



healthwatch
Surrey C.I.C

**North West Surrey Alliance –
Hospital at Home
December 2022**

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About Healthwatch Surrey

Healthwatch Surrey CIC is an independent community interest company that gives the people of Surrey a voice to improve, shape and get the best from health and social care services.

Background

Healthwatch Surrey was commissioned by North West Surrey Alliance to explore the idea of Hospital at Home with older North West Surrey residents.

Between 14/11/2022 and 8/12/2022 we gathered the responses of 72 people. They were given a description of the service and shown visuals of the equipment involved (Appendix a); they were asked how they felt about taking part in the Hospital at Home scheme, what experience they had of remote consultations their overall impressions and concerns.

We asked whether they were carers, had any care needs themselves, and what unpaid support they had. They were also asked if they had any experience of self-monitoring at home, such as for blood pressure or oxygen levels etc.

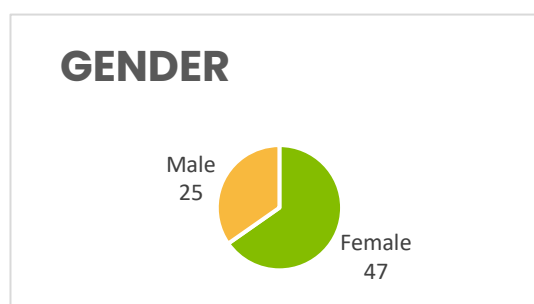
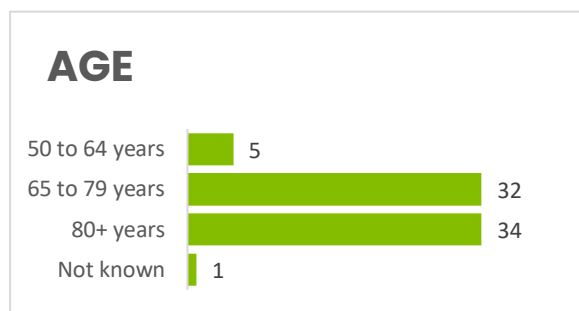
We visited Maybury, Goldsworth Park, Ashford, Walton and St Anne's which are all key neighbourhoods.

Where we engaged:

We listened to people at a combination of planned community engagements and opportunistic interviews.

Location	Number of respondents
Fordbridge Centre	18
Walton Centre for the community - Hospital at home project	15
Cafe Revive Chertsey	12
Andy's Community Cafe	11
Men's coffee morning at the Arch Community Hall, Maybury	10
Other (including Action for Carers and Chertsey Veteran Hub)	6

Resident of:	Number of respondents
Spelthorne	23
Woking	21
Runnymede	14
Elmbridge	14



ETHNICITY

White British	47
Asian Pakistani	10
Other British	6
White European	4
Black African	2
Other/not stated	3

OTHER

Carer	12
Long term condition/disability	33
Lives alone	22

Executive Summary

Nearly two out of three of the people we spoke to were positive about the idea of Hospital at Home. Around one in ten were unsure; one in four negative.

The **most motivating** aspects of Hospital at Home are:

- **Being at home** rather than in hospital
- The possibility of **reducing the burden on the NHS.**

An individual's **acceptance or rejection** of the scheme **hinges on two elements:**

- **The equipment:** whether the person feels they will be able to manage the kit with confidence and accuracy
- **Support and oversight:** whether the person feels secure in the level of oversight and response that will be offered by the NHS.

The scheme will not be safe or appropriate for everyone and we assume assessments will be in place to ensure placement on the Hospital at Home ward is safe not only for the patient but also for anyone they care for or who cares for them.

That said, **to maximise the potential of Hospital at Home NW Surrey Alliance can:**

- Ensure patients (and their carers) are confident and competent in use of the equipment before discharge
- Ensure potential patients understand and are comfortable with the level of clinical input they will receive while on the Hospital at Home "Ward".

Findings

Overall response: the majority of people we spoke to were receptive to the idea of Hospital at Home

- 62% (43/70) were positive
- 13% (9/70) were unsure
- 26% (18/70) were negative

Motivations: the people we spoke to told us of two key reasons why they felt the idea was something they personally would want to take part in, and to support.

