

An Analysis of “Live Discharge” Events by Disease Type

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Background

Hospice is a form of specialized, team-delivered health care at the EOL that focuses on palliative, rather than curative care.

Most hospice patients are discharged from hospice care upon death, but some are discharged alive.

Live discharge accounts for 1 in 5 hospice admitted patients.

Why is this an issue?

Implications of live discharge.

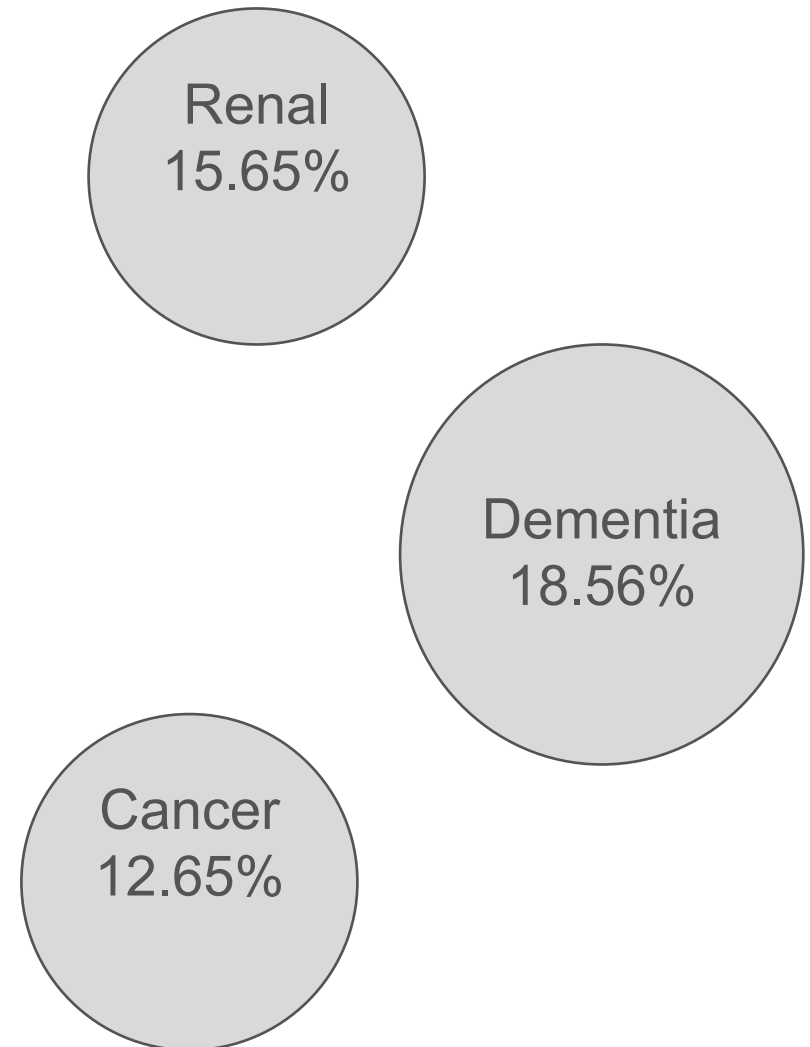
- Taking hospice spaces away from patients who require it more.
- Psychological implications of patients and their families.
- Loneliness and confusion after discharge.

Disease Types

- Renal Failure
- Cancer
- Dementia

Methods

- Focus groups held with the hospice staff and families of the patients who were discharged live from hospice.
- Separated the patients into category of disease type.
- Evaluate the percent of live discharge per disease type.



Conclusions from Findings

- Should they have gone to hospice?
- What are the other options?
- The transition from hospice is negative, when it should be positive.
- Does diagnosis play a role in live discharge?
- Admission reform could help resolve the issue of live discharge rates.

Moving Forward

- Working as a team to understand if admission policies can be adjusted to reduce the amount of patients admitted and live discharged.
- Expand our data set to evaluate more live discharges and their disease type.
- Construct findings that can lead to policy reform.

Questions?