Discharge information for patients with intellectual disability or autism spectrum disorders.

This information is designed to assist health professionals care for their patients who have intellectual disabilities or autism spectrum disorders.

Monash Health is located within a large and diverse community. Health professionals work across this community with many different patient groups, including people with intellectual disabilities or autism spectrum disorders. When a patient with an intellectual disability or autism spectrum disorder is discharged from hospital, there are some important principles to consider.

Supporting the patient in healthcare planning

- All individuals have unique life experiences and areas of disability and ability. Some people live independently; others are supported by family or community services; while others are supported by disability trained direct support staff in shared homes.
- Many require support for daily activities, including the organisation of healthcare appointments and following through on management recommendations. This support is often provided by family members and/or paid disability direct support staff. Direct support staff are experts in supporting people with disability; they do not have health training.
- Detailed planning for care at home post discharge is necessary to ensure all those involved have the training, capacity and ability to provide the care required, and the information and resources they need to do so.
- The GP will be providing care in the community and must be aware of the discharge. A copy of the Interim Discharge Summary (see below) must be faxed to the GP on discharge.

Arrangements for discharge

Consider the patient’s needs at home and who will provide that support.

- Is the patient physically ready for discharge? e.g. IV lines removed, wounds dressed.
- Are there specific instructions in relation to the formulation or administration of medication? If so, have these been communicated to the carers and the GP?
- Does the patient require assistance with medication and monitoring for adverse effects?
- Does the patient require monitoring and recording of seizures?
- Does the patient require assistance in monitoring and dressing wounds?
- Does the patient need assistance in arranging and attending follow up investigations and appointments?
- Does the patient have transport home?
- Does the patient require support for personal care, shopping (including chemist for medications), meal preparation and other domestic tasks?
- Does the patient or carer(s) require arrangements to be made for home modifications, provision of equipment or training for aids or equipment?
Interim Discharge Summary

- Discharge information regarding admission and care needs must be communicated clearly, both in person and in writing, to the patient and those supporting them at home, or to the subacute setting staff, as well as to the GP.

- The official Discharge Summary may take some time to arrive, so an Interim Discharge Summary is required to ensure those providing care have the information and contacts they need to ensure good post-discharge recovery. Any particular issues experienced during the admission should also be described.

- The Interim Discharge Summary must be in writing, be self-explanatory, use Easy English terms (not medical jargon) and include:
  - The diagnoses.
  - The presentation and assessments undertaken.
  - Management, response and expected progress.
  - Medications on discharge and information about medication management plan including dose, length of treatment and common side effects.
  - Arrangements for follow up.
  - Contact numbers for questions and concerns.

Key points:

- The key to good discharge is good planning and communication with all concerned.

- Plan discharge in partnership with those who will provide day to day personal support and those who will provide ongoing healthcare (GP, nursing services etc.) Document implications of health issues identified for ongoing management and provide a copy to carers and GP.

- An Interim Discharge Summary should be provided to the patient or those providing personal support and to the patient’s GP.

For information

Centre for Developmental Disability Health: www.cddh.monash.org 03 9792 7888

Useful resources