

Bree Complex Discharge from Hospitals
May 18th, 2023

Discharge Data Around WA State

Health Care Authority:

Barriers to discharge, client-specific data, responsible MCO, the enrollee's discharge plan, MCO interventions, discharge location, discharge date, HCS involvement, date of admit, date of admin day start, medical stability

Washington State Hospital Association:

Current total number of hospitals days, number of hospital avoidable days, prior patient care setting, HCS eligibility, type of service, primary coverage, carrier name, discharge plan/placement location, primary, secondary, and other barrier.

Sample Metrics for Avoidable Stays:

- Length of Stay:
 - Individual: length of time between a patient's hospital admittance and discharge.
 - Average: Total number days from all inpatients during a single year divided by the number of admissions OR discharges.
- Avoidable Days:
 - Portion of an individual's inpatient length of stay accounted for by an avoidable delay in discharge (medical error, insufficient care delivery, lack of coordination.
 - Length of time a patient remains in acute care despite not meeting medical necessity for care.

Sample Data for Patient Characteristics:

- Patient demographics
- Primary payer/insurer
- Prior patient care setting
- Discharge plan/placement location

Sample Data for Discharge Barriers:

- Medical:
 - Alzheimer's/dementia/TBI
 - Bariatric status
 - High Care Needs
 - Hemodialysis/Dialysis Availability
 - Wound Care
- Behavioral:
 - Complex behavioral need
 - SUD (Current or history)
 - Lack of psych support/services
- Social Needs:
 - Housing/homelessness
 - Undocumented
 - Lack of family support/cooperation
- Legal:
 - Guardianship
 - CPS/APS
 - Prior conviction (esp. sex offender/arson/violence)
- Process:
 - Delayed insurance authorization/prior authorization
 - DME coverage
 - COPES
 - DDA Delays
 - Delays from HCS
 - Transfer to Eastern/Western

Sample Data for Efficient Discharge

- Efficiency of discharge process
 - Documentation of assigned roles and responsibilities for discharge process as well as written discharge procedures.
 - Documentation of discharge assessments, plans, actions, and outcomes
 - Descriptions or written procedures for communicating discharge plan between stakeholders in the hospital and outside
- Timeliness of discharge planning
 - Time between commencement of discharge planning activities and hospitalization date (may be different metrics for planned vs. unplanned hospitalizations).
- Stakeholder satisfaction
 - Measures of satisfaction with the discharge plan and intended post-acute care environment from hospital staff, post-acute care staff, and patients.
- Impediments to discharge (see metrics for discharge barriers, above)