

Factsheet

Hospital stays

This factsheet covers what should happen before, during and after your hospital stay, and how you can prepare for it. Information about processes and your rights refers to NHS hospitals, unless otherwise stated.

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Independent Age provides advice to help people claim benefits, access social care and stay independent at home. Our local volunteers provide friendship visits and calls for lonely older people. To find out how Independent Age can help you, call us FREE on **0800 319 6789** or visit **independentage.org**



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The information in this factsheet applies to England only. If you're in Wales, contact Age Cymru (0800 022 3444, agecymru.org.uk) for information and advice. In Scotland, contact Age Scotland (0800 470 8090, agescotland.org.uk). In Northern Ireland, contact Age NI (0808 808 7575, ageni.org).

1. Preparing for a hospital stay

There can be a lot to consider before a hospital stay. One simple thing you might want to think about is what you will take with you. Here is a checklist to get you started:

- your appointment letter
- your medication
- glasses or contact lenses
- your hearing aid
- any mobility aids you use
- small change and a credit card
- a mobile phone and charger, or a list of useful phone numbers
- something to keep you occupied, like a book, or music player with headphones
- a notebook and pen
- pyjamas or nightdresses and a dressing gown
- spare underwear
- slippers or other comfortable footwear
- toiletries
- antibacterial wipes
- shaving equipment
- a small mirror
- a comb or hairbrush
- anything personal you might want, such as a photograph.

You will also need to consider any practical issues you need to take care of before leaving home. For example, you may want to think about the following:

- ensure your home is safe – turn off electrical appliances, turn off water at the mains and turn your central heating down/off
- secure your property – check windows and doors are locked and consider installing timer switches on lights and radios
- leave valuables/keys with family or neighbours

- ask family or neighbours to collect your mail, or if this isn't possible, perhaps pay for Royal Mail's "Keepsafe" service where they hold your mail for up to two months and deliver it when you are home. For more information on charges, contact Royal Mail (03457 777 888, royalmail.com/personal/receiving-mail/keepsafe or ask at your Post Office)
- arrange help with looking after your property (watering plants etc.)
- cancel any deliveries, like milk or newspapers.

If you have a relative, friend or carer, you may find it helpful to talk to them about what you need to do before, during or after your hospital stay.

If your hospital stay is planned, you should receive an admission letter containing information such as:

- the time and date of your appointment
- where to go on the day
- whether you can eat or drink before your appointment
- contact details of the relevant hospital department or ward

If you're a carer

If the person you care for will need replacement care while you're in hospital and recovering afterwards, contact your council's adult social services department to arrange a care needs assessment for them. The council may provide replacement care either in their home or in a care home – the person you care for might be charged for this if they can afford it. You may also want to request a carer's assessment for yourself if you have not already done so. This looks at what support you need in your role as a carer. For more information, see our factsheet **Support for carers** (0800 319 6789, independentage.org).

Good to know

Carers UK (0808 808 7777, carersuk.org) or Carers Direct (0300 123 1053, nhs.uk/carersdirect) can offer advice and information to help you make sure that the person you care for is supported while you are in hospital and recovering.

If you own a pet

If no one else can look after your pet while you're in hospital, you could pay for a pet-sitter. The Cinnamon Trust (01736 757 900, cinnamon.org.uk) offers practical help and advice about caring for pets during your hospital stay.

2. Emergency (unplanned) admissions

Although you can't usually plan for emergency admissions to hospital, you can still get help once you're there. If you're worried about anything at home, don't hesitate to ask the staff on your ward. If they can't help directly, they should be able to put you in touch with someone who can, such as your family, friends or neighbours and any organisations you need to contact.

Questions about the treatment you'll receive

You may have concerns or questions about the medical care you will receive in hospital, such as:

- What treatment will I be having?
- What effect will it have?
- How long will I be in hospital?
- How long will I take to recover?
- What follow-up treatment/support will I need to recover?

For more information on these issues, you can speak to the following people or offices:

- hospital discharge coordinator (who may be on your ward)
- admissions office
- nurse liaison officer (not all hospitals have these, or they may have a different job title)
- Patient Advice and Liaison Service (PALS).

3. Managing your finances in hospital

It is a good idea to consider this before you go into hospital, as it may be harder to make arrangements once you're there. If you don't already have arrangements in place for someone to collect your pension or carry out other financial transactions on your behalf, you may want to consider setting up:

- direct debits and standing orders
- an appointee – to receive your benefits on your behalf
- a third party mandate – you give your bank instructions that you want someone else to be able to deal with your account for you while you're unable to
- a Power of Attorney (POA) or Lasting Power of Attorney (LPA) – you appoint someone to make decisions for you if you're unable to make them.

