

# Coming out of hospital



---

It is helpful to know what to consider if you're looking to care for someone who is coming out of hospital, especially if their needs have changed. This factsheet explains what to expect, the steps that should be followed, your rights as a carer, and what to do if things go wrong. This information applies to people living in Scotland.

## Contents

If the person you care for is in hospital .....	2
An outline of the discharge procedure .....	2
What is a discharge assessment? .....	4
Adult Carer Support Plan/ Young Carer Statement .....	7
Discharge from a mental health facility .....	8
Other important things to think about .....	10
Complaints .....	12
Further help .....	14
Other organisations .....	14

## If the person you care for is in hospital

If the person you care for is in hospital, you may be faced with important decisions. You may be considering taking on this caring role for the first time and don't know what to expect. Or you may have already been caring for the person, but their needs have now increased or changed.

One important thing to remember is that it is your choice whether or not to take on a caring role. Think about the type and amount of support you are able to provide and what help you might need. For example, you may be able to help with shopping and meals but feel that you would both like someone else to help with personal care. It is important for you to consider how your caring role is likely to affect your life and wellbeing.

## An outline of the discharge procedure

The hospital has a duty under the Carers (Scotland) Act 2016 to involve you in the discharge of the person you care for if you are their carer particularly if they will require care on leaving hospital or their care needs have changed.

Discharge planning should start as soon as the person you care for is admitted to hospital. It is important to let the hospital staff know as early as possible if you are a carer or thinking of taking on the role. Staff may not realise that you are the carer, so it can really help them if you let them know. A discharge coordinator should be available to coordinate the planning process. They will act as a key person for you to contact to find out what the discharge plans are. Your local carers' centres may also have a hospital discharge worker to help you as a carer.


### **Should I, as a carer, be involved in the discharge procedure?**

As a carer, you have a right under the law to be informed and involved in hospital discharge and planning. You and the person you care for should be involved at all stages of discharge planning, so long as the person you care for consents to this. Hospital wards can sometimes seem like busy places and you may feel pressure from the hospital to get the person you care for home as soon as possible.

The person you care for may be anxious to come home. However, it is important that your views have been taken into consideration and that the person you care for is not being discharged before necessary support has

been put in place. In situations where the person you care for does not want you to be involved or be given information about their care, you should be informed of this.

If the person you care for is unable to make their own decisions (lacks mental capacity), you may be able to make certain decisions about health and welfare matters if you have a Guardianship or Power of Attorney. If not, the law requires professionals to act in the 'best interests' of the person you care for and you should be involved in this decision-making process.

 **Note:** For more information on mental capacity visit [carersuk.org/mental-capacity](https://carersuk.org/mental-capacity) or email [advice@carersuk.org](mailto:advice@carersuk.org)

### **What should happen before the person I care for is discharged?**

When the person you care for is admitted to hospital, they should start working towards what is called a 'planned date of discharge'. Even if this is a while away, it helps with planning effectively for their discharge. You can ask the ward for this information. When the person you are caring for is nearing their expected date of discharge, the following steps should be taken:

- > An assessment should be carried out to see if they are medically fit to be discharged.
- > A discharge assessment should be carried out to see if they need support once discharged (see page 4).
- > An adult carer support plan or young carer statement should be carried out (or at least arranged), to see whether you as a carer need support once the person you care for is discharged (see page 7).
- > A written care and support plan should be given to the person you care for (and a support plan for yourself if you have had your own carer's assessment), which outlines the support required and how this will be provided.
- > Support should be put in place, as outlined in the care and support plan (for the person being cared for) and the support plan (for you).

## **What should happen on the day the person I care for is discharged?**

On the day of discharge, you and the person you care for should expect to be given both verbal and written information, with details of any services involved and information about future treatment and care. The information should be available in a language and format that's suitable for you. It is common that people do not remember or understand all the information they are given so don't be afraid to ask for it to be repeated or explained in a different way.