The first and most often mentioned motivator is a **preference for being at home rather than in hospital.**

- Many expressed this simply as a statement of fact

“Anything that keeps me at home is a positive for me.”

Walton Centre for the Community

“I personally, given the choice, would prefer to be at home as long as I could be.”

Men’s Coffee Morning, Maybury

- But some had had previous bad experiences with hospital admissions:

“Hospital gives me anxiety so no hospital or extended stay for me. I looked after my father until he died 2 years ago, and he was in an out of hospital, it was awful.”

Men’s Coffee Morning, Maybury

“Recently had so much interaction with hospitals, I want to be home.”

Men’s Coffee Morning, Maybury

- Others needed to maintain their duties as carers

“My wife couldn't, she has Dementia and I'm her carer. I would need to be a home for as long as I can because I care for her.”

Café Revive Chertsey

“I'd rather be at home as I am a carer for my adult son who has SEN issues.”

Men's Coffee Morning, Maybury

People also recognised Hospital at Home as something that could **help them reduce the burden on the NHS**

“Think it is a good concept and especially like that it could free up a bed for someone more critical. We read all the time about bed blocking and would hate to be one of those people.”

Café Revive Chertsey

“I understand why it would help if more people like us, did some self-care to help ease the hospitals / ambulances.”

Andy's Community Cafe

Barriers/Enablers: the equipment, and the level of support/oversight from clinicians are the two key elements of the scheme that drive an individual's positive or negative response.

People were shown an information sheet about the scheme, and visuals of the equipment. Their reactions, expectations and assumptions the technology and the support drive their overall responses to the idea of Hospital at Home.

Technology – positive responses

Some people felt the kit would not be a problem to use at home:

- Having seen the explanation and visuals, many assume it will be simple to use:

“We can help each other; it looks straight forward.”

Café Revive Chertsey

“Am ok with monitoring myself. Can use a tablet and phone.
Would definitely use the oximeter.”

Men’s Coffee Morning, Maybury

- Some said they would seek support from family to use the equipment:

“My daughter lives around the corner and supports me. She is my carer as sorts all my GP and medical appointments out for me. With her help, I’d be happy to use the monitoring needed for Hospital at Home.”

Walton Centre for the Community

“My wife is my carer. She would help me with any Hospital at Home stuff. Think it’s a good idea if I can be at home longer if needing monitoring or an operation. My wife would support this and help. She is fantastic.”

Walton Centre for the Community

- Others have experience of monitoring their health, particularly their blood pressure:

“I check my own blood sugar and BP at home. Happy to use a kit for Hospital at Home. I use most of this myself, anyway, including Oximeter.”

Men’s Coffee Morning, Maybury

“Have a Blood pressure machine at home and am confident with this so if another piece of kit was lent to me, then I would use it.”

Men’s coffee morning, Maybury

The scheme will not be safe or appropriate for everyone and we assume assessments will be in place to ensure placement on the Hospital at Home ward is safe, not only for the patient but also for anyone they care for or who cares for them.

- Many assumed they would receive adequate training:

“I would use this kit if shown how to and with support once someone has gone.”

Café Revive Chertsey

“I have no experience of doing this myself but it would be no stress for me to learn and do it.”

Walton Centre for the Community

Technology – negative responses

For many of those who were negative about the idea of Hospital at Home worries about the technology were the primary concern:

- Some felt the technology of the kit was beyond their abilities:

“No, would not use this box. I have no help at home. I am not good with any type of tech.”

Coffee Morning, Maybury

“I hate those kits! This is too confusing for me. I would need help, which I simply don't have. No, I wouldn't do this at home, none of it.”

Fordbridge Centre

“Wouldn't be happy using kit. Too much technology.”

Coffee Morning, Maybury

- Some mistrusted the kit, or were concerned about errors:

“Machines also go wrong and would prefer another professional to do this for me.”

Andy's Community Cafe

“What worries me about this is that I think machines not always working or people input things in incorrectly. The scales are wrong at surgery. My husband weighed himself and print out goes to GP. He then got a letter saying he was morbidly obese and he isn't!”

Café Revive Chertsey

- A few had personal health or mobility barriers to use of the equipment:

“I live alone and could not cope with the kit due to my brain fog and sight.”

