

Going into hospital

Things to consider before and during your stay and when preparing for discharge

Health & wellbeing



*Age UK is the new force combining
Age Concern and Help the Aged.*

*With almost 120 years of combined
history to draw on, we are bringing
together our talents, services
and solutions to do more to enrich
the lives of people in later life.*

*The Age UK family includes Age Cymru,
Age NI and Age Scotland. There are
also more than 170 local Age UKs.*

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This guide was first published in April 2010 and updated in September 2011. Every effort has been made to ensure that the information contained in this guide is correct. However, things do change, so it is always a good idea to seek expert advice on your personal situation.

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Introduction

A hospital stay can be a difficult time both for you and for those close to you.

This guide aims to help make preparations a little easier. It explains the steps that lead up to planned and emergency admissions to hospital, the quality of care you should expect, and what should happen when it is time for you to leave.

Throughout this guide you will find suggestions for organisations that can offer further information and advice about your options. Their contact details can be found in the ‘Useful organisations’ section (see pages 27–34). Contact details for organisations near you can usually be found in your local phone book. If you have difficulty finding them, your local Age UK should be able to help (see page 27).

The information given in this guide is applicable in England, Wales and Scotland. Different arrangements apply in Northern Ireland. Readers in Northern Ireland should contact Age NI for further information (see page 27).

Key



This symbol indicates where information differs for Scotland and Wales.



This symbol indicates who to contact for the next steps you need to take.

Arranging a hospital appointment

You and your doctor (GP) may decide that you should see a specialist at a hospital. Your GP can refer you to a suitable hospital. If you live in England, you have the right to choose a hospital offering suitable treatment under the Choose and Book system (see page 30), unless you have suspected cancer. In this case, your GP will refer you to a specialist centre as soon as possible.

Choose and Book means that you can choose where and when you book your first appointment, either locally or at another location in England. Your GP should be able to help explain the choices available to you.

The following questions may help you decide which hospital to choose.

- Do you know someone who has been treated there? What was their opinion?
- How quickly can you be seen?
- How easy is it to get there by public transport or car?
- Would the location and visiting times be convenient for visitors?
- Is there adequate, affordable car parking?

To book an appointment, you can call Choose and Book (see page 30), book online or, in some cases, contact the hospital directly.

You should start your treatment within 18 weeks of the date you were referred by your GP, though there may be exceptions, such as if you are not medically fit to be treated.

- i** In Scotland, from December 2011, the maximum time will be 18 weeks; in Wales, the maximum time is 26 weeks.

what next?

If your GP is considering a referral, ask about 'Choose and Book'. Your GP can help you find a suitable hospital offering the treatment you need. You can also visit NHS Choices at www.nhs.uk to look at hospitals across England and compare current waiting times. You can also see what patients say about each hospital. In Scotland, visit www.nhsinform.co.uk for information about hospitals; in Wales, visit www.wales.nhs.uk



Tests and treatment as a day patient

Not all tests and treatments require a stay in hospital. Some are offered on a day-patient basis, including scans, bladder, bowel or digestive system tests, and operations to remove cataracts. However, there may be things you must or must not do in the 24 hours before and after. You may also need someone with you afterwards, at least for the first night.

what next?

Hospitals usually provide an information pack. Check that this will arrive in plenty of time to allow you to make arrangements.

Emergency admission to hospital

If you have a fall, a suspected heart attack or a stroke, you may be taken to a hospital A&E department.

Once you have been assessed you may be:

- treated but not admitted if appropriate support can be provided at home through an intermediate care package (see page 19)
- moved to a Clinical Decisions Unit (CDU) for your condition to be monitored or tests completed before deciding whether you need to be admitted
- admitted to a medical or surgical ward.

what next?

If you live alone and will be in hospital for some time, ask someone to check that your home is secure and cancel daily deliveries such as milk.

If you have had several falls recently, ask A&E staff or your GP for a referral to your local falls prevention service. For advice on preventing falls and to find out what to expect from the falls prevention service, see our free guide *Staying steady*.