For more information, see our factsheet **Managing my affairs if I become ill** (0800 319 6789, independentage.org).

4. What happens to your benefits when you're in hospital?

Some benefits stop after you've been in an NHS hospital for a certain period. If you get any benefits, you must inform the appropriate benefit office when you're admitted to hospital and when you're discharged, to avoid being overpaid.

Disability benefits

Benefit	What happens?	Contact
Attendance Allowance (AA)	Stops after 28 days*	AA helpline 0345 605 6055
Disability Living Allowance (DLA)	Stops after 28 days* If you have a Motability arrangement, contact the scheme after 28 days to discuss arrangements	DLA helpline 0345 712 3456 Motability customer services 0300 456 4566
Personal Independence Payment (PIP)	Stops after 28 days*	PIP helpline 0345 850 3322

*either in one stay, or several stays, where the gaps between stays are no more than 28 days each time

Special rules for people who are terminally ill

AA, DLA and PIP should still be paid if you're in a hospice and the benefit has been awarded under the special rules for terminal illness. The benefit won't stop after 28 days.

Normally, you must have had your illness or disability for three months before you can qualify for PIP, or six months to qualify for AA. However, if you're diagnosed with a terminal illness and aren't expected to live longer than six months, you can claim the highest rate of AA or the enhanced rate of the daily living component of PIP straight away.

For more information, contact the relevant office at the DWP (see table above). DLA is no longer available to new claimants: you should claim AA if you're 65 or over, or PIP if you're under 65.

Other benefits

Benefit	What happens?	Contact
Carer's Allowance	<p>Stops after 12 weeks if the carer is in hospital (may stop sooner if there has been a break in caring in the preceding six months)</p> <p>Stops when the disability benefit stops if the cared-for person is in hospital</p>	Carer's Allowance Unit 0345 608 4321
Council Tax Support (Council Tax Reduction)	Usually stops after 52 weeks, but check with your local council for local rules	Contact your council: gov.uk/find-your-local-council

Benefit	What happens?	Contact
Housing Benefit	<p>Usually stops after 52 weeks</p> <p>Any Severe Disability Premium will stop when your disability benefit stops</p> <p>Any Carer Premium will stop eight weeks after your Carer's Allowance stops</p>	<p>Contact your council: gov.uk/find-your-local-council</p>
State Pension	Is not affected	
Pension Credit	<p>Can still be paid, but:</p> <p>Any Severe Disability Premium will stop when your disability benefit stops</p> <p>Any Carer Premium will stop eight weeks after your Carer's Allowance stops</p> <p>Pension Credit housing costs stop after 52 weeks if you have no dependants living in your home</p>	<p>Pension Service helpline 0345 606 0265</p>

If you're a couple

- If you're claiming Council Tax Support, Housing Benefit or Pension Credit housing costs, and have been in hospital

for 52 weeks, you and your partner will be treated as separate claimants. This should revert back to a joint claim after you return home.

For more information about benefits, contact Independent Age (0800 319 6789, independentage.org).

5. Your hospital stay

Getting information and advice in hospital

You should be able to ask the staff caring for you in hospital if you have questions or concerns about your treatment. You should also be given the name of the senior doctor who is responsible for overseeing your care.

If you don't think you're getting the answers you need, you can speak to the hospital's Patient Advice and Liaison Service (PALS).

If you find it difficult to ask questions or understand information and you don't have a relative or friend who can help you, you may be able to get an independent advocate to assist you. For more information, see our factsheet **Independent advocacy** (0800 319 6789, independentage.org).

Your legal rights in hospital

Your rights as an NHS patient are set out in the NHS constitution (nhs.uk/nhsconstitution). This covers things like how you access health services, quality of care, and how to make a complaint if something goes wrong.

The Equality Act 2010 states that you mustn't be treated differently by hospital staff because of your age, sexual orientation, gender or disabilities. If you think this has happened, you can raise these concerns informally with the NHS staff involved in your care or make a formal complaint to the hospital (see chapter 13). You may also wish to contact the Equality Advisory and Support Service (0808 800 0082, equalityadvisoryservice.com) who can advise you on how to take the issue further. They won't be able to represent you in any legal or court action.

