors that led you to be readmitted?**

I would say from the early begging of my story when they advised me to live normally and walk on it.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

I don’t think that it could be prevented as it was like a continuation of therapy. Thank you.

**What was the most significant element from your whole experience of hospital readmission and why?**

For my 2nd admission I was totally not prepare, I didn’t even had a toothbrush with me, because I didn’t realize until the Dr’s suggest it. They wanted someone to observe me during my recovery.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

The only thing that I can say, is about the transport service. They give you a 4 hour window and you never know what time they will show up. My experience wasn’t the best.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

I believe you cover all the aspects of readmission. Thank you very much, take care, god bless.

# Participant 6:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

I fell out of bed, I #ribs and a vertebrae at my back. I admitted into the hospital stay over a night and they send me home and the next day I went back in.

21/3-admitted, 22/3- d/c, 23/3-readmitted, 29/3-d/c

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

The care was very good. It could have been better but .. no yeah… the were busy… but they were very good.

**Can you please tell me in a few words about the discharge process?**

The first time we call a taxi, no transport because it was too long so, we call a taxi. The nurse push me at the reception and we got a taxi form there.

**Prompt:**

* **Who was involved in the decision of your discharge?**

My husband. I don’t know who it was who discharge me, I don’t have a clue. Nobody came to me to discuss this, they just say go home, that’s it. I haven’t been included in the process.

* **Would you prefer that something could have been done differently?**

Yes I would prefer that, I think they should send me home anyway but not only with paracetamol. That was not good at all, they send me home without any medication, nothing, just paracetamol.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

For the day I came home I couldn’t move, I couldn’t do anything, no food, no showering, no moving… and I couldn’t sleep.

 **Prompt:**

* **Did you receive any help from family or friends?**

My husband, he is pretty good

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

The first time I got d/c they didn’t arrange anything. For the second time, I have nurses and physios visiting me.

**Can you please tell me about your hospital readmission experience?**

Ah.. oh yeah, yeah, the ambulance, they put me in an ambulance took me in the A&E. waiting in the A&E for a while and then they took me into a ward. Later on, they transferred me into PAH and that was it.

**Prompt:**

* **What were the differences from the first admission?**

I think they were a bit quicker the second time. The staff was a bit more worried this time. I felt more involved this time.

* **What do you think were the main factors that led you to be readmitted?**

The pain really, I couldn’t breathe it was terrible.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

It could have been prevented really, I think so. But I could have more care home really. If I had some carers visiting me, more help and painkillers I think I could avoid the readmission.

**What was the most significant element from your whole experience of hospital readmission and why?**

I would say it was good, a general good impression form the whole experience.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

Mmm, I don’t know… I would say they are pretty organized.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

No, no I think there aren’t any issues. They are doing their best.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

 No questions. I wish you all the best.

