



## Hospitals

### Tips to assist with hospital admission and discharge

#### Overview

This Factsheet is a checklist for entitled persons and their carers on how to plan for admission to and discharge from a hospital.

#### Before Admission

Make a list of your health history and contact details on the back pages of this Factsheet, showing:

- your General Practitioner (GP) or Local Medical Office (LMO), medical specialists and pharmacist;
  - your carer, family, next of kin, person with power of attorney;
  - any services you receive at home, for example nursing, home help, meals on wheels;
  - medical history; and
  - current medication – both prescribed and non-prescribed.
- pack your Department of Veterans' Affairs (DVA) card;
  - arrange transport, if required, through DVA; and
  - if you are a Coordinated Veterans' Care (CVC) Program participant, ensure your CVC care coordinator and GP know about your admission (in most instances your GP and CVC care coordinator will already be involved in, or managing, your admission).

#### On Admission

On admission to hospital you should:

- show the nurse or admission staff your DVA Card — they can check your eligibility and current services;
- if you are a Coordinated Veterans' Care (CVC) Program participant, advise the nurse or admission staff;
- provide the list of your personal history and contacts;
- ask if a Veteran Liaison Officer (VLO) or Discharge Planner is available for any assistance;
- ask how many days you will be in hospital;
- inform the hospital of your living arrangements – for example, if you are living alone; with a carer who is also frail; receiving services at home; have pets; dependants; use aids at home;
- ask for services you receive at home to be postponed until your discharge; and
- ask the nurse to inform your GP/LMO that you are in hospital, and to ask the GP/LMO to be involved with the hospital staff in discharge planning.

# Tips to assist with hospital admission and discharge, *continued*

## Prior to Discharge

Prior to discharge from hospital you will need to:

- confirm the date of discharge – make sure this suits you and your carer;
- ask for an explanation of the treatment received and for a list of all medications you are to take. Ask for a carer or family member to be present to listen to the instructions;
- ask for transport to be arranged, should you require it for the journey home;
- check that all the necessary services that you require such as nursing, aids (such as walking frames), home modifications (such as shower rails) and home help will be available at the time of discharge. Note that home modifications may take several weeks. Organising these services may involve discussions with the social worker, occupational therapist, physiotherapist, pharmacist, community nurse, and Veterans Home Care Assessor (over the phone);
- ask for review appointments to be arranged with your GP/LMO and specialists for after you get home;
- if you are a Coordinated Veterans' Care (CVC) Program participant, confirm that your GP and CVC care coordinator have been advised of your discharge; and
- ask for a hospital contact person and number that you can ring, should you have any concerns once you get home.

## Day of Discharge

On the day of discharge from hospital you need to:

- confirm that all the above arrangements have been made;
- ask for a copy of the discharge summary which will be faxed or e-mailed to your GP/LMO. This includes follow-on appointments and referrals to community services with their dates/times;
- collect your medication, scripts, and the instructions on how to take them. Make sure you have sufficient supplies to last until your appointment with your GP/LMO; and
- ask about what you can and can't do during recovery. Get information sheets if possible.

## GP/LMO Appointment

Ask if a home medicine review and/or a health assessment can be organised.

## Other Factsheets

Other Factsheets related to this topic include:

- *About Veterans' Home Care: HCS01*
- *Coordinated Veterans' Care Program: HSV101*

## Disclaimer

The information contained in this Factsheet is general in nature and does not take into account individual circumstances. You should not make important decisions, such as those that affect your financial or lifestyle position on the basis of information contained in this Factsheet. Where you are required to lodge a written claim for a benefit, you must take full responsibility for your decisions prior to the written claim being determined. You should seek confirmation in writing of any oral advice you received from DVA relating to complex or important matters.

## Tips to assist with hospital admission and discharge, *continued*

### More information

All DVA Factsheets are available from DVA offices, and on the DVA website at:  
[www.dva.gov.au](http://www.dva.gov.au).

You can phone DVA on 133 254 or free call 1800 555 254 if you are outside a major city.  
*Note:* Use a normal landline phone if you can. Mobile phone calls may cost you more.

You can send an email to DVA at: [GeneralEnquiries@dva.gov.au](mailto:GeneralEnquiries@dva.gov.au)



# Tips to assist with hospital admission and discharge, *continued*

## Personal Services and Contact List, *continued*

Name of Patient \_\_\_\_\_

<p><b>GP/LMO</b>          Name:.....          Phone number:.....          Fax:.....          Email:</p>	<p><b>Local Pharmacist</b>          Name: .....          Phone number: .....          Fax: .....          Email:</p>
<p><b>Medical Specialist</b>          Name:.....          Specialty:.....          Phone number: .....          Fax: .....          Email:</p>	<p><b>Medical Specialist</b>          Name: .....          Specialty:.....          Phone number: .....          Fax: .....          Email:</p>
<p><b>Community Nursing Service</b>          Name: .....          Phone number: .....          Fax: .....          Email:</p>	<p><b>Community Service (eg home help)</b>          Name: .....          Phone number:.....          Fax: .....          Email:</p>
<p><b>Community Service (eg meals on wheels)</b>          Name: .....          Phone number: .....          Fax: .....          Email:</p>	<p><b>Allied Health Provider (eg physiotherapist)</b>          Name: .....          Phone number: .....          Fax: .....          Email:</p>
<p><b>Carer or family member</b>          Name: .....          Phone number: .....          Fax: .....          Email: .....          Power of attorney? No /Yes – Ref No:.....</p>	<p><b>Carer or family member</b>          Name: .....          Phone number: .....          Fax: .....          Email: .....          Power of attorney? No/Yes – Ref No:.....</p>
<p><b>Dependants</b>          Name and role (eg child/spouse)          .....          .....          .....</p>	<p><b>Pets</b>          Type: .....          Who looks after pets in my absence:          Name:.....          Phone number: .....</p>
<p><b>Hospital Veteran Liaison Officer or Discharge Planner</b>          Name: .....          Phone number: .....</p>	