Operation cancellations

Operations may sometimes be cancelled. If this happens for non-medical reasons (eg no available beds) on the day you're due to arrive in hospital or after you are in hospital, you should be offered a new operation date within 28 days of your original date. If the date isn't suitable you can choose another date.

If you're not offered another appointment within 28 days, contact your local Clinical Commissioning Group (CCG). You can choose to be treated at another time and hospital of your choice, and the original hospital will pay for this.

If your operation is cancelled before the day you were due to go into hospital, you don't have a right to be offered a new date within 28 days.

Single-sex wards

Hospitals should no longer have mixed-sex general wards. However, in specialist wards where the priority is saving your life – such as an intensive care unit – there may be mixed-sex accommodation. If you're placed in a mixed-sex ward, speak to the ward leader or matron about any concerns you have.

Food

The hospital will provide you with all your meals on the ward and you will be able to choose them in advance. If you have a medical need for a special diet (eg a gluten-free diet) or follow a restricted diet for cultural or religious reasons (eg if you're vegetarian or don't eat pork), this will be made available. There may be other choices, such as reduced fat and reduced salt options or small portions, helpful if you have a small appetite.

You may want to contact the hospital before you are admitted to check that they can provide the food you need. If your admission was unplanned, ask the nurse in charge of the ward what to do, or ask the person who comes round with the menu cards that you fill in to order your food.

It's also important to ask for assistance if you:

- need help filling in the menu cards (eg if you have a visual impairment or can't hold a pen)
- have any physical problems eating (eg if you're finding it hard to sit up, hold cutlery, or chew or swallow food).

The staff on the ward may seem busy, but this shouldn't stop you from asking for help when you need it. A dietician or an occupational therapist will be able to help you if you need a special diet or any help to eat and drink.

If you want any additional food or drink (eg extra fruit, your favourite brand of biscuit or a bottle of soft drink), you can bring this in with you, or ask a friend or relative to bring it for you. Bear in mind, though, that you may not always be allowed to eat it (eg if you have to abstain from food before an operation or test or if you're being asked to eat less sugary food as part of your medical treatment).

Hospital facilities

In larger hospitals, there is usually a shop selling newspapers and groceries and/or a cafe that can be used by staff and patients. Some larger hospitals also have a small bank branch or cash machine. You may want to check this before you go into hospital if you will be staying for a while, especially if you won't have many visitors during your stay.

Most hospital beds are now equipped with a service that provides a personal radio, TV, telephone and answering machine. The radio and answering service are usually free but you have to pay to use the TV and telephone. You can usually buy cards for this from vending machines in the hospital.

Your hospital may also provide wireless internet access (Wi-Fi) for free or for a small charge. You will need to bring your own

device, such as a smart phone, tablet or laptop, to access the internet.

Visiting hours

Visiting hours vary from ward to ward, so you may want to ask about this on the ward if you haven't already been told.

Hospital infections

Most people won't get infections such as MRSA in hospital, but if you want to find out more about what MRSA is and how it can affect people, contact MRSA Action UK (01337 841098, mrsaactionuk.net).

6. Assessments in hospital

Discharge assessments

If it looks like you will need help and support at home, you should be given a discharge assessment while still in hospital. This may be carried out by a hospital discharge coordinator or hospital social worker. This assessment will look at what ongoing care and support you're likely to need. You should be fully involved in this assessment, and given a chance to express your opinions and any concerns.

Following the assessment, you should be given a care plan explaining how your needs will be met once you leave hospital. It should tell you who is managing your care plan and how to get in touch with them. It should also state how you will get the support you need, how your care will be reviewed, and whether you'll have to pay anything towards it.

The assessment may show that you need some specialist services such as rehabilitation, physiotherapy, intermediate care or reablement, as part of your post-hospital care package – see chapter 7 for details.

You shouldn't be discharged from hospital until the support described in your care plan has been put in place, so you are safe from the moment you leave.

Good to know

Your hospital will have a discharge policy which will set out how you or family members will be involved in the discharge process. Ask your hospital discharge coordinator, ward manager or the hospital Patient Advice and Liaison Service (PALS) for a copy.

Care needs assessments

The NHS must notify and cooperate with local councils if they think it will not be safe to discharge a patient unless care and support is in place when they leave hospital.

If you're likely to need ongoing support after you leave hospital, the NHS must tell your local council so that they can carry out a care needs assessment. The NHS must also tell the council when you will be leaving hospital, giving them as much notice as possible. The council must then make sure the care needs assessment happens before you are discharged. If you haven't been given a care needs assessment and think you should have been, you can ask your council to arrange one.