# Participant 7:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

4/4-9/4: ORIF fibula, 2d home / 11/4-16/4: fall groin pain

It was pouring rain and I slipped on a manhole cover, obviously twisted my ankle, my friends took me to RSH and they x-ray it plaster it and they told me I needed an operation and they arranged a bed at the general. So, I was admitted at the trauma ward and then I was taken to another ward about 1 o’clock in the morning. The consultant came around the next morning they cut the plaster to see if there was any swelling. It went down so we operated it later that afternoon on Friday. I didn’t have a lot of experience using the frame and Tuesday morning they discharged me. I came at home at 21:00 o’clock. I spend the next day at home and I did have a fall, luckily my daughter was here and I took the frame and I stood up I didn’t fall down then I balanced turned to her to say goodbye to her and I felt down. They pick me up but I didn’t hurt myself. It frightened me and upset me. When I was at the ward I have never used one of this, they were watching me but they didn’t said that I could my leg down, so I am hopping with my leg straight. So, the next day in the morning I went to get up from the bed, my daughter stayed with me the first few nights, they didn’t want to live me alone. So, I put my good leg on the carpet moved this one of the bed and I pulled a muscle in my groin and I was in a lot of pain. I couldn’t get of the bed the pain was awful. My daughters rang the GP and he said ring the ward. From the ward they said it needs to be 24h to be readmitted, so we called 999 and I was readmitted. The paramedics came over and they examined me everywhere. As soon as they touched me in my groin she said we have to take you in. She also said you must have a care plan, don’t let them send you without a care plan. So, we went back to assessment cubicles then for an x-ray. While I was there a community nurse came to see me and she said I am arranging care for you. Then they took me to another ward for 24h and then I was moved again. The nurse came again and she told me that they are still trying to sort it out. When I went back to trauma ward the nurse in charge told me that there is care for me on Tuesday morning. After that they transferred me again to PAH on Saturday lunch time. In PAH they explained everything to me about the care I am receiving. The staffs were very professional they came to me and they said they are trying to arrange Monday night care for me to bridge the gap so I would be able to go home that day. As soon as they told me that they arrange everything I had to call my daughter to be at my home so we would be able to get in. I was expecting the transport after lunch but they didn’t shoed up until 20:10. The paramedic came up with a chair and she asked me if I would be able to walk from the wheelchair to the ambulance. Me and the nurse told her no because I am NWB. She apologies and she said I have to aboard the transport as I have a man on the wheelchair and I cannot take you. After that they booked a stretcher for next morning . I came home with care plan in place.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

That was fine, I mean is a very busy ward and they had a couple of elderly people with dementia and incontinence. I mean how many bed sheets were changed I couldn’t say how many times, it was a very busy ward. It was good I cannot fought them for that.

**Can you please tell me in a few words about the discharge process?**

The consultant came with the registrar and they told me we have seen your x-ray and is gone back really well, it was a nasty break and then he said is she mobile and I think it’s all he asked. I asked about the crutches and he said no frame.

**Prompt:**

* **Who was involved in the decision of your discharge?**

I didn’t feel involved, not at all. I said I’ve been to the bathroom 4 times, that was my mobility in hospital. I came back from the surgery at night time, the next day I didn’t get up. So, it was only Sunday and Monday that I started to be mobile and start to get use to this.

* **Would you prefer that something could have been done differently?**

Yes, I should have been show how to use the crutches, because it might be easier to move around with them rather frame. Not that I had any experience before with the frame, I would have thought they would try me with the EC or even got me up walking more with the frame rather than couple of days I did. The therapy team asked me where do I live, I told me I live in bungalow with a small room downstairs, I told them that frame would not fit in my bathroom door so they gave me a commode and a stool. I also told them I live alone and my 2 daughters live near me.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

My daughter was here, I couldn’t do it myself. If it wasn’t my daughter around I would be able to do anything. I would be able to dress or cook for myself or even use the commode. I have 96y.o and a 91 y.o neighbours so is not like I have a neighbour that can come and help.

 **Prompt:**

* **Did you receive any help from family or friends?**

Daughter

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

Not the first time.

**Can you please tell me about your hospital readmission experience?**

The first time me friends took me to RSH, the second time was entirely different. Obviously I went straight to the general. I didn’t wait a lot for a bed and the care was the same.

**Prompt:**

* **What were the differences from the first admission?**

The discharge process was much better, oh gosh, they told me everything. The first time was a shock for me the night before I couldn’t sleep very well, I was thinking how I am going to do this and that. It kept worried me all the time. Even if the issue with the groin hadn’t happen I still could be home at my own. Also for the first few days my daughter phone to order food you know and because of the Easter period we didn’t thought that it would start until today but it started last week. But if my daughter wasn’t here the first days I wouldn’t have any food but I am lucky I have family but some people haven’t you know.

* **What do you think were the main factors that led you to be readmitted?**

Not having any sort of care after being discharged and that I haven’t had much practise with the frame while I was in the hospital.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

If I had more physiotherapist and more explanation on how to mobile around I would probably avoid it. When I went in, someone asked me if I can bend my knee, oh yes I can, well is easier to do that because then you don’t fall backwards. So if they showed me that probably I wouldn’t fallen when I was here.

