Metrics related to complex discharge should include barriers and an indicator of an avoidable stay. We are interested in the overlap between patients with complex barriers to discharge and patients who stay longer than medical necessity.

**Sample Metrics for Discharge Barriers:**
- Payer/Insurance status
- Patient complex physical health needs
- Patient complex behavioral health needs
- Patient social needs

**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 Metrics for Discharge Process

- **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)**
  - Measures of commonly occurring discharge barriers to address.