



## **Discharge Planning**

Patients are admitted or transferred to Palliative Care on 3 South for specialized palliative care (symptom management) and/or terminal care when medical necessity requires hospitalization. The goal of palliative medicine is to assist patients in achieving and maintaining their maximum physical and psychological well-being despite the complex problems they face as a result of the disease and its treatments.

Saint Joseph's Palliative Care Unit is an acute care setting, meaning a patient needs to meet criteria for continued acute hospital care. Medicare and private insurance set up these guidelines. A case manager is available to discuss discharge options with the patient and family. The physician will consult the case manager as needed to assist the patient/family in discussing and identifying alternative care options.

Options include (but are not limited to):

- Home without support services
- Home with Home Care Services
  - Home Care
  - Hospice Home Care
    - House of the Dove Hospice Home
    - Nursing home
  - With or without Hospice follow-up (dependent on payer source)
- Supportive Home Care
- Community Based Residential Facility

Depending on the site of discharge and specific situations the case manager will assist with information regarding placement, associated costs, transportation from the hospital at time of discharge and any equipment needs such as hospital bed, wheelchair or commode.

For all patients discharged (except nursing home transfers), nursing will review the patient's medication and treatments (such as dressing changes) and provide teaching prior to discharge.

Review of the current home medications and prescriptions will be part of the RN discharge planning.

In circumstances where the patient has difficulty comprehending, or is unable to participate in this teaching, a member of the family needs to be available for discharge teaching. The patient and/or family will receive prescriptions for new medications the day of discharge. It is the responsibility of the patient and/or family to fill those prescriptions for home use (which includes those served by home care and hospice).