**What was the most significant element from your whole experience of hospital readmission and why?**

They were excellent I can’t fought them. They arranged everything for me in short period of time.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

I shouldn’t being discharged too early, without care in place and the transport should be at least in the 4 hour slot that they are giving.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

I just think is a total waste of money from the health services for things that should be happened, My early discharge, my readmission, the cancelled transport all these could be avoided. I think that they can do better.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

I think you covered everything, I hope I was helpful.

# Participant 8:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

#NOF R-Hip 2/6/19- LoS 10 days / Home 7 days/ Chest infection 19/6/19

I came to the living room, twisted around went flying lost my balance and landed on the ground. I said to my husband I am in agony, he said where and I showed my hip. I am not the person who exaggerate so he knew I am in great pain. We phoned 111 but they weren’t a great help, they were just asking a lot of questions, so we called 999 and they came, they were extremely helpful. They took me to hospital, they told I had a fractured hip. I had a surgery, they were absolutely marvellous. I stayed for 10days and my husband brought me home.

For my readmission, I was out for the evening and I had difficulty breathing, which is pretty unusual for me and my friend brought me home. My husband phone 999 and I was admitted again. They sorted me out as best as they could and I was d/c after a week.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

The nurses were extremely kind, they worked very closely with the doctors. The ward was fine, it was noisy, very noisy but apart from that it was fine. The noise was more or less all day… the people were calling the nurses and they were chatting all the time. The transport were marvellous, both times came very quickly and extremely helpful. My bad experience was the food, it was appalling. It was awful, it was tasteless I didn’t have much appetite but I knew that it wasn’t good.

**Can you please tell me in a few words about the discharge process?**

I felt I was ready to go home, I didn’t see a problem with going home at all. They asked me if I thought I was ready to go home and I said yes. They were very good.

**Prompt:**

* **Who was involved in the decision of your discharge?**

The doctor and nurses, me and my husband.

* **Would you prefer that something could have been done differently?**

No, I don’t think so.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

For about a week after I came home I needed a bit of assistance from my husband for washing and dressing other than that I was fine.

 **Prompt:**

* **Did you receive any help from family or friends?**

My husband is helping me.

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

No I haven’t had at that time but a representative was supposed to visit the following week but unfortunately I was readmitted with an infection.

**Can you please tell me about your hospital readmission experience?**

.Both admissions were very similar, I admitted in the A&E both times. The second time I was in the resuscitation area, I was lying there for 4-5 hours before I moved in the AMU. The care was the same I couldn’t see any differences

**Prompt:**

* **What were the differences from the first admission?**

Not really, no, no

* **What do you think were the main factors that led you to be readmitted?**

After a week I was home, one night while I was in bed I was very very hot and I was breathing very quickly and I had fast pulse and my husband rung the ambulance. I think it was just bad luck, I was told that is possible to get an infection so I might caught something home because it was a week after my operation.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

I had to be admitted, I don’t think that it could be prevented because it was a week after my d/c, so even if I had someone visiting I don’t think they could do something to prevent it.

**What was the most significant element from your whole experience of hospital readmission and why?**

I felt safe while being there, I thought the knew what they were talk about, I thought the knew what they were doing. They were explaining everything to me.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

Personally I don’t think they could do anything to prevent my readmission. The services are quite organised because they arrange me a commode, a walking frame and a visit form community nurse and everything happened as they said it would. So obviously there is a pretty good liaison between the hospital and the community, so yes I believe services are working quite good.

* **Are there any issues that are not being addressed by these services?**

I don’t think so. I am pleased by what the services have provided me.

**We have reached the end of our interview. Have you got any questions for me? Is there** **anything you would like to add?**

Not at all, I think you have covered most of the aspects. My opinion of the hospital is positive. I am very pleased with everything. I hope I have been helpful.