What happens at the care needs assessment?

The care needs assessment looks at whether you are able to carry out certain tasks (referred to as 'achieving care outcomes') – such as being able to wash and dress yourself and get enough food and drink. If you need help to achieve these things, then you should be seen as being unable to achieve those outcomes.

If you can achieve some outcomes without help, but it causes you pain or anxiety, puts your or someone else's safety at risk, or it takes you a lot longer than it would normally take, you should also be assessed as unable to achieve those outcomes.

For more information about care needs assessments, see our factsheet **Assessment and services from your local council** (0800 319 6789, independentage.org).

Do you qualify for council support?

The care needs assessment will show whether your needs meet the national eligibility criteria for access to support. You will qualify if:

- you're unable to achieve two or more of the outcomes that councils assess against, and
- your inability to achieve these outcomes has a 'significant impact' on your overall wellbeing. The council must make a judgement about this.

If your assessment shows that you have eligible care needs, you will qualify for council support. You will be given a separate financial assessment to see whether you will have to pay for any of this support.

If you qualify for council support

You should be given a care and support plan. This is a written statement of:

- your individual assessed care needs – based on which tasks or outcomes you are unable to achieve
- how these care needs will be met (who will meet them, which services will be used, where, when)
- how much money has been allocated to you to meet your care needs (this is called your personal budget). See section three for more information about paying for your care and personal budgets.

Independent sector or private hospitals

If your care has been provided by a private hospital, the hospital discharge process might be different.

Contact the hospital before you're admitted to ask if they have an arrangement with the local council to carry out a care needs assessment before you return home. If they don't, you may want to arrange this yourself before you are admitted to hospital. Contact the social services department of your council. Call Independent Age for advice (0800 319 6789).

7. Free short-term help when you leave hospital

You might be entitled to some free short-term care to help you regain independence when you leave hospital. The type of support you're given will depend on the outcome of your discharge assessment. You could be offered rehabilitation, intermediate care or reablement services.

Rehabilitation

Rehabilitation services aim to help you return home and live there independently after an illness or operation. This should be free of charge if your discharge assessment finds you need it. Services can include:

- physiotherapy to improve your movement and mobility. If you feel you need more treatment than the NHS will offer you, go to your GP or consultant and ask to be referred for more sessions. If you would prefer to see a physiotherapist privately, search for one through the Chartered Society of Physiotherapy (020 7306 6666, csp.org.uk).
- speech and language therapy for any communication or swallowing difficulties
- occupational therapy to help you manage daily activities that become difficult because of illness or disability.

Intermediate care or reablement

Intermediate care (also called reablement) is a programme of care and support, designed to help you:

- retain or regain skills to help you live independently at home
- stay out of hospital in the future

- stay in your own home for longer, rather than needing to move into residential care.

Intermediate care or reablement services should be provided free of charge, generally for up to six weeks.

Community equipment (eg disability aids and minor adaptations to your home) is sometimes provided after you leave hospital. Aids, and minor adaptations up to £1,000 should be provided free of charge. The Disabled Living Foundation has information on mobility equipment and aids (livingmadeeasy.org.uk).

All of these things should be considered as part of your assessment. If you are assessed as being able to benefit from intermediate care or an aid/adaptation, it should be included in your care plan.

To do...

While you're still in hospital, ask the person managing your discharge whether you are being considered for intermediate care and/or a reablement package after hospital discharge.

If this is not offered to you and you think it should have been, call us for advice (0800 319 6789).

8. NHS Continuing Healthcare

NHS Continuing Healthcare is a package of care arranged and funded solely by the NHS. If you have complex health and care needs, you may be assessed as having a 'primary health need' and therefore be eligible for NHS Continuing Healthcare. If you qualify, you will have all your care paid for by the NHS no matter what your income or savings are.

Someone could be considered to have a 'primary health need' if they require:

- specialist care that goes above general nursing care you might receive in your own home or in a nursing home
- a substantial amount of care that is more than what a council could be expected to arrange and fund
- a combination of the above

However, there is no legal definition of 'primary health need' – you'll be given an assessment to work out whether this applies to you. A health professional will decide whether you qualify by looking at the nature, intensity, complexity and unpredictability of particular needs. You don't need a specific health diagnosis (eg dementia) or to need a particular type of care (eg 24-hour care or nursing care) in order to qualify.

If you have a rapidly deteriorating condition and are approaching the end of your life, you might be fast-tracked for NHS Continuing Healthcare care and funding.