Hospital standards

There are certain standards that hospitals must meet. These standards cover not only the quality of medical care, but also hospital food, the safety and cleanliness of hospital premises, and how well privacy and dignity are respected.

what next?

Ask the Care Quality Commission (see page 28) for its free guide *What standards to expect from the regulation of your NHS hospital*. This explains what they look for when reviewing and monitoring a hospital's performance.

-  In Wales, ask the Healthcare Inspectorate Wales (see page 31) for a copy of *Doing Well, Doing Better: Standards for Health Services in Wales*. In Scotland read the Healthcare Environment Inspectorate's *Healthcare Associated Infection Standards* (see page 31).

Eating and drinking

Having enough to eat and drink when you're in hospital is an important part of your recovery. Let staff know if you:

- need help filling in your menu choices
- find menu choices unsuitable due to allergies, cultural or personal preferences
- find it hard to reach your meal or drink
- have difficulty cutting your food or opening cartons
- prefer smaller meals with between-meal snacks
- have trouble chewing or swallowing.

As part of an admission assessment, you may be weighed on arrival and regularly afterwards. If there are concerns, an appropriate nutrition plan should be put in place.

what next?

Speak to a doctor or nurse in charge of the ward as soon as possible if you have special requirements or problems accessing the menu. Visit our website to find out more about our Hungry to Be Heard campaign and the seven steps that Age UK believes will help to ensure that people get the help they need to eat and drink while in hospital (see page 27).

Dignity and respect

You have a right to feel respected when you are in hospital. Staff can show respect by:

- asking how you would like to be addressed and speaking in a courteous and friendly way
- ensuring that all staff are aware and respond sensitively if you have hearing or visual difficulties or memory problems
- not treating you as ‘invisible’ when your bed is visited on a ward round
- ensuring that medical matters are discussed with you so that other people cannot hear
- responding promptly to requests for help to go to the toilet and to return to your bed
- ensuring that curtains around the bed are secure when you are being examined or using a commode.

The Government also wants all hospitals to remove mixed-sex wards. There is a possibility that you will be on a mixed ward if the hospital thinks that it is in your best interests or if it reflects your personal choice. If you are treated on a mixed-sex ward, staff should make sure that your privacy is respected at all times.

what next?

If you have any concerns about the way you are being treated, raise them with the nurse in charge of the ward. See the section on ‘Problems and complaints’ (page 25) to find out about making a formal complaint.

'I can't see very well and often wasn't sure what I'd ordered to eat. Since I told them, someone helps me fill in the menu. The assistant who brings my meal makes sure I can reach it. If I ask her, she'll tell me what I ordered and where different foods are on the plate.'

Standards of cleanliness

You may be worried about the possibility of contracting MRSA or *C. difficile* while in hospital. Hospitals are bound by their government's code of practice, which lists the criteria they must meet to prevent and manage these infections.

Isolating patients who have an infection and encouraging staff and visitors to wash their hands thoroughly are important ways to stop infection spreading between patients.

what next?



To find out how well each hospital in England meets the standards, look at the Care Reports on the Care Quality Commission website (see page 28). In Wales, standards are monitored by the Healthcare Inspectorate Wales (see page 31). In Scotland, standards are monitored by Healthcare Improvement Scotland (see page 31).

Consent and right to refuse treatment

You have the right to a clear explanation of any proposed treatment or investigation, including the risks and benefits, before you agree to it and sign a consent form. You have the right to refuse treatment as long as you understand what the consequences might be, even if others consider your decision unwise.

In England and Wales, the Mental Capacity Act 2005 applies when you lack the capacity to make a particular decision. If you are unable to consent to the proposed treatment, for example, if you are unconscious or lack mental capacity to do so because of dementia, a doctor must act in your best interests. It is not possible for a relative to give consent on your behalf, but the doctor is expected to consult relatives about your wishes.

If serious medical treatment is proposed and you have no family or friends to support you, medical staff must appoint an Independent Mental Capacity Advocate (IMCA) to represent your interests.

To find out about planning ahead for a time when you might lack the mental capacity to make decisions, see our guide *Powers of attorney*.




