

Q: How can I stop the hospital from discharging my Dad too quickly?

A: Once the physician decides that your father's health is stable enough to no longer need acute hospital care, she'll authorize his discharge. This doesn't mean that your Dad is completely recovered and can resume a normal life. He might need other forms of care before he can go directly home and be on his own. That's where the discharge planners come in: Their job is to make sure that arrangements have been made before your Dad leaves the hospital to assure that his discharge is, according to Medicare, "safe and adequate." The discharge planner may be a nurse, a social worker or other professional who will be your primary contact in making plans for your Dad's transition from the hospital to his next level of care. Perhaps your Dad will need short-term care in a nursing home, rehab center, or assisted living facility or he'll need home health care nurses to provide care in his own home.

What's meant by "safe and adequate" is up to you, the doctor and discharge planner to determine. You really need to be involved in deciding whether or not your Dad can safely make a transition to another level of care outside of the hospital. The discharge planner will surely ask whether or not your Dad lives alone. If he does live with your

mother, but your mother is not well enough to take care of him, you need to speak up. Plans for discharge must be realistic.

The discharge plan is immediate and short-term. It's not a plan for the long run. It's to get your Dad past his most immediate health issues and onto the road to recovery. These first steps, however, should lead to a sound, feasible long-range plan to keep your Dad healthy. To best assess his needs, ask the doctor to tell you exactly what your Dad will be capable of doing once he leaves the hospital and what type of health care he will need. For instance, if he is recovering from a stroke you'll want to ask questions like: At what level are his thinking skills? Will he need assistance with bathing, eating, using the toilet, grooming, dressing, or taking medications? Will he need physical and occupational therapy (how much and how often)? Answers to these questions determine whether or not you can take him home using home health care or whether or not he needs care in a facility.

You might disagree with the physician's decision to discharge your parent. Perhaps you believe he is not well enough or that releasing him without adequate care will jeopardize his already precarious condition. You can do something. Your father's rights

are clearly worded in the “An Important Message from Medicare” statement that the hospital must provide to you. It tells you that your parent has the right to receive all of the hospital care he or she needs and necessary follow-up care after leaving the hospital. The hospital will also give you a written notice known as a “Hospital-Issued Notice of Non-coverage,” also referred to as a HINN. On that form, check out the phone number of the Quality Improvement Organization



(QIO). Call them and tell them you want to file an appeal to delay your father’s discharge. Until the

QIO makes a decision, the hospital can not force your Dad to leave or force you to pay for his continuing care in the hospital.

The best defense against scrambling to find alternative care when the hospital is asking your parent to leave is planning in advance. It’s really worth your time to engage in what I call the “If” game with your parents. You play it while they’re well. Start by telling them you want to do what’s best for them in the event they can’t take care of themselves. So...“If you had a stroke and needed to recuperate before they let you back home, where would you like to go? If you had a heart attack, what hospital would you like to go to? If you broke your hip and could go home only if you had home health care, who would we hire? If you had cancer, would you want to try alternative treatment or opt for chemotherapy and radiation, and would you want us to call hospice?” Frankly, most people will not have ready answers to these questions, so ask your parents to start visiting and researching potential facilities, so you’ll know where to turn. The goal is to keep them in charge and to make smart, informed decisions when “heads are cooler” than in the heat of an emotional crisis.

Q: My Mom is in the hospital and now my Dad’s health seems to be failing. What’s going on?

A: Your father is reflecting what a group of researchers learned studying over a half million couples who experienced the hospitalization of a spouse: it’s extremely

stressful and can pose very serious health risks for the “well” partner. In fact, it can even place the spouse at greater risk of death. The study, sponsored by the *National Institutes of Health* and led by Harvard