Good to know

The assessment for NHS Continuing Healthcare is separate to a discharge assessment or care needs assessment. For more information, see our factsheet **Continuing Healthcare: should the NHS be paying for your care?** (0800 319 6789, independentage.org).

9. Leaving hospital - how it should work

You might have various questions and concerns about leaving hospital, such as:

- What date and time will you be discharged and how will you get home?
- What medicine do you need? Will you be provided with some until you can see your GP when you get home?
- Will the hospital staff contact your GP to let them know what treatment you have had, the outcome of it and what follow-up appointments you need at the hospital or GP surgery?

You shouldn't be discharged until:

- a doctor decides you're well enough
- you've been given a discharge assessment if it looks like you'll need support when you leave hospital
- you've been given a care plan explaining how your needs (as worked out in the assessment) will be met when you leave hospital
- the care and support described in your plan has been put into place so you can manage when you return home.

Make sure your plan says who will provide your care and how you can contact them. If you have any concerns or queries, discuss them with the hospital social worker, consultant or ward manager.

Good to know

You shouldn't be pressured into being discharged to somewhere you don't want to go, such as a care home. If you have the mental capacity to make a decision about your care and accommodation, you have a right to refuse such a

placement. If you are pressured to move, contact an advice service or independent advocate for more support with this.

Ask for further assistance in any of the following situations:

- you're being discharged from hospital before you think you're well enough to go home
- you haven't had a discharge assessment or care needs assessment but think you will need some help when you return home
- you don't think you'll be able to cope at home, even with support that has been organised for you at home
- you're ready to leave hospital but your discharge is being delayed, eg because care, aids or adaptations you need have not been organised
- you're being pressured to move somewhere you don't want to, such as a care home.

Contact Independent Age for advice (0800 319 6789, advice@independentage.org).

Transport to get you home

If you need transport to get you home from hospital, the hospital should make sure that your relative, friend or the hospital transport can take you. If you have a medical need for transport and have no other means of getting home, you may be able to use Patient Transport Services. Talk to the person coordinating your discharge if you think you might qualify for this.

Help paying travel costs

If you're on a low income or get benefits such as Guarantee Pension Credit, you may be able to get help with travel costs for follow-up and future appointments through the NHS Low Income Scheme. Get further information and an application

form (HC1) from the hospital or your GP or pharmacist, or download the form from nhs.uk/NHSEngland/Healthcosts/Pages/nhs-low-income-scheme.aspx.

Help from charities

Some charities can offer escorted transport home from hospital. To find out if there is a volunteer transport scheme in your local area, contact the British Red Cross (0344 871 11 11, redcross.org.uk) or the Royal Voluntary Service (0845 608 0122, royalvoluntaryservice.org.uk).

10. Going back home - what help is available?

Help from your local council

You may have received some short-term support from the NHS when you left hospital, such as rehabilitation services. If you need help in the longer term, this will usually be arranged by your council's adult social services department following a care needs assessment (see chapter 6). Your care needs assessment should establish what support you need.

If your income and savings are above a certain level, you will have to pay towards your care costs. If you qualify for council support, the council will carry out a financial assessment to establish what you should pay.

For more information, see our factsheets **Assessment and care services from your local council** and **Using direct payments and personal budgets** (0800 319 6789, independentage.org).

Adaptations to your home

If you find it difficult to get around your home after leaving hospital, making some adaptations could help. For example, you could install hand rails to help you get up the stairs, or a ramp for a wheelchair. Ask your local adult social services department to refer you to an occupational therapist who will assess what adaptations could help you. Adaptations are free if they cost under £1,000. If you need larger adaptations, you might be able to apply for a Disabled Facilities Grant – this is means-tested. For more information, see our factsheets **Adapting your home to stay independent** and **Choosing disability equipment** (0800 319 6789, independentage.org).

Private care arrangements

If you're paying for your own care, or if you have direct payments and are arranging your own care services, you may want to consider contacting the United Kingdom Home Care Association (020 8661 8188, ukhca.co.uk). They can direct you to local private care agencies.

Our factsheet **Home care agencies: what to look for** (0800 319 6789, independentage.org) has information on choosing care providers.

Good to know

If you qualify for care services from the council, but have been assessed as able to pay for your own care, the council still has a duty to help you to arrange services if you're unable to do this yourself and have nobody else able or willing to arrange the support you need. They may charge you an administration fee for doing this.