# Participant 9:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

I actually went in for a hip replacement on the 3/6 and came out on Friday, on the way home we had an accident, a car came in my side and I went back to A&E that evening. I came home but on the 6th day I was in a excruciated pain and I was taken back in, and they found a fracture on top of the hip. I stayed longer the second time.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

Everything was fine. The only thing that I don’t agree, really don’t agree was that they kept changing me wards. When they move you. I am not sure why but it wasn’t just upsetting for me but for people around you too. The lady opposite me ended up crying because there wasn’t anybody else around to talk with. It upset me, I was quite crossed. You are not asked if you want to moved, you are just told you that you are moving. The care was fine.

**Can you please tell me in a few words about the discharge process?**

The nurse there would said to me about having transport but my daughter was coming to pick me up. The physios were to blame there, because my daughter thought I was coming out a bit early because I couldn’t put my legs in or out of bed. They actually phoned her without me knowing anything about it and they said I want her to come and pick me up and they told me what my daughter said, that she was coming to pick me up. Those words were never spoken. And I was really crossed. Because have I listen to that nurse I would have transport home, and that accident might never happened we don’t know. The physios were very pushy to get people out. My daughter and I we believe that I was d/c too early.

**Prompt:**

* **Who was involved in the decision of your discharge?**

I did not feel involved with the decision for my d/c.

* **Would you prefer that something could have been done differently?**

I think that if I stayed for a couple of days longer, to make sure that I could manage home…because when I came home I couldn’t manage to put my legs in the bed. My daughter need to come and help me with it. If I had a bit of more physio, because I had only walking and then right at the last they had me walking up float the stairs which it was a bit early and then they decided I can come home. Something it was mist there I think.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

I was able to do most of my daily activities by my own but I needed a bit of help. Like getting in and out of bed, washing and drying my legs and getting dressed as I couldn’t bend myself. My daughter and friends helped me.

 **Prompt:**

* **Did you receive any help from family or friends?**

I had people there all the time, my daughter stayed with me the first days, my friends stayed for a few days and then my grandson. He was the one who was here when the pain actually happened.

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

I had only a DN arranged to visit me for changing of my dressing. The first time I haven’t had anything in-place for therapy or care.

**Can you please tell me about your hospital readmission experience?**

I stood up to walk down the room and the pain was so severe, I knew that the hip hadn’t come out of the socket because it would throw me to the ground. The pain was so severe that I didn’t know what to do with myself. My grandson called an ambulance and I was taken back in.

**Prompt:**

* **What were the differences from the first admission?**

I was in the A&E the whole afternoon being really ill because the paramedics they filled me up with painkillers. They did x-rays again and they moved me in AMU for the night. The Dr there couldn’t see any fracture and she was trying to figure out what was going on. They kept me n and they moved me in F4. A Dr there said that there is definitely something going on there he said he was going to study it and he was coming back to me. He came back and he said I want you t have a CT scan and there they found out the fracture on top of the hip. I was taken care very well. There weren’t any differences really, the nurses any ward you are, they are very nice.

* **What do you think were the main factors that led you to be readmitted?**

The pain was terrific, d/c too early, not enough physio {the one first day they walked me to the door my face colour changed and they took me back to the bed, the next day they walked me and then I did the stairs and then they said I can go home}, No POC in place and the way I was d/c.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

You don’t know I mean this accident I mean nobody, nobody could predict it, if you think about it it’s like a comedy film. I think if I had transport home, my daughter was nervous, her driving is fine but she was worried about me.

**What was the most significant element from your whole experience of hospital readmission and why?**

I really think it was the moving to different wards, because I think it has an impact on your wellbeing and getting better, I really do because you look like a family in that ward and all of sudden you are wiped away on another ward and when I was first moved to PAH I really hated it, I hated that small room that I stayed for that one night I was really angry. The 2nd time I was moved from F4 with 2 other ladies to PAH we were placed in different rooms and because of my age I was placed in a room with two people over 90s. I totally disagree with that. I don’t like the word geriatric.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

I don’t think the services are really connected, there are Dr’s who don’t work with the hospitals. A lot of community places were closed down. We had a health care place where people could go and they closed it down. So really, you only have your Dr or if you have an accident you go straight to A&E. If you had a health care place you could go there rather than the hospital which is full packed with people.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

I believe that if the d/c plan of my 2nd admission was done for my 1st, things could be very different. For example, if I had transport, some help in the morning and some physio in place as I had in the 2nd time… who knows. But I don’t blame the hospital for anything.

