The Bree Collaborative
Difficult to Discharge Charter and Roster DRAFT

Problem Statement

In a survey from August of 2021, hospitals in Washington state reported that more than 900 patients who were ready to be discharged were stuck in the hospital. In one widely reported example, Harborview Medical Center announced in summer 2022 that they will only accept patients in urgent need of specialized care, as they have more than 100 medically stable patients in need of long-term post-acute care. It can be difficult to find appropriate post-acute care for a number of reasons, including patient’s complex behavioral health or social needs and a lack of appropriate post-discharge care sites.  While COVID-19 is a contributing factor to hospital capacity concerns, the primary issue appears to be access to appropriate post-acute care facilities.

Aim

Increase evidence-informed practices for appropriately discharging people from acute care facilities in order to increase access to acute care and improve quality of life for non-acute patients.

Purpose

To propose practical and evidence-informed recommendations to the full Bree Collaborative on appropriately discharging people from acute care facilities, including:

- Defining topic area and scope
- Identifying barriers to discharge
- Identifying practices for improving the discharge process
- Defining “appropriate” post-acute care
- Identifying practices and partnerships to increase access to appropriate post-acute care
- Implementation of discharge protocols

Duties & Functions

The workgroup will:

- Research evidence-informed and expert-opinion informed guidelines and best practices (emerging and established).
- Identify current barriers and future opportunities for implementing interventions.
- Consult relevant professional associations and other stakeholder organizations and subject matter experts for feedback, as appropriate.
- Maintain an equity lens while developing recommendations.
- Meet for approximately nine months, as needed.
- Provide updates at Bree Collaborative meetings.
- Post draft report(s) on the Bree Collaborative website for public comment prior to sending report to the Bree Collaborative for approval and adoption.
- Present findings and recommendations in a report.

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• Recommend data-driven and practical implementation strategies including metrics or a process for measurement.
• Create and oversee subsequent subgroups to help carry out the work, as needed.
• Revise this charter as necessary based on scope of work.

Structure

The workgroup will consist of individuals confirmed by Bree Collaborative members or appointed by the chair of the Bree Collaborative. The Bree Collaborative director and program coordinator will staff and provide management and support services for the workgroup.

Less than the full workgroup may convene to: gather and discuss information; conduct research; analyze relevant issues and facts; or draft recommendations for the deliberation of the full workgroup. A quorum shall be a simple majority and shall be required to accept and approve recommendations to send to the Bree Collaborative.

Meetings

The workgroup will hold meetings as necessary. Bree Collaborative staff will conduct meetings, arrange for the recording of each meeting, and distribute meeting agendas and other materials prior to each meeting. Additional workgroup members may be added at the discretion of the Bree Collaborative director.

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