In Scotland, the Adults with Incapacity (Scotland) Act 2000 (as amended) applies. Find out more by contacting the Office of the Public Guardian (Scotland) (see page 34).

Travel to hospital

If your condition or disability makes using public transport or getting in and out of a car difficult, you may be eligible for non-emergency NHS transport. There may also be a voluntary driver scheme that can help. Certain cancer charities, such as Macmillan Cancer Support (see page 32), can help if travel costs for frequent treatment cause financial difficulties.

Parking can be expensive, but some hospital car parks offer special rates for people receiving frequent treatment.


-  The Welsh Assembly is in the process of phasing out parking fees at NHS hospitals in Wales.

If you receive the Guarantee Credit part of Pension Credit you can get help with reasonable travel costs to hospital, including parking. Ask for details about how to claim back travel costs before your appointment. Otherwise, if you are on a low income but aren't eligible for the Guarantee Credit part of Pension Credit, you may be eligible for help towards travel costs through the NHS Low Income scheme.

If you are on a low income and visiting a close relative or friend you may be eligible for help from the Social Fund. This is the only government scheme that helps hospital visitors with travel costs.

what next?

For information on the NHS Low Income Scheme, call Help with Health Costs (see page 32). In Wales visit www.wales.nhs.uk

-  To find out more, see our factsheet *Help with health costs*. For more information about the Social Fund, see our factsheet *The Social Fund*.

Managing your discharge from hospital

All hospitals should be able to provide information on their discharge process. Most importantly, you should be told who is responsible. A hospital social worker and possibly a discharge co-ordination team are likely to be involved.

If you are having planned treatment, you may be invited for a pre-admission check. This provides an ideal opportunity to discuss any support that you are likely to need later.

If you do not have such a check or you are admitted in an emergency, planning for your discharge should begin as soon as possible after admission. Arrangements will vary depending on your needs and on whether you can go home, or whether you may need alternative accommodation as a temporary or permanent option.

You are entitled to assessments by appropriate health and social care professionals to decide on what help you may need on leaving hospital. They should look at your health and social care needs, as well as the emotional and social side of your life. Once your needs have been assessed, staff should discuss the options for meeting them. For more detailed information, see our factsheet *Local authority assessment for community care services*.

The key steps in the discharge process are to:

- decide whether the NHS will remain responsible for your care (see page 15)
- assess what help you might need when you leave
- assess the needs of your carer, if you have one (see page 15)
- decide whether you would benefit from intermediate care (see page 19) or reablement (see page 20)
- draw up a care plan (see page 18)
- decide who will be paying for your care (see page 21)
- look at practical issues on leaving hospital (see page 22)
- review your care plan after an agreed time (see page 24).

If you are only likely to need help for a week or two, perhaps with shopping and light housework, you will find more information on page 22.

**what
next?**

See our free factsheet *Hospital discharge arrangements* to find out more.

Assessing the needs of you and your carer

The support you need will depend on your physical and mental health and your social care needs when you're ready to leave hospital. This might be help with things like personal care or preparing and eating meals, or NHS support, for example, from a nurse or physiotherapist.

If you have significant physical or mental health needs as well as personal care needs, staff should follow the process described in the National Framework for NHS Continuing Healthcare to decide whether the NHS remains responsible for your care. The care can be provided in a care home, your own home or other suitable location.

If you're not eligible for NHS continuing healthcare but have significant health and social care needs, you should be assessed by appropriate health and social care professionals.

Patients and carers may have different needs, so as well as contributing, with your permission, to your assessment, your carer can ask for a separate assessment. Hospital staff should not take any support from your carer for granted. See our free guide *Advice for carers* for more information.

- i** You could also contact Carers UK, Carers Scotland or Carers Direct (see page 29).

what next?

See our free factsheet *NHS continuing healthcare and NHS-funded nursing care* to find out more.

- i** In Wales, see Age Cymru's factsheet *NHS continuing healthcare and NHS-funded nursing care in Wales*.
- i** In Scotland, see Age Scotland's factsheet *Hospital discharge arrangements and NHS continuing health care services*.

‘I was so bewildered after my fall, I can’t believe I’ve come so far. I felt really low but the staff gave me so much confidence.’