You and the person you care for should expect certain arrangements to be made for the day of discharge:

- > Appropriate transport should be organised if it is required.
- > You should both be given copies of the care and support plan (for the person being cared for) and the support plan (for you).
- > A discharge letter should be sent to the GP of the person you care for within 24 hours.
- > Medication and any equipment needed at home should be dispensed to the person you care for, as well as instructions and information about its use.
- > Any necessary support should be put in place to start on the day of discharge.

## **What is a discharge assessment?**

This is a review to see if the person you care for needs support for when they leave hospital (when discharged). This might be carried out by a multidisciplinary team of health or social care professionals (to avoid multiple assessments being carried out).

This discharge assessment should investigate whether the person you care for needs any intermediate or reablement care, NHS funded nursing care, other NHS services and/or community care services from the local authority/health and social care partnership.

## **Intermediate or reablement care**

Intermediate care is a short-term package of care that aims to help someone live independently at home. This should be available to all adults over the age of 18 who might need it.

Intermediate care could include any of the following:

- > crisis response services providing short term care
- > home-based care services provided by health professionals such as nurses and therapists
- > bed-based care away from home such as in a community hospital
- > reablement.

Reablement is a particular type of intermediate care which has a stronger focus on helping someone to live independently and is normally provided at home. In general, intermediate care and reablement care are provided by health and social care partnerships.

Before the intermediate care or reablement ends, there should be another assessment to determine whether someone has ongoing needs for care and support (if this has not already been decided).

Intermediate and reablement care should be provided free of charge for up to six weeks (although this can be longer in some circumstances). After the six weeks, any ongoing support needs that are being met by the NHS, should be free of charge. If there are ongoing support needs being met by the local authority, they can only charge for some non-personal care services.

## **Other NHS services**

Palliative care can be provided free on the NHS and is for people who have a health condition that is not expected to be cured by medical treatment. Palliative care may consist of pain relief and other appropriate medical care, as well as emotional and practical support. It can take place in a hospice, residential care or the person's own home. Medical equipment and incontinence products may be provided free on the NHS if the person you care for is assessed as needing such items.

### ***Hospital at Home and Hospice at Home***

*Hospital at Home* is a short-term, targeted intervention that provides a level of acute hospital care in an individual's own home that is equivalent to that provided within a hospital. Multidisciplinary teams help to assess and then provide health and care support in the person's own home instead of admitting them to hospital.

If the person you care for requires palliative care at home, a similar type of service called *Hospice at Home* may be offered. This is often provided in partnership with an expert organisation such as a local hospice, Marie Curie or CHAS and it enables the person you care for to be cared for at home rather than in hospital or at a hospice.

### **Community care services from the local authority/ health and social care partnership**

Most people being discharged from hospital won't need NHS services. Instead they can have an assessment from the local authority, to determine whether they are eligible for any support. Support could range from equipment or adaptations to the home, to a care worker providing personal care help.

The hospital should be in contact with the local authority (or health and social care partnership) so that they can carry this out as part of the discharge assessment. For those who are 18 or over this will be called a needs or community care assessment and for a child (under 18) this will be called a Children Act assessment.

If the person you care for is assessed as needing support from the local authority, they will carry out a financial assessment to determine whether the person will need to contribute towards the cost of any non-personal care support provided.

### **Free personal care**

Anyone of any age who lives in the community will not have to pay for any personal care services that they are assessed as requiring. Free personal care includes:

- services to support personal hygiene eg, help with bathing, shaving, mouth, teeth and nail care

- personal assistance eg help with dressing, to get in and out of bed and use of a hoist
- help to manage continence eg toileting, catheter or stoma care, bed changing and laundry
- food and diet including help with eating and the preparation of meals (but not the costs of supplying food)
- dealing with the consequences of immobility and helping move about
- counselling and support eg reminding and safety devices and psychological support
- simple treatments eg help with medication, application of creams and drops, simple dressings and oxygen therapy. The person you care may still be charged for non-personal care services. These include, for example, community alarms, day care services, meals on wheels, shopping and housework.

