Notes

We are listening - how did we do?

We welcome your feedback, as it helps us evaluate the services we provide. If you would like to tell us about your experience:

- speak to a member of staff
- visit our website www.wihb.scot.nhs.uk/feedback or share your story at: www.careopinion.org.uk or 0800 122 31 35
- tel. 01851 704704 (ext 2236) or 0797 770 8701 Monday-Friday 10am-4pm (answerphone available).

Version: 3 Review Date: June 2026
Produced by: Governance Team, NHS Western Isles

Disclaimer
The content of this leaflet is intended to augment, not replace, information provided by your clinician. It is not intended nor implied to be a substitute for professional medical advice. Reading this information does not create or replace a doctor-patient relationship or consultation. If required, please contact your doctor or other health care provider to assist you to interpret any of this information, or in applying the information to your individual needs.

NHS Eileanan Siar Western Isles

Bòrd SSN nan Eilean Siar
NHS Western Isles

Leaving Hospital

A guide to discharge planning for relatives and carers

This booklet can help you think about the arrangements and support a patient may need when they leave hospital. This is called ‘discharge planning’.

You may be a husband, wife, partner, child, other relative, friend or neighbour of a patient. You may also be called a ‘carer’ by professionals. This booklet will help you:

- understand how staff will plan support for leaving hospital
- know your rights and become involved in discharge planning
- find useful information and organisations.

What is discharge planning?

For most people, leaving hospital is simple, but for some it can be more complicated.

Planning for leaving hospital should begin as early as possible because arrangements for care and support will take a while to put into place.

If the admission is planned information should be collected before a patient goes into hospital, outlining if other services are already involved.

Often though, people go to hospital as an emergency. If this happens, discharge planning usually starts at the time of admission. The patient should be asked who their main carer is.

A ‘discharge plan’ will be made about support a patient may need when they leave hospital. You can help inform this plan.

Staff should ask you about issues or problems that might affect you once the patient leaves hospital. By the time the patient leaves hospital you should both know:

MS Helpline: 0808 800 8000
www.mssociety.org.uk/care-and-support/ms-helpline

Rethink Mental Illness: 0808 801 0525
Web: www.rethink.org

Carers Trust: 0300 772 7701
Web: carers.org/our-work-in-scotland

Counselling Directory: 0844 8030 240
www.counselling-directory.org.uk

Web support

www.wihb.scot.nhs.uk
www.cne-siar.gov.uk
www.nhsinform.scot/campaigns/support-for-unpaid-carers
www.nhsinform.scot/scotlands-service-directory
https://wellbeinghub.scot/resources
www.carers.org
www.sharedcarescotland.org.uk
https://youngscot.net/youngcarers

National organisations

www.mygov.scot/browse/health-social-care/care-and-caring
This website provides a wide range of resources about caring, including information on finances, assessments, employment and services.
Web: www.direct.gov.uk/en/CaringForSomeone

NHS 24
If your GP surgery is closed and the patient is too ill to wait until they open, contact NHS 24. It is a telephone-based service and can answer questions about health and offer advice and get you the right help.
Tel. 111. Web: www.nhs24.scot

NHS Inform
This is a national health information service offering a helpline and web based resource containing a wide range of health and carer information in various languages. Tel: 0800 22 44 88. Open Mon-Fri 9am-5pm.
Web: www.nhsinfom.scot

Scotland's Service Directory
Through Scotland's Service Directory you can find the names, addresses, opening times and service details for thousands of health and wellbeing services in Scotland, including health and wellbeing services.

National support lines

Scottish Families Affected by Alcohol & Drugs Helpline: 0808 101 011

Macmillan Cancer Support Line: 0808 808 0000

Breathing Space: 0800 838587
Web: www.breathingspace.scot/how-we-can-help/need-to-talk/

Alzheimer Scotland - Action on Dementia:
0808 808 3000. Web: www.alzscot.org

Care Information Scotland: 0800 011 3200
Web: www.careinfoscotland.scot

Carers UK Carers' Line: 0808 808 7777
Web: www.carersuk.org

- how to contact relevant services
- how to use any equipment
- what treatment will be provided
- what, and how, medication will be given.

