

## **Hospital stays: Next steps after discharge**

Do research on available options and insurance allowances

## **Rehabs:**

In home: Types that may be ordered – allotments may vary depending on reason for hospitalization

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Nursing

Inpatient Rehab: Types that may be ordered – allotments may vary depending on reason for hospitalization. Same as in home but with more monitoring, 24/7 care by professionals to build independence.

- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Nursing

## **Long Term Care Facilities:**

Independent Living: Least supervision and support, person is able to live independently but has monitoring in the event of emergencies or simple support.

Assisted Living: Persons who need support for activities of daily living (ADL), on a smaller scale.

Skilled Nursing Facilities: Similar to inpatient rehab. Persons require more support of ADL's and monitoring than those listed above.

Memory Care Facilities: Persons with forms of dementia and cognitive impairments. Offers the highest levels of care, support, and higher security.



**Comfort Care:** When the treatment for the ailment is stopped and the quality of life is reevaluated.

**Palliative Care:** Offers pain management, symptom control, emotional support for the patient and caregiver, and a guided team to help make informed decisions for your person's care.

**Hospice Care:** Like palliative care, but the condition is deemed terminal. Typically, Hospice is available to those who have a life expectancy of 6 months or less. This does not mean that your persons will pass within those times; special conditions may extend beyond that time period (Dementia being one of those conditions). Treatment for the terminal conditions are ceased, and quality of life is the main focus. Hospital visits are no longer necessary but are still allowed, if utilized, and admission is required; one will be discharged from the Hospice program and readmitted upon discharge.

Note: Many palliative and hospice companies share the same goals and company names. They are contracted out through your persons insurance, like doctors, you may choose which company to utilize.

**Questions to consider asking prior to discharge:**

- What services are included? (Inpatient, In Home, etc.)
- How often are services offered, how many visits are included?
- What is covered by insurance (Medicare, Medicaid, Self pay, etc.)
- Who do we call after work hours? (Inpatient, In Home, etc.)
- Signs to look for that higher level of care needed?