Mrs Patterson, an active 83-year-old, tripped and fell while out shopping.

‘When I fell, an ambulance was called and I was taken to the A&E department at the local hospital. It turned out I’d broken my hip. They kept me in and I had a hip replacement operation. The operation went well and I was out of bed the next day and taking a few steps.

‘After a week, I moved to the community hospital for intermediate care. The occupational therapist wanted to see if I could move from walking with crutches to using a frame and then a stick, in three weeks.

‘The care assistants took me home to see how I’d cope – particularly with the stairs, as my flat is on the first floor. I reached my targets and was ready to go home at the end of the three weeks.

‘I was so bewildered after my fall, I can’t believe I’ve come so far. I felt really low but the staff gave me so much confidence. They’ve given me a trolley on wheels so I can move things safely. I wouldn’t carry hot drinks myself, otherwise, and I’ve no one to carry things for me. I’ve got a commode in my bedroom for night-time. I don’t want to stumble on my way to the bathroom.’



Drawing up a care plan

To decide what help you could receive on leaving hospital, the needs identified in your assessment are compared with your local authority's eligibility criteria. Your care plan will show how your eligible needs, and any other needs, will be met.

You may need:

- help with personal care – getting up and dressed, bathing
- help with eating well, such as meals on wheels, or lunch at a day centre
- to make your home safer and easier to live in, for example with aids and adaptations
- a community alarm so that you can call for help if needed
- services from community health staff
- an opportunity to meet people and socialise, such as a place at a day centre
- a move to a more manageable property such as sheltered housing, or extra-care sheltered housing.

Your needs when you're discharged might suggest that a place in a care home is a serious option. Staff should seriously consider whether intermediate care or reablement services would allow you to continue living in your own home first (see pages 19–20).

If you're unhappy with your proposed care plan, talk to the person responsible for your discharge. If you're still unhappy, you can make a complaint (see page 25).

what next?

For more information, see our free guides *Care at home* and *Care homes* and free factsheets *Finding help at home* and *Finding care home accommodation*. Contact your local authority social services department (social work department in Scotland) for information about its services or complaints procedure. See page 21 for information on who should pay for care services.



Intermediate care

Intermediate care can include health and social care support. It may be offered following a stay in hospital to help your recovery once you return home or to find out whether, with support in place, you can manage at home.



Intermediate care can last for up to six weeks (four weeks in Scotland) and is provided free in England and Wales.

Intermediate care can also be offered if providing prompt support could mean avoiding admission to hospital. You can receive intermediate care services at home, in a day hospital, community hospital or care home.

When your intermediate care finishes, you should have an assessment to see whether you need any ongoing care or health services.

Reablement services

Reablement services help you to learn or relearn skills for daily living, such as washing or dressing, so that you are confident doing them yourself. The aim is to help you stay at home, with or without a long-term care package. The service generally runs for a fixed period and is given in your own home by trained carers. At the end of this period, your needs should be reassessed.

- i** If reablement services fall into the definition of intermediate care, they will be provided free of charge for up to six weeks (four weeks in Scotland).

what next?

If you, a friend or family member, could benefit from intermediate care or reablement, speak to the person responsible for your discharge. See our free factsheet


- i** *Intermediate care for more information.* In Wales, see Age Cymru's factsheet *Intermediate care in Wales.*

Before you leave hospital check whether your medicines have been changed and that you have a good supply to take home.




Deciding who should pay for your care


Local authorities can charge for the services that they provide. There is one system for charging for care in your own home and a different system if you are in a care home. You may be able to get financial assistance from the local authority depending on the savings, property, investments and income that you have.

-  If you are eligible you can receive help directly from social services (social work department in Scotland), or use a personal budget to arrange your own care at home in England and Wales. See our free guide *Personal budgets* to find out more. In Wales, people who receive care in their own home from the local authority will pay a maximum of £50 a week.

If, following an assessment of your financial situation, you have to pay for your personal care at home or in a care home, see our guides *Care at home* and *Care homes* to find out more.

-  In Scotland, some financial assistance is available through the Free Personal Care system. For more information, see Age Scotland's factsheet *Local authority charging procedures for care homes*.

what next?