# Participant 10:

**Can you please tell me in a few words the story of your two hospital admissions in less than 30 days (for example: reasons for admissions, length of stay)?**

I went in to have my lung operation. 3days after that the medics came over for their morning round. ‘well you sat on that chair, you can go home and sat on your own chair ’. Like that, I thought this is great. My husband came and pick me up and came home. I went to bed and at some point I got up to go to the toilet and I notice that my face was a bit swell. My daughter in-law came over and we called the hospital. Thy asked as if anything is draining in the flatter bag but nothing was draining and I readmitted again. It broke my heart, I was so comfortable at home and I didn’t want to go back. It was lovely there but I didn’t want to go.

**Can you please tell me about your experience from the care you received during your first admission? (For example, what was good about it and what could have been better)**

Everybody was very kind and helpful, the only thing was day 3 I was in pain and agony. They gave my some IV painkillers, it was very very bad. The other thing was that pillows I was always sliding down and I didn’t had the strength to pull myself up. The ward was fine, the only thing, there was a women creating merry hell, screaming and shouting during the night. They gave me earplugs but I couldn’t sleep that night. They moved her the next morning. The food was ok but I couldn’t eat at all I didn’t had the appetite and I couldn’t swallow very good. The dietician came and see me and we had a discussion about my options.

**Can you please tell me in a few words about the discharge process?**

They just came around said you sat on this chair so you ca go home. We have been waited for ages for my medications and at the end we went home and my daughter in-law went over later that day to pick them up.

**Prompt:**

* **Who was involved in the decision of your discharge?**

I didn’t feel involved at all. There was no conversation at all

* **Would you prefer that something could have been done differently?**

Even though I wanted to go home I could stayed for 1-2 days more, the infection would have shown up and I would probably not being readmitted after a day.

**How was your everyday life after discharge? (For example, how did you manage your daily activities such as personal hygiene, nutrition, mobility and sleep?)**

I came home went to bed, used the toilet once during the night and next day I was readmitted, so I didn’t had any chance to washed or do anything else.

 **Prompt:**

* **Did you receive any help from family or friends?**

Yes my husband and daughters in-law.

* **Did you have any visits from health staff – for example a community nurse or a physiotherapist or health care worker?**

Yes a district nurse was planned to come over.

**Can you please tell me about your hospital readmission experience?**

I just sat there and I cried, I want to go home. Another drainage was inserted and the care was the same. When we arrive they expected as, they send as for x-ray and then I was admitted to the ward. I was impressed of how everything was in-place.

**Prompt:**

* **What were the differences from the first admission?**

No differences.

* **What do you think were the main factors that led you to be readmitted?**

If I was discharge a couple of days later.

**If your hospital readmission could have been prevented, what sort of help or services could prevent it?**

No, since I got discharge I don’t think anything could prevent my readmission. It wasn’t only the swelling I had an infection too.

**What was the most significant element from your whole experience of hospital readmission and why?**

The worst thing was being admitted during the night and the pain. Also the disappointment of going back again.

**In your opinion what issues should be taken into consideration from the health services, social services and local authorities in order to avoid hospital readmissions?**

I don’t think they are working together, social services are not doing as much as they should. If I hadn’t had my husband here I would be able to survive all this. My kids are not living local so it’s just me and my husband. They just asked me if live alone or not. They haven’t spoke with my husband about the discharge plan, I just call him to pick me up.

**Prompt:**

* **Are there any issues that are not being addressed by these services?**

Personally I think that the government needs to help them more in order to provide more.

**We have reached the end of our interview. Have you got any questions for me? Is there anything you would like to add?**

I just wish good luck for your research and your thesis.