

- If you feel you need advice and or someone to speak on your behalf – get an advocate
- If you get new assistive technology, ask about training on how to safely use any new equipment or aids
- Ask about any at-home rehabilitation services that you may be eligible to receive
- Talk to your social worker about any concession programs

An advocate is a person who can help you with a problem. It may be a family member, friend or professional advocate. They will speak up for your rights and interests. For example: by supporting you at meetings.

To find a professional advocate, search on the Ask Izzy website: www.askizzy.org.au

Ask Izzy provides information on support services. You can search by postcode across 16 categories, including advocacy.



Accessible, easy read, easy print versions available at: https://bit.ly/readytogohomeresources

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Your hospital stay



Understanding what your hospital stay might be like may reduce stress and improve your hospital experience. It can be helpful to have an idea about:

- what might happen
- who you might talk to
- how you might feel.



Arriving at hospital

What might happen

- If you travel to hospital by ambulance, you might be taken to one hospital then to another hospital
- When a hospital is busy you may have to stay in the ambulance until the hospital has space to treat you
- Where special assistance is required, police officers might take you to hospital
- You may be transported to hospital by air

Who you might talk to

- Ambulance team
- Emergency paramedics
- Police officers

- Flight crew
- Doctors
- Nurses

How you might feel

You may feel comfortable and relieved, or you might feel:

Anxious

In pain

Frightened

In shock



- Try to stay calm and respectful. Let the professionals do their job - they are there to help you with no judgement
- If you are not sure what is happening, then ask questions



Emergency Department

What might happen

- If you go to the Emergency Department, you will be seen by someone from the triage team. Triage is where patients are prioritised for treatment based on their needs
- If you have private health insurance, it is your choice whether you choose to go public or private
- Critical patients go straight through for treatment
- If you are not critical and the hospital is busy, you may need to wait
- You might need some emergency medications, procedures and or medical tests which may involve special equipment.
 For example: x-rays and scans
- You may be transferred to another hospital
- A nurse will complete medical observations and paperwork
- The nurse and doctor have other patients, so you may be left alone sometimes
- After your assessment is complete, you will either be discharged or admitted to a ward
- If you are admitted, you will be taken to a ward

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Who you might talk to

- Admission clerk
- Customer relations
- Admin staff
- Triage nurses
- Doctors
- Interpreters
- Social workers

- Occupational therapists
- Psychologists
- Specialists. For example: surgeons
- Orderlies
- Police

How you might feel

You may feel fine and not concerned, or you might feel:

- Uncomfortable
- Frustrated
- Worried
- Traumatised

- Not listened to or forgotten
- Confused
- Very unwell and in pain

- It is good to have a support person with you where possible
- Be aware it will be noisy lots of beeping and alarms and you may have to wait a long time to be seen
- It's okay to ask questions about your condition and the process
- Be kind to and patient with hospital staff
- If you are a National Disability Insurance Scheme participant, let staff know and provide them with your essential information
- If you have sensory sensitivities, let someone know you need a quiet place and explain why
- Ask the nurse to show you the call button and how to use it

- If you feel your condition is getting worse, go to the triage station or call out for help
- If you have aids or equipment, ask for a patient label to stick on each item
- If you are admitted, make sure all your clothes, shoes and personal items are bagged and go with you to the ward
- If you feel you need advice and or someone to speak on your behalf – get an advocate



What might happen

- A ward is the area you are allocated for your hospital stay
- You may be moved around to different wards depending on your health needs
- You will be asked to fill out a menu. Make sure you are clear if you have any dietary requirements and or food allergies
- If you are assessed as needing help to shower, assistance will be provided
- Doctors, nurses and other members of your health team will visit you to discuss your health and discharge plan
- You may be given new medications
- You may have different types of tests taken
- You may be referred to therapy, such as speech, occupational and physiotherapy
- You may need a procedure or surgery
- Your health team will work with you to prepare your discharge plan for you to leave hospital

Who you might talk to

- Nurses
- Doctors
- Specialists
- Allied health professionals. For example: psychologist
- Other service providers who may help during your stay or with your discharge plans

How you might feel

You might enjoy your hospital stay, but you also might be feeling:

Lonely

• Down

Isolated

Bored

Tired

Very unwell and in pain

Anxious

Scared



- Some hospitals have an information folder that explains how the hospital works
- Be aware your sleep may be disturbed
- Staff can change and you might not see the same people all the time
- If you would like to practise your faith while in hospital, talk to the Patient Liaison Officer
- If discharge planning hasn't begun, ask why and when it will begin
- If you feel you need advice and or someone to speak on your behalf – get an advocate



Discharge

What might happen

- Discharge planning meetings are coordinated with your health team and services
- You and your support networks (family, carer, friends) can be involved in discharge planning meetings
- A discharge date is decided but may change depending on your progress and circumstances
- If you have had a long hospital stay, you may go home for a few days at a time until you are ready to go home full-time
- You may have to go to rehabilitation or temporary accommodation
- You may need help from your support networks (family, carer, friends), as well as service providers

Who you might talk to

- Allied health professionals. For example: social worker, dietician, occupational therapist
- Nurses
- Doctors
- Community service providers

How you might feel

- You may be excited and relieved to be moving on from hospital, but it is okay to feel like you are not ready
- Leaving hospital can be overwhelming and it is not unusual to feel anxious
- You might feel uncertain or apprehensive
- You may still feel unwell and in pain