-  See our free factsheets *Paying for care and support at home* and *Paying for permanent residential care* for more detailed information. In Wales, see Age Cymru's factsheet *Paying for permanent residential care in Wales*. Similar factsheets with information relevant for Scotland are available from Age Scotland.

Arranging practical help at home after a hospital stay

You may only need help with domestic tasks for a few weeks while you recover, particularly if you live alone. The person responsible for your discharge should identify what you need and help you to make arrangements.

Your local Age UK may have a representative based at the hospital who can explain what services it can offer you when you go home, such as 'home from hospital support' or a 'hospital discharge service'. The service may help to get your home ready for your return and assist with non-medical tasks such as shopping and light housework. You can also pay home care agencies for help with domestic tasks.

what next?

Contact your local Age UK to see what support is available. Your local authority or the regulatory authority for care services in your nation has details of agencies that provide home care. Contact details are in the 'Useful organisations' section.

Practical issues before leaving hospital

If the hospital believes you are ready for discharge, it is entitled to discharge you. However, you should not be sent home until the agreed support is in place, services are ready to start, any adaptations have been made to your home and any appropriate equipment has been delivered. Your carers should also be given adequate notice of the date and time of your discharge.

The person responsible for your discharge should ensure that:

- you have clothes to go home in and front-door keys
- you have enough money for your short-term needs
- there is someone collecting you, or a taxi or hospital transport is booked
- if your medicines have been changed, you and/or your carer understand the changes and you have a supply of medicines to take home
- you and/or your carer have been shown how to use any new equipment or aids and can use them confidently
- if you need incontinence products, a supply has been arranged
- your GP has been informed of your discharge and any help you need from a district nurse has been arranged
- you know who to contact about your care plan or services.

If you are moving to a care home, the home should have the date and time of your discharge and a copy of your care plan. If the care home of your choice does not have a vacancy, you could be asked to make a temporary move to another care home if this will not be too disruptive for you.

Reviewing your care plan

If you go home and social services have arranged support for you, they must check to make sure that it still suits your needs within 14 days of your return. After this, your care plan should be reviewed at least once a year, or more often as appropriate.

If, at any time, you find that the services are not suitable or adequate, you should contact social services and ask for a review of your care plan.

Benefits while in hospital

Your State Pension does not change, no matter how long you are in hospital, but Attendance Allowance (AA) and Disability Living Allowance (DLA) are suspended after 28 days. Pension Credit, Housing Benefit and Council Tax Benefit can be affected if you lose AA or DLA. Carer's Allowance can be affected if you or the person you care for goes into hospital. You need to let the office that pays your benefits know when you go into hospital and when you are discharged.

what next?

Call the office that pays your disability benefit to let them know when you're admitted and discharged. Its details will be on your award letter.

Problems and complaints

If you have any problems, try to raise them at the time. If this does not resolve them, staff or the hospital PALS (see page 34) can tell you who to approach if you wish to make a formal complaint.

ICAS (Independent Complaints Advocacy Service) can support you when making a formal complaint in England (see page 34, under Patient Advice and Liaison Service).

- i** Citizens Advice Scotland runs a service called Independent Advice and Support Service (IASS) which can help with making a complaint about health care services in Scotland. In Wales, contact the Complaints Advocacy Service run by your local Community Health Council (see page 30).

Both the NHS and local authorities have a complaints procedure. If your complaint is about the NHS or social services, you need to complain directly to the provider of the service that you are having an issue with. In England and Wales, if your complaint is about both NHS and social services, you need only make one complaint covering all your issues to either the NHS or the local authority.

what next?

For information about making a complaint in England, see our free factsheets *Resolving problems and making a complaint about NHS care* and *How to resolve problems and make a complaint about the local authority*.

- i** In Wales, see Age Cymru's factsheet *Resolving problems and making a complaint about NHS care in Wales*. In Scotland, read the factsheet *Making a complaint about the NHS* from Health Rights Information Scotland (see page 31).

You should not be sent home until the agreed support is in place, services are ready to start, any adaptations have been made to your home and any appropriate equipment has been delivered.



