Major trauma discharge from hospital

Summary

- After a stay in hospital you may be discharged to a rehabilitation service or return home
- Ask questions of your healthcare team if you are unsure about the discharge process
- If you need support take a family member, friend or supporter along to healthcare discussions
- Most hospitals have a social worker available to help you

Being discharged is the process of leaving the hospital and involves making decisions about your rehabilitation and recovery. Discharge is organised to provide you with appropriate post-hospital care.

Before you leave the hospital, your healthcare team should have talked to you about your discharge plan. The most common options are either to be discharged home under the care of your GP, or transferred to a rehabilitation centre.

If you are going home, make sure you are registered with a GP. You may find you require their help and advice once you get home, at least for the first few weeks after discharge.

Some people feel ill-prepared for leaving the hospital and starting the next phase of their rehabilitation and recovery. Be reassured that your healthcare team is there to help and support you with advice and information to make your transition as smooth as possible.

Understanding your discharge from hospital

It is important that you are involved in the decision-making process about your discharge. Hospital staff will develop a plan with you for your discharge, recovery and rehabilitation, and ongoing care. This is a good time to ask questions and raise any concerns you or your family, carer or friends may have.

When speaking with hospital staff about your discharge:

- Make sure you understand everything you have to do before leaving hospital – this might include going over your hospital discharge plan, arranging any aids or equipment you need for your recovery, or filling a prescription.
- If you are going home, ask about anything you may need to help you recover there, such as walking aids or home help.
- Take notes as your discharge plan will probably not be written down.
- Ask questions to ensure you have all the information you need.
- Ask what activities you can and can't do once you get home, such as lifting, driving and climbing stairs.
- Understand what the warning signs are that would mean you have to call a healthcare professional or return to hospital.
- Check if there are any follow-up appointments you need to make with a healthcare professional or at an outpatient clinic. Record any appointment dates in your phone or diary, along with any special instructions for these appointments (for example, not eating before a blood test).

If you feel too unwell or are unable to fully understand what is being discussed for any reason, let your medical or other healthcare team members know. You can ask for a support person (such as a family member, friend or hospital social worker) to attend discussions around your discharge. Your support person could take notes, ask questions on your behalf or request further information.

Most hospitals provide patient handbooks, brochures or online information that can assist you too.

What happens during the discharge process
Discharge is the process whereby your hospital healthcare team:

- evaluates your health and discusses it with you and your family or carer
- talks with you about the anticipated next stages of care after your hospital stay
- discusses your medication/s with you
- develops a plan with you for your move to a rehabilitation service, an aged care facility or back home for recovery
- advises if you will need other supports such as aids and equipment or support services
- arranges for follow up appointments or tests
- provides a letter of discharge to your GP.

During the discharge process the following will be identified for you:

- your next contact with the health system (next appointment)
- your key contact within the health system (for example, your GP)
- the medications and ongoing management or care you should be undertaking until your next appointment
- potential problems to be aware of
- who to call if you need help or advice.

Questions to ask during the discharge process

Questions you might want to ask when you are being discharged from hospital could include:

- I'm worried I can't take in all the information; how can I be sure I don't miss something important?
- If I need to ask questions again, can I make an appointment with the healthcare professional?
- Can you write down information that's specific to me?
- What is the plan for my post-hospital recovery or rehabilitation (rehab)?
- What happens during a stay with a rehab service?
- Who decides how long I will be in rehab?
- What if I need rehab but I can't afford it?
- What do I need to do or prepare before I leave hospital?
- What happens if I don't feel ready to leave hospital just yet?
- How do I apply for compensation for a work or transport accident?
- What assistance is available for victims of crime?
- Can I get a second opinion if I disagree with my prognosis (what is predicted to be the likely course of my condition)?
- Will you give me some medications or prescriptions to take home?
- What should I do if my local pharmacy doesn't have the medication in stock when I need it?
- I have no one to care for me at home – who can help?
- Where can I get aids and equipment, such as a wheelchair or walker?
- Do I have to pay anything?
- If pain is a problem after hours, is help available?
- Who can help me if I am feeling overly stressed and anxious?
- How can I best work out what treatment I should have once I'm out of hospital?
- How can I prepare my home for my return?
- What are my healthcare rights and responsibilities?

Major trauma discharge – before leaving the hospital

Forms and payment when leaving hospital

Before leaving hospital, make sure you complete all the forms and documents you need to, pick up any prescription medication you need to take with you, and arrange to pay for any services or products that are not
covered by Medicare or your private health insurance. The things you might have to pay for may include:

- pharmacy items not opened when you leave hospital
- aids supplied for use at home (such as a raised toilet seat or a splint)
- pay TV, internet access, movies and non-local phone calls
- patient-requested non-emergency ambulance transportation.

**Medication information before leaving hospital**

If you have any questions about your medication discuss them with the hospital staff and ideally a pharmacist. Some things you may want to consider:

- Make sure you know what prescription or over-the-counter medication your healthcare professional has prescribed. Check dosages and instructions for taking them.
- Ask how long you will be expected to stay on the medication.
- Ask when a healthcare professional should review this and other medications you are taking.
- Fill any prescriptions for medications you need to take home with you.
- Tell the staff what medication, vitamins or supplements you took before you were admitted and ask if you should still take these after you leave hospital.
- Write down the name and phone number of a person to call if you have questions about your medication.