Other support from voluntary organisations

Your local Age UK (0800 169 6565, ageuk.org.uk) or Royal Voluntary Service (0845 608 0122, royalvoluntaryservice.org.uk) may provide you with support to stay independent at home when you return from hospital. For example, a cleaning service, gardening scheme or shopping assistance. Your local council should also be able to give you details of other local organisations that provide such support. They may charge for some of the services they provide.

For information on the types of services that are available in most areas, see our factsheet **Help at home: what may be available in your local area** (0800 319 6789, independentage.org).

Welcome Home service

Some local organisations, such as Age UK (0800 169 6565, ageuk.org.uk), British Red Cross (0344 871 1111, redcross.org.uk) or the Royal Voluntary Service (0845 608 0122, royalvoluntaryservice.org.uk) provide a Welcome Home or Home from Hospital service. This might involve someone visiting you at home for a short time after you're discharged from hospital to help with things like shopping, collecting pensions or picking up prescriptions.

Benefits

If you have been discharged from hospital and now have difficulties with carrying out daily living tasks or getting around, you may qualify for a disability benefit:

- Attendance Allowance (AA) if you're 65 or over
- Personal Independence Payment (PIP) if you're under 65.

To qualify, you must have been experiencing the difficulties for the past three months for PIP or six months for AA.

For more information, see our factsheets: **Disability benefits: Attendance Allowance** and **Disability benefits: Personal Independence Payment and Disability Living Allowance** (0800 319 6789, independentage.org).

If you already receive any benefits, tell the relevant benefits office as soon as you're discharged from hospital so your benefit payments restart if they were suspended during your hospital stay (see chapter 4).

To do...

Call us for a benefits check to see what you could claim (0800 319 6789, independentage.org).

For more information about help at home

You can find a wide range of information in our advice guide **Extra help at home**. Call 0800 319 6789 to order your free copy or download it from independentage.org/extra-help-at-home.

11. Moving to another home

Your discharge assessment or care needs assessment will look at whether:

- you will be able to stay in your own home, with or without extra help
- you need to move to more accessible housing, such as sheltered accommodation or extra-care housing
- you need to move into a care home.

Your views, wishes and rights should be taken into account. You cannot be forced to move from your home if you do not want to, as long as you have the mental capacity to refuse specific services and understand that decision.

If you think you'd like to move somewhere that better suits your needs, mention this at the assessment.

For more information on housing options, see our factsheet **Housing options in later life** (0800 319 6789, independentage.org).

12. Making a complaint about hospital care

If you don't think you have received the right quality or type of care in hospital, you may wish to make a complaint. The complaints process can help you find out what went wrong, get an explanation and apology or make sure the problem doesn't happen again.

Sometimes it's enough just to have an informal conversation with the staff providing your care to resolve the problem quickly. However, if you're not happy with the response or the problem continues, you may want to make a formal complaint.

You can get support from your local patient advice and liaison services (PALS) if your complaint is about an NHS hospital.

You should receive acknowledgement of any formal complaint within three days, which will also tell you:

- what will happen next
- how long the initial investigation will take
- who will contact you.

For more information, see our factsheet **Complaints about care and health services** (0800 319 6789, independentage.org). This factsheet also explains how you can get support to make your complaint.

13. Useful contacts

For questions or concerns when you're in hospital

The hospital Patient Advice and Liaison Service (PALS) – ask on your ward or at the hospital reception.

For help with transport and settling back at home after a hospital stay

British Red Cross (0344 871 11 11, redcross.org.uk) or Royal Voluntary Service (0845 608 0122, royalvoluntaryservice.org.uk).

To find a local private home care agency

United Kingdom Home Care Association (020 8661 8188, ukhca.co.uk)

This factsheet has been put together by Independent Age's expert advisers. It is not a full explanation of the law and is aimed at people aged over 60.

If you need this information in an alternative format (such as large-print or audio cd), call us on 0800 319 6789 or email advice@independentage.org.

Tell us what you think

We'd love to hear what you think of our publications. Please write to us at the address below, phone us on 020 7605 4294 or email advice@independentage.org.

We will use your feedback to help us plan for changes to our publications in the future. Thank you.

Supporting Independent Age

If you have found this information helpful and would like to support our work, there are lots of ways you can help:

- get fit – run, walk or cycle in aid of Independent Age
- take part in our annual raffle
- donate in memory of a loved one
- remember Independent Age in your will and benefit from our Free Wills offer to supporters.

If you would like to donate or raise money in aid of Independent Age, please visit our website, email supporters@independentage.org or call our fundraising team on 020 7605 4288.