Walton Centre for the Community

“My movements are quite jerky so they would have to do this for me.”

Andy’s Community Cafe

“My left arm doesn’t work due to a stroke so I do find it hard to use equipment, guess that is my only concern with self-monitoring but I will always try.”

Walton Centre for the Community

Support and Oversight – Negative Response

Concerns about clinical support and oversight are an important barrier to acceptance of Hospital at Home

- The idea of being at home alone while needing monitoring evoked fear:

“I would always rather go to hospital than be at home doing anything. It just feels safer that way and that I wouldn’t be forgotten. My wife isn’t feeling well these days so I couldn’t really lean on her to help me with this. Think we would both prefer to not do the monitoring and be on a ward.”

Men’s Coffee Morning, Maybury

“This concept makes me incredibly anxious. I worry too much if I’m doing stuff wrong that I constantly retest. That’s why GP weighs me and does my BP. I’ll get way too distressed. My mental health is too much to be able to do this.”

Café Revive Chertsey

- The level of oversight and clinical response was a worry for many of those who felt negatively about Hospital at Home

“How quickly would they come if something was wrong? If I was in a bed on a ward, they would deal with me immediately. Also, what if I cause an issue because I've done it wrong or read the reading wrong?”

Café Revive Chertsey

“My worry is I have had the operation and gone home, what if I'm ill. Would rather have nurse's eyes on me so they can see to me quickly. I hope nothing is compromised in the discharge. I only want to be sent home if ok. If I start to feel ill at home think I'd panic.”

Café Revive Chertsey

How do you record the results accurately? If you're worried about the results, who do you call? Is there a support network to help you and talk you through everything? How long will it be for?

, Action for Carers Fair

I would query who would be supporting me though, that is important to me,

184178, Andy's Community Cafe

- A very small minority gave the impression they felt this was something a clinician should be doing for them if it's clinically important:

Just wouldn't use the kit. My job is to care for my husband. He has COPD . We don't do any monitoring though for this. He and I want the nurse to do this.

183797, Fordbridge Centre

This is a lot of work and I think being alone, this is not something I'm comfortable with taking on. I do however, take my own blood pressure but no one is pressurizing me or expecting it. So it is less stressful.

183820, Fordbridge Centre

I am an Insulin Diabetic and have enough to do at home in terms of monitoring already thank you! I would not use monitoring or feel at all comfortable.

182783, Walton Centre for the Community

Support and Oversight – Positive Response

Few commented positively on the level of oversight described in the information sheet, but there were some comments implying trust in the system:

“I would definitely feel comfortable with calling a hotline for support if I needed it too.”

Walton Centre for the Community

“I would feel confident to use if had to but would most likely need to call for support.”

Walton Centre for the Community

“I do like being seen in person so a mixture of remote and in person is ok as long as we are not forgotten.”

Andy's Community Cafe

Experiences of Monitoring

45% (32/70) respondents mentioned monitoring their own health. All these related to blood pressure monitoring; a very small handful also monitored their blood sugar.

Practices relating to BP monitoring varied:

- Regular or sporadic readings reported to the GP

“I already take his [husband 80 with Alzheimers] blood pressure at home. It works really well. I can call with any queries. I had a read out the other day and they needed to change his meds. Someone called me and explained it all to me.”

Cafe Revive Chertsey

“I have a blood pressure machine at home and am confident with this. I also test my blood sugars and log all the readings in a book.”

Fordbridge Centre

- Regular or sporadic readings for personal information, not reported

“I monitor my own BP for extra reassurance but don't write this down or submit to my doctor.”

Café Revive Chertsey

- Lapsed users, or own a cuff but not used

“I have BP machine at home but I don't honestly trust myself to do it properly.”

Andy's Community Cafe

- A small minority expressed resentment about self-monitoring

“I just gave my GP my blood pressure readings after they sent me a text asking for it. Bit rich, though as they expect us to have our own and buy it.”

Fordbridge Centre

Raw Data

The quotes in this summary report have been extracted to illustrate the key discussion points for this project. As we had in-depth conversations with the people we engaged with they told us about other aspects such as staff attitude, appointment booking etc. The full experiences can be found in the raw data spreadsheet.

This was a one-off engagement project and the experiences in this report are reflective of what we heard on the day at the engagement events.