## Adult Carer Support Plan/Young Carer Statement

As a carer you can have an assessment from the local authority, to determine whether you are eligible for any support. Support could include services provided directly to you, or services provided to the person you care for, which in turn would help you in your caring role.

There are different types of assessments available depending on your age and the age of the person you are caring for.

▶▶ **Note:** For more information on adult carer support plans, see our website, [carersuk.org/scotland/adult-carer-support-plans](https://carersuk.org/scotland/adult-carer-support-plans) or contact our Carers UK Helpline (contact details on final page).

If you are assessed as needing support from the local authority, they cannot charge you as a carer for any support identified to help you in your adult carer support plan/young carer statement. If the support is provided to the person you are caring for, you as a carer cannot be charged.

## **Discharge from a mental health facility**

If the person you care for is in a mental health facility, they may be there as a voluntary in-patient (which means they can choose to leave if they want), or they may be there because they are detained under the Mental Health Act. There are special rules that apply to discharge from hospital following a section under the Mental Health Act – see page 9.

Before the person you care for is discharged from a mental health facility, there should be a meeting to assess what support or care services may be needed once they are back in a community setting. In addition to having a needs assessment for community care services (see page 6), the person you care for may receive some of the mental health specific support outlined below. As a carer you should be involved in this process if the person you care for consents to this.

### **Community Mental Health Teams**

If someone is being discharged from a mental health facility, they may be referred to a Community Mental Health Team (CMHT) which is made up of different mental health professionals from both health and social care. There are also specialist CMHTs that the person you care for may be referred to, depending on their assessed mental health needs at the point of discharge.

If the person you care for is under 18, then they may be referred to Child and Adolescent Mental Health Services (CAMHS). If they are over 65, they may be referred to an Older People's CMHT.

### **The Care Programme Approach**

If the person you care for is assessed as having complex needs requiring long-term support at the point of discharge, then they may be placed under the Care Programme Approach (CPA). The CPA is a national framework that CMHT's work within to coordinate the care and support services received by patients with complex mental health needs. If the person you

care for qualifies for the CPA, some of the things they should expect to receive include:

- > a full assessment of their health and social care needs
- > a care plan that is regularly reviewed
- > a Care Coordinator who is responsible for making sure the care plan gets implemented and meets assessed needs.

**▶▶ Note:** As a carer, you should be involved in the Care Programme Approach (CPA) meetings if the person you care for consents to this. If they do not consent, you should still be provided with an opportunity to share your views.

### **Discharge from the Mental Health Act**

If the person you care for is detained under a section of the Mental Health Act in Scotland, there are certain restrictions on how they can be discharged. The different ways this can be done can include where:

- > the emergency or short-term restriction runs out and is not renewed
- > the professional in charge of the person you care for (the Responsible Clinician) discharges them
- > a tribunal discharges them.

Guidance on the Mental Health Acts suggests that the person you care for should be able to have an assessment of their needs in the community and that ongoing care assistance should be put in place for care and support in the community. In terms of what type of care this might include, in most cases the person you care for will receive specialist support from an appropriate CMHT under the CPA.

If the person you care for has been detained in hospital certain sections of the Mental Health Act, then they are entitled to free aftercare services

The free aftercare is funded by the NHS and local authority in the area where the person you cared for lived before they were admitted to hospital. Aftercare services will be based on the health and social care needs

identified in the care plan of the person you care for. As a carer you should be involved in the care plan if the person you care for consents to this.

- **Note:** Discharge under the Mental Health Act is a complicated area and therefore if this applies to the person you care for, you may need to seek further advice from a specialist mental health charity (see contacts section on pages 14-15) or the Mental Welfare Commission. The Mental Welfare Commission has a free helpline for individuals and their carers which can provide advice on your rights: call 0800 389 6809 Monday to Friday, from 10am to 12pm and from 2pm to 4pm or email: [mwc.enquiries@nhs.scot](mailto:mwc.enquiries@nhs.scot)
  
- The Mental Welfare Commission also has dedicated information for carers at: [hmwscot.org.uk/looking-help/help-carers](http://hmwscot.org.uk/looking-help/help-carers)

## Other important things to think about if the person you care for is in hospital

### Benefit claims

It is important to notify the relevant benefit offices to let them know that the person you care for is going or has gone into hospital, as this may affect their benefits as well as your own.

