



Economics of
Social and Health Care
Research Unit

Lay Summary

Delayed Discharges and Hospital Type: Evidence from the English NHS

by James Gaughan, Hugh Gravelle, Luigi Siciliani

Delayed discharges of patients from hospital, commonly known as bed blocking, can increase the overall cost of treatment and may worsen patient outcomes.

We investigate whether bed blocking is more likely in particular types of hospitals (Acute, Specialist, Mental Health, Teaching), the extent to which such differences can be explained by patient mix, hospital quality, the local availability of long-term care, and hospital governance as reflected in whether the hospital has Foundation Trust status, which gives greater autonomy and flexibility in staffing and pay.

We find that a greater local supply of care-home beds is associated with fewer delays. Hospitals that are Foundation Trusts have fewer delayed discharges and might therefore be used as exemplars of good practice in managing delays. Mental Health Trusts have more delayed discharges than Acute Trusts, but a smaller proportion of them are attributed to the NHS, possibly indicating a relatively greater lack of adequate community care for mental health patients.

Full paper available at <http://onlinelibrary.wiley.com/doi/10.1111/j.1475-5890.2017.12141/full>

Contact James Gaughan: james.gaughan@york.ac.uk

The Economics of Social and Health Care Research Unit is a joint collaboration between the Centre for Health Economics (CHE) at the University of York and the Personal Social Services Research Unit (PSSRU) at the London School of Economics and the University of Kent. ESHCRU is supported by a grant awarded by the English Department of Health: Policy Research Unit in Economics of Health and Social Care Systems.