Thanks

Healthwatch Surrey would like to thank everyone who shared their experiences with us and the community providers that welcomed us for our events

Images from the engagement

Walton Centre for the community –
Stroke group



Café Revive Knit and Natter,
Chertsey



Andy's Community Café – Hearing
aid clinic



Men's coffee Group, The Arch,
Maybury



Fordbridge Centre, WI & Knit &
Natter, Ashford



Appendix a – description and visuals shared with people we spoke to

Hospital at Home

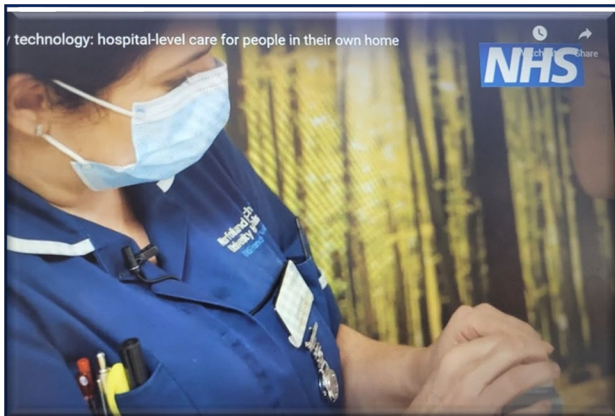
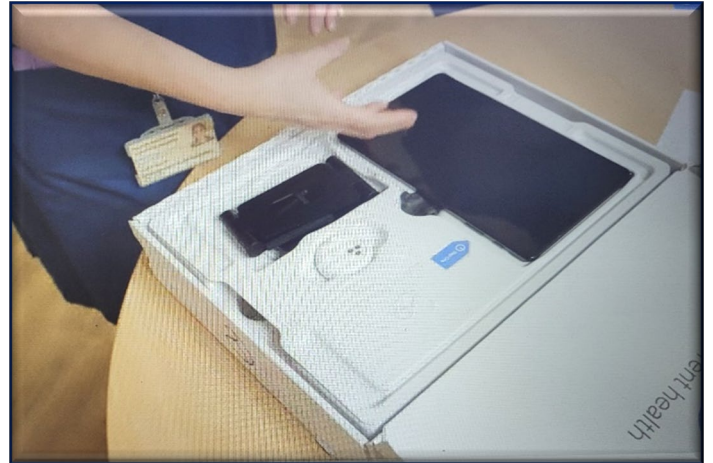
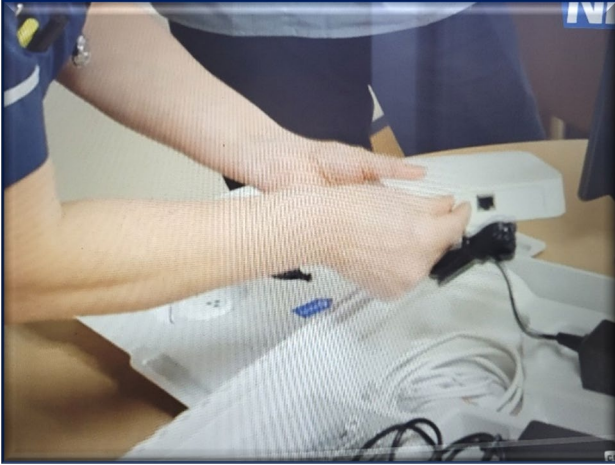
Hospital at Home allows patients to get the care they need at home safely and conveniently, rather than be admitted to hospital.

This service can also help people who are **pre or post operative** and help people who are living with frailty or a long-term health condition such as COPD.

At home, support can include **remote monitoring** by wearing blood monitoring devices which may also detect oxygen levels and skin temperature. With a simple device, readings can be sent to a health care professional at hospital. No WIFI will be needed, and no costs incurred.

Like conventional hospital care, individuals will be **under the care of a Consultant, supported** by a team of healthcare professionals who will monitor vital signs and will be available by telephone. Care will be delivered by a combination of face to face, and remote consultations.

Examples of a hospital at home kit





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Freepost RSYX-ETRE-CXBY,
Healthwatch Surrey,
Astolat,
Coniers Way,
Burpham,
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