If the person you care for was 18 or over when they went into hospital, some benefits (such as Adult Disability Payment, Attendance Allowance or Pension Age Disability Payment) will stop if they have been in hospital for more than 28 days.

If the person you care for was under 18 when they went into hospital, their Child Disability Payment or Adult Disability Payment will continue to be paid for the whole time they are there.

Stays in hospital or a care home, that are separated by 28 days or less, are added together when the assessor decides whether certain disability benefits should stop (this may be referred to as the ‘linking rules’).

If the Adult Disability Payment, Pension Age Disability Payment or Attendance Allowance of the person you care for stops, your Carer Support Payment will also stop.

When the person you care for is ready to be discharged, inform the office dealing with the particular benefit to make sure that payments restart. The person you care for may also be eligible for benefits at an increased rate if their care needs have changed.

**▶▶ Note:** The rules relating to benefits can be complex. For further advice and information, contact the Carers UK Helpline by email – see final page for contact details.

### Help at work

If you are in paid work, you may need to make some adjustments when the person you care for goes into hospital and possibly also when they come out. This could be anything from needing to make regular phone calls to check on them, through to taking off an extended period of leave. Most working carers have the following rights:

- > the right to request flexible working
- > the right to time off in emergencies
- > the right to not be discriminated against or harassed under the Equality Act.

**▶▶ Note:** For more information on your rights in work visit [carersuk.org/work](https://carersuk.org/work) or contact the Carers UK Helpline – see final page for contact details.

## Complaints

Unfortunately, there may be times when you need to make a complaint. When making a complaint, it is important to explain as clearly as possible what went wrong, and what you would like to happen instead.

### Complaints about the NHS

If you, or the person you are looking after, are unhappy with the discharge procedure, with the way you have been treated by the NHS or with an NHS service, you can make a complaint about this. To start with you may want to make an informal complaint by speaking to the person responsible for the issue, which may be enough to resolve the matter.

If the informal complaint does not resolve the matter, you can use the two stage formal complaints procedure outlined below. You should make your complaint as soon as possible, and generally within 12 months of the event you are complaining about.

### First stage complaint – early resolution

Early resolution: Raise your concern with the service provider (such as the hospital). You can ask for a copy of their complaints procedure which will give further information. Your complaint can be in writing or you can complain verbally.

### Second stage complaint – investigation

The organisation will look into your complaint in more detail. At stage two, you should be given a final decision after no more than 20 working days, unless there is clearly a good reason for needing more time. Once you have the final decision from the organisation, if you are still not happy, you can then take your complaint to stage three.

### Third stage complaint – Scottish Public Services Ombudsman (SPSO)

If you are still not happy you can take the matter to the SPSO, who is independent of the NHS. Visit [www.spsso.org.uk/making-complaint](http://www.spsso.org.uk/making-complaint) or telephone 0800 377 7330.

For more information on making an NHS complaint, you could contact:

- **The Patient Advice and Support Service (PASS) is provided by Citizens Advice Scotland:** they provide a confidential service to help patients get the most from the NHS –

visit [Patient Advice & Support Service | \(cas.org.uk\)](https://cas.org.uk)

### **Complaints about the local authority or the Health and Social Care Partnership (HSCP)**

If you, or the person you are looking after, are unhappy with the way an assessment was carried out, with the way you have been treated by the local authority/ HSCP or with one of their service, you can make a complaint about this.

To start with you may want to make an informal complaint by speaking to the person responsible for the issue, which may be enough to resolve the matter.

If the informal complaint does not resolve the matter, you can use the two stage formal complaints procedure outlined below. You should make your complaint as soon as possible, and generally within 12 months of the event you are complaining about.

The stages of making a complaint are the same for both NHS and local authority services.