Once a patient is out of hospital the type and amount of help they need might change, perhaps for a short time but sometimes for a long time, or forever.

Why should I be involved?

If someone you care about is in hospital, it is likely to be a worrying time for you. You may feel you have enough to do right now without thinking about what will happen later.

However, if you get involved in arrangements for discharge, it is more likely that any suggested 'support package' will work well. A 'support package' means services provided in the community that professionals think will help the patient.

Remember, patients can be quite weak and need a lot of help when they leave hospital. Support can take a while to arrange and may not start straight away. You might want to think about how other people could help, if necessary, especially for the first few weeks.

Your rights as a relative or carer

As a relative or carer you have the following rights:

- to be valued for the care you give, and be treated with respect and dignity
- to be treated as an equal partner in providing care
- to receive an assessment of your own needs if you provide care to the patient
- to be supported by staff so that you can continue to care

as much and as long as you willing and are able to, where appropriate
- to be given information and training you need to help the patient
- to be given general information about the patient's condition and medication, even if they do not agree to personal information being shared.

Discharge planning in the Western Isles

A team of professionals in the hospital, called a 'multi-disciplinary' team, will work together to discuss discharge arrangements for the patient, and a named person on the team will be in charge of this plan. You will be given this person's name.

Once the patient is fit enough to leave hospital, other professionals may become more involved, for example, social workers, occupational therapists or district nurses. If a patient is being discharged home, the decision to discharge will be based on clinical need and will not be influenced by the patient's choosing to stay in hospital against best clinical practice.

Between one and two days before discharge, you should know roughly what time the patient will leave the hospital. On the day of discharge, the patient may have to wait for medication or transport. You will be asked if you can provide transport home, where appropriate.

By the time the patient leaves hospital you should both have been given information about any changes in medication or how to use equipment at home, and who to contact if there is a problem with the equipment.

If the patient has any difficulties once they have left hospital, you should get help at once, from your NHS 24 - telephone:111, GP, or social services. If you feel their life is in danger, you should immediately call an ambulance by telephoning 999.

Additional support

Advocacy Western Isles
Tel. (01851) 701755
E-mail: office@advocacywi.co.uk

Alzheimer Scotland Dementia Resource Centre
Tel. 01851 702123. Email: Lewis@Alzscot.org
Web: www.alzscot.org

Caraidean Uibhist
Tel. 01870 603233. Web: www.caraideanuibhist.org

Cobhair Bharraigh
Tel. 01871 810906. Email: cobhairbharraigh@btconnect.com Web: www.isleofbarra.com/cobhairbharraigh

Crossroads (Harris)
Tel. 0730 507 8815. Email: manager@crossroadsisleofharris.co.uk
Web: www.crossroadsisleofharris.co.uk

Crossroads (Lewis)
Tel. 01851 705422. Email: crossroads.lewis1@btinternet.com Web: www.crossroadslewis.co.uk

Pointers Young Carers Group
Tel: 01851 822713. E-mail: pointers@cne-siar.gov.uk Web: www.kooth.com
Facebook: Western Isles Youth Services

Tagsa Uibhist
Tel. 01870 603881 (Care). Email: info@tagsa.co.uk Web: www.tagsa.co.uk/

Western Isles Association for Mental Health (WIAMH)/Catch 23
Tel. 01851 704964. Email: info@wiamh.org
Web: www.wiamh.org

Western Isles Community Care Forum
Telephone: 01859 502588. Email: info@wiccf.co.uk Web: www.wiccf.co.uk

Western Isles Sensory Centre
Tel. 01851 701787. Web: www.sightaction.org.uk

Representing the patient's views

If a patient is aged 16 or over and is unable to make their own decisions, you could consider applying for legal powers to represent them.

For example, if you become their legal guardian or Power of Attorney, you have rights to make certain decisions on their behalf. Find out more about these and other options by contacting Comhairle nan Eilean Siar's social services department.

A short guide to the Adults with Incapacity (Scotland) Act 2000 is available at: https://careinfoscotland.scot/topics/your-rights/legislation-protecting-people-in-care and Carers Scotland also has information on this topic.

