

How to Prepare for a Safe Discharge?

Leaving the hospital is a major step in your recovery. A safe and well-planned discharge can help prevent complications and avoid unnecessary readmission.

20% of Adults age 65 and older are readmitted within 30 days of discharge

Unplanned readmissions can delay healing and increase stress for patients and families

Careful discharge planning helps ensure you receive the right care at the right time.

Possible Next Levels of Care

Acute / Inpatient Rehabilitation Intensive therapy 3 hours daily for patients who can tolerate and benefit from aggressive rehabilitation with 24/7 medical supervision.	Sub-acute Rehabilitation Moderate therapy for patients needing rehabilitation but not able to tolerate intensive programs. Includes skilled nursing care.	Long-Term Acute Care Hospital (LTACH) Extended medical care for patients with serious conditions requiring ongoing acute hospital-level treatment and monitoring.
Home with Home Health Services Return home with either home health services (visiting professionals) or outpatient therapy appointments at a clinic or rehabilitation center.	Home with Outpatient Therapy Return home with regular therapy at a clinic setting as needed, typically 1-2 times weekly per discipline.	

Before Discharge

Make sure that:

- You understand any changes to your medications and confirm prescriptions
- Your people have completed caregiver training to safely support you
- Your follow up appointments scheduled
- Your recommended Durable Medical Equipment (e.g., walker, bedside commode etc) is ordered and is arriving to the hospital before discharge or to home per the need

If discharging to a facility, ask -

- What does a typical day look like (therapy intensity, nursing care, visitation)?
- How long can I expect to stay at this level of care?
- Which facilities are reputable and appropriate for my needs?

⚠ IMPORTANT: It is vital that you do your own research or reach out to others who can help as rehabilitation facilities vary in quality, scope of services, and areas of specialization.

If discharging back home, ask -

- Will I have enough support at home (SAFETY first)?
- How often will home health or outpatient therapy be provided?
- Does the home health agency offer the specialty care I require?

⚠ IMPORTANT: Make sure you are fully understand the level of supervision your PT/OT/SLP are recommending as well as safety strategies and home exercise program

Speak Up: The CUS Tool

If you have reservations about the plan, try the "CUS Tool" for self-advocacy:

C - Concerned

"I am **concerned** about this procedure"

U - Uncomfortable

"I am **uncomfortable** discharging home without support"

S - Safety

"I worry that this is a **safety** issue"