

NHS Training for
AHP Support Workers

Workbook 11: Multidisciplinary Team Discharge / Transition Planning



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11.1 Aim

The aim of this workbook is to introduce the Healthcare Support Worker (HCSW) to multidisciplinary team discharge / transition planning and to understand their contribute to decision making.

11.2 Learning Outcomes

By the end of this workbook you will be able to:

- Identify how information is passed to and within teams.
- Understand your contribution to the multidisciplinary team discharge / transition planning process.
- Demonstrate the importance of your role and information to the process.
- Identify what is important to the patient during the process.

11.3 Contributing to Multidisciplinary Team Discharge / Transition Planning

As a Healthcare Support Worker you will be expected to contribute to the multidisciplinary team and to provide your feedback about progress of the patient. This information will help the team to make decisions about when the patient is ready to be discharged home or for transition to another part of the service.

The information may be gathered at more formal multidisciplinary meetings e.g. case conferences or at more informal meetings, daily ward meetings with nursing staff and other colleagues at the daily report meetings. The system works differently in different areas. You need to find out how it works in your area. The type of information that you may be asked to provide includes:

- Is the patient able to walk independently, get out of a chair independently and get in and out of bed independently?
- Has the patient been assessed on stairs and able to go up and down safely and independently?
- Has the patient progressed as expected with their recovery?

It is important to consider information available from other team members e.g. the Occupational Therapist will contribute information about potential equipment required, a nurse will be able to inform the team about the progress on the ward, family concerns and medical concerns. However this will vary dependent on the client group and area you work in.



Find out how information is passed to the multidisciplinary team in your area.

Describe your contribution to the multidisciplinary team discharge / transition planning for a patient that you have cared for. What information did you contribute and how did this influence the decision about discharge / transition for the patient?

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Describe the patient. Explain what was important for this patient for their discharge / transition.

What information did you contribute to the multidisciplinary team? How did this influence discharge planning / transition?

11.4 Contributing to Decisions about Follow-up Treatment

Some patients may require out-patient treatment or domiciliary care, others may not. You are expected to be able to assist in the decision about whether this is appropriate or not. This information may be conveyed at the multidisciplinary meeting, or in more informal discussions with the patient's therapists. The type of information that is important might be:

- Lack of progress compared with similar patients
- Non routine progress e.g. does the patient have a wound infection or other medical conditions that have slowed progress?
- Has the patient be unable to achieve goals that would be expected?
- Does the patient have a history of falls?
- Significant problems at home.

These may be critical points that would prevent the patient from achieving full potential as expected and which may require further rehabilitation.



Activity

From your practice describe a patient who required ongoing treatment following discharge / transition from your service. What contribution were you able to make to the decision about this?

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What was important? What information were you able to contribute?

Was it necessary for the patient to have further treatment? Which services was the patient referred on to and what was the process of referral for this?

11.5 Multidisciplinary Team Discharge / Transition Planning Training Workbook Completion

Your mentor / supervisor will sign your portfolio to indicate that you have completed this workbook successfully.

Objective	Supervisors Signature	Date
Describe your contribution to the multidisciplinary team discharge / transition planning		
Identify what is important to the Patient		
Demonstrate how your contribution influenced the process		
Identify the onward referral process		

Support worker (name)	
Support workers signature	
Supervisor (name)	
Supervisors signature	
Date	

11.6 Multidisciplinary Team Discharge / Transition Planning Training Reflection

Suggested KSF Dimensions: C1, C5 and HWB2

This form should be placed in the appropriate section of your portfolio.

What did you learn from this module?

How has this influenced your work?

Date module completed