**Not wanting to leave hospital**

You may feel like you are not ready to go home when the healthcare professional tells you it is time. Perhaps you do not feel strong enough – mentally or physically. Speak to your healthcare professional or the hospital social worker about your concerns.

There are many options for support at home and programs to help you transition from hospital to home.

**Wanting to leave hospital earlier**

You might find you want to leave hospital before your healthcare professional says you are ready. It is your choice to refuse treatment at any time and go home whenever you wish. However, if your healthcare professional recommends that you need the kind of care that is only available in a hospital, you should consider this in planning the services that you may need.

In some cases, you might be able to talk about your concerns and work out a way that you can return home safely with the help of some extra support.

**Providing feedback about your care**

If you would like to provide feedback about your care before you leave hospital, you can speak with the nurse in charge of your ward. If you have a problem about your care, you can also speak with the hospital’s patient liaison officer.

**Organise your transport home**

If a family member is picking you up, make sure they know what time you will be discharged and if you need anything for the car trip home, such as a soft cushion to sit on.

The [Victorian Patient Transport Assistance Scheme](https://www.betterhealth.vic.gov.au/Major-trauma-discharge-from-hospital) helps eligible people living in rural or regional Victoria with the cost of travelling long distances for specialist medical services.

The scheme contributes to the cost of travel (including petrol for private cars, public transport fares and air and taxi travel reimbursement) and accommodation (if required).

**Travellers Aid** is a not-for-profit service that provides services and assistance to people who are travelling such as seniors or travellers with a disability.

**Hospital information on discharge from major trauma hospitals**

Major trauma hospitals provide information on their websites designed for patients and their families or supporters as well as specific information on discharge:

- Royal Melbourne Hospital has information on leaving hospital
- Royal Children's Hospital has an online portal for parents
- Alfred Health has a video on leaving hospital.

Support at home after a major trauma

After a major trauma incident, many people need short-term or ongoing support after being discharged from hospital. This may be community based, or provided by your family or carer.

Community support at home

If you live alone and have acquired a short-term or permanent disability after a major trauma, make a plan with your healthcare provider to work out the **services and supports** you need, how to access them and if you will need to pay for them. Supports you might need may include:

- access at your home – such as ramps or rails
- mobility aids – such as a wheelchair or crutches
- help with bathing or access to the shower or bath
- driving with a disability or accessing transport – car modifications, transport options
- getting medications – especially if you live in a remote area
- accessing other specialist healthcare services
- shopping for food
- home cleaning services
- contact numbers if you have any questions or need help late at night.

Your healthcare team at the hospital will probably arrange any support programs you need on discharge. If you need aids and equipment, these will have to be organised ahead of time.

There is also a wide range of support networks available, ranging from social and peer support (such as online and in-person support groups) through to condition-specific support organisations (such as **Arbias Victoria** and **Lifeline**).

Read more about [healthcare and support in the community](https://betterhealth.vic.gov.au).

Family support at home

If you have access to family support or the support of a carer, part of your discharge planning should involve speaking with your family or carer before your hospital discharge so you are all clear about what sort of help you need and want, and what they can do to help you.

Make sure you and your family or carer understand any special instructions such as giving you medication or changing bandages. Your healthcare professional can show you, your family or carer how to do these tasks.

If you are going to need some extra help at home, organise who is going to do this. Explain any instructions they need for your care or ask them to speak with your healthcare team directly.

After a transport accident - treatment and support services

The **Transport Accident Commission** (TAC) pays for the treatment and support services you need to get your life back on track after a transport accident. This includes medical treatment, rehabilitation and disability services and things like home services and child care.

Discuss with your healthcare team the most appropriate treatments for you. For a full list of the treatment and support services the TAC can pay for, visit [www.tac.vic.gov.au](http://www.tac.vic.gov.au) and search for ‘treatment’.

If recovery at home is not going as planned

If you are feeling unwell once you get home or your recovery is not progressing as expected, arrange to see your specialist earlier than previously arranged or talk to your GP.

Rehabilitation services for people who have experienced major trauma

There is a range of rehabilitation services available in Victoria offering various levels of care.

**Specialist metropolitan rehabilitation services**

If you need rehabilitation for burns, spinal cord injury, severe acquired brain injury or you have a child requiring paediatric rehabilitation there are specialist rehabilitation services available.

Specialist metropolitan rehabilitation services are located at:

- **Alfred Health**
- **Austin Health – Royal Talbot Rehabilitation Centre**
- **Calvary Health Care Bethlehem**
- **The Royal Children’s Hospital**
- **Monash Health**
- **Epworth Health - Rehabilitation Service** - largest private provider to major trauma patients.

**Admitted rehabilitation services located across Victoria**

If your treatment has occurred at a major trauma service and you require in-patient (admitted) rehabilitation, in most circumstances you will need to stay within that health service for your rehabilitation.

Every effort will be made to try and accommodate a transfer back to a health service nearer your home, but often they may not have the ongoing specialist care you require, or facilities to accommodate you.

Read more about [surgical recovery and rehabilitation](betterhealth.vic.gov.au).

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