Useful organisations

Age UK

Age UK is the new force combining Age Concern and Help the Aged. We provide advice and information for people in later life through our Age UK Advice line, publications and online.

Age UK Advice: 0800 169 65 65
www.ageuk.org.uk

Call Age UK Advice to find out whether there is a local Age UK near you, and to order free copies of our information guides and factsheets.

In Wales, contact

Age Cymru: 0800 169 65 65
www.agecymru.org.uk

In Northern Ireland, contact

Age NI: 0808 808 7575
www.ageni.org

In Scotland, contact

Age Scotland: 0845 125 9732
www.agescotland.org.uk

Board of Community Health Councils

If you live in Wales, contact them for details of your nearest NHS Complaints Advocacy Service.

Tel: 0845 644 7814.

www.wales.nhs.uk/sitesplus/899

Care and Social Services Inspectorate Wales

The national regulatory body of care homes in Wales, which can provide inspection reports and care standards for care homes.

4–5 Charnwood Court
Heol Billingsley
Parc Nantgarw
Nantgarw CF15 7QZ

Tel: 01443 848 450

Email: cssiw@wales.gsi.gov.uk

www.cssiw.org.uk

Care Quality Commission (CQC)

Responsible for the registration and inspection of social care services in England. You can request copies of their inspection reports on care homes and domestic care agencies or read them online.

Citygate
Gallowgate
Newcastle upon Tyne NE1 4PA

Tel: 03000 61 61 61

Email: enquiries@cqc.org.uk

www.cqc.org.uk

Carers Direct

Help and support for carers.

PO Box 4338
Manchester M61 0BY

Tel: 0808 802 0202 (England only)
www.nhs.uk/Carersdirect
www.carersdirectenquiry.nhs.uk (online enquiries)

Carers UK

Provides information and support for carers.

20 Great Dover Street
London SE1 4LX

Tel: 0808 808 7777
www.carersuk.org

In Scotland, contact **Carers Scotland**

The Cottage
21 Pearce Street
Glasgow G51 3UT

Tel: 0141 445 3070
www.carersuk.org/scotland

In Wales, contact **Carers Wales**

River House
Ynys Bridge Court
Cardiff CF15 9SS

Tel: 029 2081 1370
www.carersuk.org/wales

Choose and Book

Allows you to choose your hospital or clinic and book an appointment with a specialist if your GP refers you. You can make your appointment through the NHS Appointments Line.

Tel: 0345 608 8888
www.chooseandbook.nhs.uk

Community Health Councils (CHCs)

Provides advice and support if you wish to make a complaint about NHS services in Wales.

2nd Floor
33–35 Cathedral Road
Cardiff CF11 9HB

Tel: 0845 644 7814
Email: enquiries@waleschc.org.uk
www.wales.nhs.uk/sitesplus/899

Elderly Accommodation Counsel

Provides free advice to older people on their housing options and maintains a comprehensive database of UK care homes.

3rd Floor
89 Albert Embankment
London SE1 7TP

Tel: 0800 377 7070
Email: info@firststopadvice.org.uk
www.firststopcareadvice.org.uk

Healthcare Environment Inspectorate/ Healthcare Improvement Scotland

Inspects healthcare services and supports healthcare providers in Scotland.

Elliott House
8–10 Hillside Crescent
Edinburgh EH7 5EA

Tel: 0131 623 4300
www.healthcareimprovementscotland.org

Healthcare Inspectorate Wales

Independent inspectorate and regulator of all healthcare in Wales.

Bevan House
Caerphilly Business Park
Van Road
Caerphilly CF83 3ED

Tel: 029 2092 8850
Email: hiw@wales.gsi.gov.uk
www.hiw.org.uk

Health Rights Information Scotland

Provides information about patients' health rights and health services in Scotland.

Consumer Focus Scotland
Royal Exchange House
100 Queen Street
Glasgow G1 3DN

Tel: 0141 226 5261
Email: hris@consumerfocus.org.uk
www.hris.org.uk

Help with Health Costs

Contact to request an application form (HC1) if you think you might be eligible for help with travel costs through the NHS Low Income Scheme. Information is available in different formats.

