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stakeholder community to transform how rehabilitation is currently delivered.

Impact: This project has the potential to transform how ACPs and the physiotherapy workforce deliver rehabilitation. In order for widespread adoption of this approach, this new model and ways of working will require further piloting and evaluating.

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Hospital discharge processes: Policy changes in England in response to COVID-19



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Keywords: Hospital discharge; Discharge to assess; Policy

Purpose: Discharging an older adult from hospital is complex process, that represents a transition in patients' care pathway from inpatient care to support in the community. Discharge to assess models of care aims to expand the services that can be provided in the community to create opportunities to discharge patients from hospital sooner. The COVID-19 pandemic thrust hospital discharge processes to the forefront of national political priorities. In response the COVID-19 Hospital Discharge Service Requirements (2020) mandated that all NHS trusts should use a discharge to assess model and provided additional funding to support new or extended out-of-hospital health and social care support packages.

This research has two key questions that it aims to answer;

- 1. How have hospital discharge processes changed in response to the COVID-19 pandemic?
- 2. How are notions of sustainability represented in the new procedures?

Methods: A qualitative comparative policy document analysis was completed of English government documents relating to hospital discharge processes, released prior to, and following the COVID-19 pandemic. The documents were coded and thematically analysed using framework analysis.

Results: Comparing the policy approaches to hospital discharge processes before and after COVID-19 demonstrated that the anticipated pressures on acute hospitals following COVID-19 led to changes in policy aiming to accelerate the implementation of a discharge to assess model across the UK.

Command-and-control leadership style was evident, with prescriptive actions for multiple stakeholders and regular reporting to maintain oversight of the performance of the system. In contrast, pre COVID-19 policies aimed to improve

discharge processes through incentivising local systems to develop solutions.

Underlying cultures of hospital discharge, and day-to-day processes remained predominately the same as pre COVID-19 convictions. Changes were made to remove barriers to rapid discharge, including increasing social care capacity and removing patient choice.

Conclusion(s): Hospital Discharge process have historically been problematic, exposing the disjointed care older people face when they require support from multiple agencies. Health policies have made some progress to improving hospital discharge through system-wide transformations towards integrated care. This study identifies the complexities policy makers face, considering how national agendas can create meaningful change on the ground and the sometimes unpredictable consequences of such changes. Emerging from the COVID-19 emergency period, hospital discharge policy needs to engage more meaningfully with local stakeholders and patient and carer perspectives to avoid the problems of ideal-driven top-down policy.

This research is merely a starting point to understanding the impact of COVID-19 on hospital discharge processes. Further research to understand the implementation and impact of this policy will add a richer narrative to some of the concepts discussed in this research.

Impact: This research considers how policy can used use to accelerate change in models of care delivery. Moving forwards, a participatory approach to policy making may help contextualise hospital discharge planning policy in preparation for future challenges such as managing winter pressures in addition to the pressures from COVID-19.

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Implementation and evaluation of a physiotherapy intervention within multi-modal prehabilitation for people with ovarian cancer during pre-operative neo-adjuvant chemotherapy treatment



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Keywords: Prehabilitation; Oncology; Physiotherapy **Purpose:** Pre-operative rehabilitation (Prehabilitation) is increasingly gaining recognition for improving post-operative outcomes by reducing the risk of potential