

Discharge Planning

Discharge Planning begins at admission. Early planning supports timely patient progression and improved hospital throughput.

WHY ITS IMPORTANT

- Staffing gaps increase case management caseloads, delaying discharge planning and care progression
- Delayed discharge planning leads to longer length of stay
- Bottlenecks in DCP can lead to lost opportunity for new admissions
- Average cost of one day hospital stay in US is \$3,025 (debt.org) excluding surgery (those are higher)

WHY THESE METRICS MATTER

- Build strong post-acute services relationships to maintain timely placement options
- Track avoidable days and address common barriers to discharge
- Include observation patients in discharge planning workflows
- Start discharge planning early within 24 hours of admission
- Implement daily multidisciplinary rounds that are case management driven
- Engage social workers early for complex discharge needs
- Monitor long length of stay cases and escalate barriers quickly



**Optimized Case Management
Integrity Staffing**



**Discharge Planning Support &
Care Placement Accuracy**



Behavioral & Mental Health Support



Enhanced Physician Communication



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