If you are a young person

If you are under 18 years of age and help an adult who is in hospital, tell the Senior Charge Nurse. They will understand that you are a 'young carer' and can help make sure you get enough support to have time to enjoy your own life too by referring you onto Social Work Services and signposting you to Young Carer information.

Raising concerns

If you are not happy with the way you are being involved in discharge planning, you should raise your concerns with the Senior Charge Nurse.

After this, if you are still concerned, you can contact the NHS Western Isles Complaints Team, 37 South Beach, Stornoway, Isle of Lewis, HS1 2BB. Tel: 01851 708000 or visit: www.wihb.scot.nhs.uk/get-involved/complaints

Staff responsibilities in discharge planning

The Senior Charge Nurse has lead responsibility for discharge arrangements. The senior charge nurse is the main nurse in charge of the ward. They can signpost you to the 'named person' for the patient's discharge planning, and give you information about local organisations and services. They also make sure referrals to other services are made at the right time and for the right reasons. This is the best person to speak to about discharge planning.

A lead consultant has responsibility for checking if a patient is clinically fit to leave hospital. The decision for setting a discharge date is usually taken by the multi-disciplinary team as a whole, not just one member of staff.

The primary care team of GPs, district nurses, community nurses and health visitors, help people to be healthy and independent in their home and community.

Social work services work out a person's social care needs and plan the care needed. They may also work out what your needs are, as a carer.

If a patient is being discharged from hospital to a care home

If a patient is being discharged to a Care Home, the decision to discharge a patient will be based on clinical need and will not be influenced by a person's choice of care home or resolution of any financial issues. Consideration of capacity and the principles and requirements of the Adults with Incapacity (Scotland) Act 2000, Human Rights, and Equality legislation underpins the application of this guidance.

To help avoid unnecessary delays in the patients discharge, the issue of a patient's capacity to make informed decisions about

future care will be investigated as early as possible in the patient's journey. (CEL 32 (2013) - Guidance on Choosing a Care Home On Discharge From Hospital).

Services available in the community

There are many types of community-based services that may help you and the patient once they leave hospital. There may be a charge for some of these services, which Comhairle nan Eilean Siar can tell you about.

The following list gives examples of the kind of help likely to be available to patients or to you as a 'carer':

- help with practical and personal care, e.g. care at home, meal services, short breaks
- help with nursing care, treatment and support, e.g. district and community nurses, information services, training courses
- help with living independently, e.g. to get back skills or live independently – such as therapy, telecare, social support or financial advice
- help with mental health or psychological problems, e.g. counselling, stress management courses, dealing with challenging behaviour.

You can find out more about these and other services in the 'useful resources' section of this booklet (pages 9-11).

A note about housing

In most situations the patient will be able to go back to their home once they leave hospital. However, occasionally, they may need a higher level of care than can be provided in their own home. In such cases, a move may be necessary. Options for this type of care can include:

- your house or that of a relative
- another health facility
- housing with support, e.g. sheltered housing
- a care home.

If a move to a care home is being considered, you can get information from Comhairle nan Eilean Siar or Age Scotland helpline by telephoning 0800 1244 222 or visit: www.agescotland.org.uk

Getting involved in discharge planning

There are a number of different things you can do to help with discharge planning. You could:

- identify yourself as a carer when the patient is admitted to the ward, so that it is noted in the patient's care notes.
- take time to think about any help you are able and willing to give. For example, you could help with housework, shopping, giving medication, driving or personal care tasks such as dressing, washing or toileting.
- ask the Consultant or Senior Charge Nurse for the name and contact details of the named person with responsibility for making discharge arrangements. Ask what type of needs the patient might have when they leave hospital and for how long.
- find out what services are being suggested for the patient and check these services are being put in place. Ask if referrals have been made to other services, who to contact, and when services are likely to begin.
- speak to the named person and let them know how you could assist. Tell the named person if your ability to provide help changes during the hospital stay.

If you provide care you have the right to request an assessment for an Adult Carers Support Plan from Comhairle nan Eilean Siar. In other words, if you give care to someone, you can get advice or help to work out what your needs are. This may help you access more support.