

Reducing Delayed Discharges in Mental Health and Learning Disability Services

As part of the national mission to reduce delayed discharges across the NHS in Scotland, Healthcare Improvement Scotland and NHS Grampian worked together on a Quality Improvement focused project to begin addressing issues related to delayed discharges at Royal Cornhill Hospital.

Outcomes and Learning

Over the period of October 2024 to April 2025 there was:

- A 46% reduction in delayed discharges at RCH, and
- A 70% increase in patients with a Planned Discharge Date.

Key learning points were highlighted which could support national efforts to reduce delayed discharges:

- **Early discharge planning is essential** — it should start at admission, not when treatment is complete.
- **Good communication underpins success** — regular joint meetings where discharge is everybody's business.
- **System-wide collaboration is essential** — housing, social work, and voluntary partners must be engaged early.
- **Escalation pathways matter** — complex cases need creative focus and timely senior oversight to avoid drift.
- **Patient, family and carer voice must be central** — unnecessary delays can cause anxiety, loss of independence, and mistrust.
- **QI methodologies (Plan-Do-Study-Act, run charts, process mapping)** help structure improvement and track progress.

"New meeting processes support a more focussed approach, improve sharing of information, and allow for closer scrutiny of the barriers to progressing towards discharge including the identification of clear escalation processes." - Nurse Manager, NHS Grampian

Situation

This project aimed to address barriers to timely discharge at Royal Cornhill Hospital (RCH) in Aberdeen City which provides general and specialist psychiatric services with a bed complement of around 400. NHS Grampian identified that delayed discharges (patients who remain in hospital when they are medically ready to be discharged) accounted for a significant proportion of occupied bed days across RCH's Mental Health and Learning Disability (MH/LD) inpatient units. Impacts of these delays included:

- reduced capacity to admit new patients in crisis
- negative impact on patients' wellbeing and outcomes
- increased costs to NHS Grampian and the wider health and social care system, and
- staff frustration when trying to discharge complex cases.

The specific aim of this Quality Improvement project was to achieve a 25% reduction in delayed discharges from NHS Grampian RCH by the end of the programme period.

Approach

To identify the key contributors to delayed discharge at RCH, the project team used process and system mapping workshops. These highlighted issues related to delayed discharge processes and planning, including communication barriers between hospital and community staff and service users. Throughout the workshops wider system challenges were also identified, including availability of community care options and funding. This contributed to cultural issues, with staff feeling like resolutions were outwith their control.

Following this investigative stage, three tests of change were developed covering areas identified by the local teams as priorities to improve:

Test of change 1: improving communication structures

The first change implemented new policies to improve communication, such as planning for discharge from the day of admission and documenting expected discharge dates within the first week. Weekly multidisciplinary team meetings were introduced to review progress. Discharge spreadsheets and trackers were also made accessible to all partners.

Test of change 2: escalation process

This change involved establishing focus meetings to address delayed discharges that had become 'prolonged' due to multi factorial and complex issues.

Test of change 3: early discharge planning on Muick Ward

This change consisted of a standalone test on the Older Adult Mental Health ward (Muick Ward) which has 20 beds. An emphasis was placed on discharge being everyone's responsibility, with ward and community staff receiving training on effective discharge planning and communication. A new standard operating procedure for discharge planning was developed, including allocating a named nurse to each patient on the ward.

Results

Since improvement work began across the three tests of change with RCH there has been a reduction of delayed discharges. Over the period of October 2024 to April 2025 there was:

- a 46% reduction in delayed discharges at RCH, and
- a 70% increase in patients with a Planned Discharge Date.

Across the third test of change on Muick Ward, significant improvements were made to early discharge planning. Key results were:

- 31% reduction in incidents of delayed discharge
- 46% increase in discharges without delay over the six months post-intervention
- reduction in average length of stay (101 days in March 2024 to 42 days in April 2025)
- reduction in total number of days spent as delayed discharge (349 days in October 2024 to 61 days in April 2025)
- 20 discharges achieved in a six-week period through proactive engagement, and
- a decrease in readmissions post-intervention.

Overall, the project has resulted in improved discharge flow and patient outcomes with greater integration of health and social care teams. Staff reported feeling more confident and knowledgeable around discharge planning which, alongside a stronger leadership presence, contributed to boosting team morale.

Next steps

Recommendations were made to NHS Grampian to enable them to maintain patient flow and continue to reduce incidents of delayed discharge. These included implementing Crisis Support and Intensive Support Treatment teams, and a dedicated Discharge Coordinator to sustain improvements. There are also plans to scale the good practice learnings from this project to other wards within RCH. Healthcare Improvement Scotland will also expand on this work throughout Phase 2 of the Mental Health and Learning Disability Delayed Discharge Programme, including compiling a learning system/change package that can be utilised by NHS Boards nationally.