### **Judicial review**

You may be able to take legal action to ask a court to review a decision made by the NHS or a local authority. This is called judicial review. An application for judicial review must be made without delay, and within a maximum period of three months. You will need specialist legal advice if you want to apply for judicial review.

The Law Society of Scotland can help you find a solicitor. Visit [Find a Solicitor | Law Society of Scotland \(lawscot.org.uk\)](https://www.lawscot.org.uk). You will also need a solicitor-advocate or advocate to represent you in court. Find out more at: [Society of Solicitor Advocates | Society of Solicitor Advocates](https://www.societyofsolitors.org.uk).

**▶▶ Note:** For tips and support on making a complaint, visit [carersuk.org/making-complaints](https://www.carersuk.org/making-complaints).

## Further help

Our website contains a wealth of useful information on the financial and practical matters related to caring - visit [carersuk.org](http://carersuk.org) You can find contact details for local carers' organisations on our website at [carersuk.org/local-support](http://carersuk.org/local-support).

For information and guidance, contact the Carers UK Helpline on **0808 808 7777** (Monday-Tuesday, 9am - 6pm) or please email [advice@carersuk.org](mailto:advice@carersuk.org) if you have a more detailed or complex enquiry.

## Other organisations

### Advocacy and advice services

Citizens Advice Scotland - Get advice from your local Citizens Advice.  
w: [Citizens Advice Scotland \(cas.org.uk\)](http://cas.org.uk)

### Autism

Scottish Autism

w: [www.scottishautism.org](http://www.scottishautism.org) t: 01259 222022

### Dementia

Alzheimer's Scotland

w: [www.alzscot.org](http://www.alzscot.org) t: 0333 150 3456

### Direct payments and independent living

Disability Information Scotland

w: [www.disabilityscot.org.uk](http://www.disabilityscot.org.uk) t: 0300 323 9961

Disability Rights UK

w: [www.disabilityrightsuk.org](http://www.disabilityrightsuk.org) t: 0330 995 0400

### Learning disabilities

Enable

w: [www.enable.org.uk](http://www.enable.org.uk) t: 0300 0200 101

## **Mental health**

Change Mental Health

w: <https://changemh.org/>

e: [advice@changemh.org](mailto:advice@changemh.org)

t: 0808 8010 515

Support in Mind Scotland

(Information and advice for people affected by mental illness and their carers)

w: [www.supportinmindscotland.org.uk](http://www.supportinmindscotland.org.uk) t: 0131 662 4359

## **Older people, residential care, charging**

Age Scotland


w: [www.ageuk.org.uk/scotland](http://www.ageuk.org.uk/scotland) t: 0800 12 44 222

This factsheet is designed to provide helpful information and advice. It is not an authoritative statement of the law. We work to ensure that our factsheets are accurate and up to date, but information about benefits and community care is subject to change over time. We would recommend contacting the Carers UK Helpline or visiting our website for the latest information.

Give us your feedback on this factsheet by emailing your comments to [info@carersuk.org](mailto:info@carersuk.org)  
This factsheet was updated in April 2026. Next review due April 2027.

### **Carers UK Helpline**

For expert information and advice about caring.

 **0808 808 7777**  
(Monday – Friday 9am-6pm)

 [advice@carersuk.org](mailto:advice@carersuk.org)

### **Carers Scotland**

0141 378 1065  
[info@carerscotland.org](mailto:info@carerscotland.org)

### **Carers UK**

20 Great Dover Street  
London SE1 4LX  
020 7378 4999  
[info@carersuk.org](mailto:info@carersuk.org)

### **However caring affects you, we're here**

Caring will affect us all at some point in our lives.

With your help, we can be there for the 6,000 people who start looking after someone each day.

We're the UK's only national membership charity for carers: join us for free at [carersuk.org/join](https://carersuk.org/join)

We're both a support network and a movement for change.

Visit us at our website to join us, help us or access more resources: [carersuk.org](https://carersuk.org)

**This information can be requested in large print or as a text file.**