CARE FORUM 2021 SESSION 6

DISCHARGE PLANNING -TOOL KIT

This session looks at the complexities of care associated with discharge as older adults and caregivers move from the home, Emergency Room, hospital, ICU to rehab settings and back to home. There are multiple reasons that caregivers experience chaos while navigating the discharge of a loved one. Commonly these include not recognizing changes in older adults in a timely manner and not understanding some of the complexities of the health care system. This session discusses checklists and as well as solutions.

In general, the basics of a discharge plan are best described by the acronym **EDPDRA**.

- **Evaluation** of the patient by qualified personnel
- **Discussion** with the patient or his representative
- **Planning** for homecoming or transfer to another care facility
- **Determining** whether caregiver training or other support is needed
- **Referrals** to a home care agency and/or appropriate support organizations in the community
- **Arranging** for follow-up appointments or tests

QUESTIONS FOR CAREGIVERS TO ASK DURING DISCHARGE FROM A HOSPITAL

DISCHARGE TO A SKILLED NURSING FACILITY (SNF): Medicare Part A (Hospital Insurance) covers care provided in a SNF for a limited time if the person has a hospital-related medical condition, has Part A, has days left in their Benefit period to use, and a 3-day qualifying hospital stay. It is important to note if the person is in the hospital under 'Observation' status. Observation is a way to keep someone in the hospital for a short time while doctors try to decide if he or she is sick enough to need inpatient treatment. Observation patients can sometimes be kept in the hospital for days, but these do not count towards the 3-day qualifying stay for a SNF. 'Long Term Care' insurance or Veteran's benefits may cover a SNF. Ask about all benefits and community resources before discharge.

DISCHARGE HOME: Patients and families are often told 'home care' may be covered once the person reaches home, but that may be skilled care such as physical, occupational, speech therapy or nursing care. Custodial care by an agency or private caregivers is typically private pay or may be covered by Long Term Care insurance or Veteran's Benefits. Adult Day Health care may take certain forms of health insurance. If person is discharged to Hospice, services can be provided at home or in a care facility or a SNF, health insurance pays for services of the hospice team visits (MD, social work, and nurse) but not for room, board, and custodial care such as bathing, dressing, feeding.

IF DISCHARGE IS TOO EARLY: If you do not agree that your loved one is ready for discharge, *you have the right to appeal the decision.* The first step is to talk with the physician and discharge planner and express reservations. If that is not enough, you will need to contact Medicare, Medicaid, or your insurance company. The hospital will guide you to file an appeal. Formal appeals are handled through designated *Quality Improvement Organizations (QIO)*. If the QIO rules against you, you will be required to pay for the additional hospital care. The hospital will let you know the steps to take to get the case reviewed.

QUESTIONS ABOUT THE ILLNESS AND CARE NEEDED: These are related to - symptoms to watch for, care needed such as assistance with bathing, dressing, eating, diet restrictions, toileting, transfer (moving from bed to chair), mobility (includes walking), managing symptoms and training for that (e.g., pain or nausea), special equipment, coordinating the person's medical care, transportation, household chores, taking care of finances, etc..

QUESTIONS ABOUT BEING DISCHARGED TO THE HOME: Discuss with the hospital team if the home is safe, comfortable, with space for any extra equipment, the need for a ramp, handrails, grab bars, hospital bed, shower chair, commode, oxygen tank, and how to navigate stairs. Ask about who will order and bring the equipment, and will insurance, Medicare or Medicaid pay for them, (There are companies that will undertake minor home modifications).

QUESTIONS WHEN DISCHARGE IS TO A REHAB FACILITY OR NURSING HOME: How long is the stay, is the facility clean, does the facility have experience working with families of your culture/language? Always check online resources such as www.Medicare.gov for ratings. Ask about staff turnover, daily routine, diet, presence of social worker, safety, facilities/programs for dementia patients, means for families to interact with staff.

QUESTIONS ABOUT MEDICATIONS: Get a list of all medicines prescribed prescription and nonprescription, their side effects, interactions with other medications. Ask if insurance pays for the medications, are there less expensive alternatives? Does the pharmacy provide special services such as home delivery, online refills, or medication review and counseling?

QUESTIONS ABOUT FOLLOW-UP CARE: What health professionals will your loved one need to see? Have those appointments been made? What transportation arrangements need to be made? How will the primary care doctor (PCP) learn about what happened in the hospital or rehab facility? Whom can you call with symptoms and treatment questions, 24 hours a day and on weekends?

A DISCHARGE PLANNING STRATEGY: The **IDEAL** Discharge Planning strategy highlights the key elements of engaging the patient and family in discharge planning:

- **I**nclude the patient and family as full partners in the discharge planning process.
- **D**iscuss with the patient and family five key areas to prevent problems at home: 1. Describe what life at home will be like 2. Review medications 3. Highlight warning signs and problems 4. Explain test results 5. Make follow up appointments.
- **E**ducate the patient and family in plain language about the patient's condition, the discharge process, and next steps at every opportunity throughout the hospital stay.
- **A**ssess how well doctors and nurses explain the diagnosis, condition, and next steps in the patient's care to the patient and family and use teach back.
- **L**isten to and honor the patient and family's goals, preferences, observations, and concerns.

QUESTIONS ABOUT YOUR NEEDS AS A CAREGIVER:

- Will someone come to my home to do an assessment to see if we need home modifications?
- What services will help me care for myself?
- Does my family member require help at night and if so, how will I get enough sleep?
- Are there things that are scary or uncomfortable for me to do, e.g., changing a diaper?
- What medical conditions and limitations do I have that make providing this care difficult?
- Where can I find counseling and support groups?
- How can I get a leave from my job to provide care?
- How can I get a respite (break) from care responsibilities to take care of my own healthcare and other needs?
- Where can you find support groups? Ask Avenidas Care partners at www.avenidas.org.

QUICK DISCHARGE CHECKLIST

- Care coordination, family meetings
- Caregivers - private or agency, details for hiring
- Living options
- Medication management, supplies for care
- Follow-up with primary care physician/specialty care
- Emergency response systems
- Transportation support
- Home adaptive and safety devices
- Technology for support at home or monitoring of vitals
- Nutrition
- Mental health/pain management
- Hospice/palliative care/grief management
- Legal/financial planning: life span and costs of care

SOURCES FOR TOOL KIT

- AARP - www.aarp.org/caregiving. Information of current reports and research. Avenidas Care Partners Consultations and Caregiver Support Group – pwolfson@avenidas.org. Compassionate weekly support group and elder care consultations.
- Family Caregiver Alliance - www.caregiver.org. Comprehensive caregiver education, tips, articles.
- National Council on Aging - https://www.ncoa.org. Tools to stay healthy, secure, and independent.
- National Institute on Aging - https://www.nia.nih.gov Research and health information.
- National Alliance for Caregiving - www.caregiving.org/research/.
- Medicare - https://www.medicare.gov/ Information for hospital discharge.
- Office of Disease Prevention and Health Promotion - www.healthfinder.gov. Information to stay healthy.

ELLEN BROWN, MD Ellen@ellenbrownmd.com - RITA GHATAK, PhD rghatak@aging101.org