Tel: 0845 850 1166

www.nhsbsa.nhs.uk/HealthCosts/1136.aspx

Macmillan Cancer Support

Provides practical, medical and financial support for people affected by cancer. It can provide financial support for travel costs to hospital in some circumstances.

89 Albert Embankment
London SE1 7UQ

Tel: 0808 808 0000

www.macmillan.org.uk

NHS Choices

A comprehensive information service to help you take control of your healthcare; website includes an A–Z health dictionary, a symptom checker, a list of common health questions and useful contacts.

www.nhs.uk

In Wales, visit www.wales.nhs.uk

NHS Direct

Call or look on the website for information on a particular medical condition, contact details for support groups, a list of local GPs or details of your local PALS.

Tel: 0845 4647

www.nhsdirect.nhs.uk

In Scotland, if your doctor's surgery is closed then contact NHS 24 on 08454 24 24 24 or visit www.nhs24.com

NHS Inform

Health information and advice for people in Scotland.

Tel: 0800 22 44 88

www.nhsinform.co.uk

Office of the Public Guardian

Provides information on the Mental Capacity Act 2005 and produces two booklets called *Making Decisions*, one for individuals (code OPG601) and another for families and carers (code OPG602). Download a copy from the website.

Tel: 0300 456 0300

www.justice.gov.uk

Visit www.direct.gov.uk and click on 'Government, citizens and rights' to find out more about the Mental Capacity Act.

Office of the Public Guardian Scotland

Provides information on the Adults with Incapacity (Scotland) Act 2000 (as amended) and provides guidance and advice on powers of attorney and guardianship orders in Scotland.

Tel: 01324 678 300

www.publicguardian-scotland.gov.uk

Patient Advice and Liaison Service (PALS)

PALS provides information, advice and support to users of health services in England. They can also put you in contact with your local Independent Complaints Advocacy Service (ICAS) who can help you make a complaint about the NHS. In Wales, there are Complaints Advocacy Services run by local Community Health Councils. To find your nearest PALS or Complaints Advocacy Service contact NHS Direct.

Tel: 0845 46 47 (NHS Direct)

www.pals.nhs.uk

Social Care and Social Work Improvement Scotland

Independent scrutiny and regulatory body for care services in Scotland.

Tel: 0845 600 9527

www.scswis.com

Can you help Age UK?

Please complete the donation form below with a gift of whatever you can afford and return to: Age UK, FREEPOST LON13041, PO Box 203, London N1 9BR. Alternatively, you can phone 0800 169 87 87 or visit www.ageuk.org.uk/donate. If you prefer, you can donate directly to one of our national or local partners. Thank you.

Personal details

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I would like to make a gift of: £

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Expiry date	<input type="text"/>	/	<input type="text"/>	Issue no. (Maestro only)	<input type="text"/>	

Gift Aid declaration

(please tick) Yes, I want Age UK and its partner organisations* to treat all donations I have made for the four years prior to this year, and all donations I make from the date of this declaration until I notify you otherwise, as gift aid donations. I confirm I pay an amount of income tax and/or capital gains tax at least equal to the tax that the charity will reclaim on my donations in the tax year. Date: ___/___/___ (please complete). *Age Cymru, Age Scotland and Age NI



We will use the information you have supplied to communicate with you in line with Data Protection guidelines. Age UK (registered charity no 1128267) comprises the Charity, its group of companies and national partners (Age Cymru, Age Scotland and Age NI). If you would prefer not to hear from them or carefully selected third parties, let us know by phoning 0800 107 8977.

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To order any of our **free** publications, please call Age UK Advice free on:

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What should I do now?

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Our publications are also available in large print and audio formats.

The following Age UK information guides may be useful:

- *Care at home*
- *Health services*
- *More money in your pocket: a guide to claiming benefits for people over pension age*

The Age UK Group offers a wide range of products and services specially designed for people in later life. For more information, please call **0800 169 18 19**.

If contact details for your local Age UK are not in the box below, call Age UK Advice free on **0800 169 65 65**.

