Evidence Review Updates

- 16 articles reviewed using the terms "Complex Discharge," "Discharge Barriers," and "Discharge Barriers." Searching for "Medical Barriers Discharge" did not yield relevant results.

- Description of Discharge Barriers
  - Several articles tried to identify most common discharge barriers. Barriers cited include: financial, behavioral, housing, education, medical comorbidities, availability of post-acute care beds, and others we have previously discussed.

- Discharge Process. Most articles described improvements to the discharge process to increase discharge rates. Strategies include:
  - Interdisciplinary communication to ensure patients are aware of their intended discharge date
  - Coordinating with primary care physicians and intended post-acute care facilities for follow-up
  - Proactive discharge planning, including setting an intended discharge date
  - Use of standard discharge tools and workflows
  - One article offered systems-level interventions to decrease length of stay, focused on research, clinical pathways to discharge, and case management.

Barriers: Medical

Medical Barriers to Discharge include existing diagnosis, ongoing chronic illness, or other medical factors that complicate discharge back to the home.

- Alzheimer's/dementia/TBI
- Hemodialysis/Dialysis
- Wound Care
- Respiratory/Trach Patients
- Bariatric Status
- Frequent Readmissions or ED utilization
- Other High Care Needs

Complicating Factors

- Lack of specialized services to address patient needs
  - Ex: Lack of availability for hemodialysis patients, lack of memory care services.

- Lack of infrastructure to address patient needs
  - Ex: Lack of available bariatric beds despite patient being otherwise eligible.

- Lack of insurance coverage or eligibility for services to meet patient needs
  - Ex: Lack of coverage for more expensive or specialized post-acute services

What other underlying issues prevent discharge for patients with medical needs?

Potential Solutions

- Linking specialty services to post-acute care.

- Improving infrastructure for post-acute care.

- Using solutions outside of post-acute care to follow-up with patient's medical needs.

Other strategies to meet medical needs?