

Discharge Planning Glossary

Early planning to leave the hospital will start on day one of your stay. The care team may talk to you about adding help based on your medical condition. Here are words that you may hear our team use:



Custodial Care or Basic Care Nursing Home

Custodial care or basic care nursing homes help individuals with their daily living needs (bathing, toileting and grooming), preparation of meals and giving medication that does not require constant attention of a nurse or doctor. This type of nursing home care is designed for individuals who can no longer live alone and need 24-hour assistance. Most insurance providers, including Medicare, do not cover this care.

Durable Medical Equipment

Durable medical equipment helps individuals remain functional by adding additional supports. The durable medical equipment company will identify if the equipment is covered by insurance. A doctor's order is needed when ordering equipment. Examples of durable medical equipment include a walker, wheelchair or hospital bed.

Home Care/Home Health

Home care is medical care provided to individuals at home to help them get stronger. This type of care requires a doctor's order. Home health care may include skilled nursing care, speech therapy, occupational therapy, and/or physical therapy. There are very specific criteria set by insurance companies to qualify for home care services. For example, an individual will need to be homebound and require skilled care.

Home Infusion

Home infusion companies bring intravenous (IV) medication to individuals' homes where nurses administer medicine ordered by a doctor. The infusion company will determine if its services are covered based on your insurance.

Hospice

Hospice is giving support to an individual in the final phase of an illness/end-of-life care, with a focus on making the individual comfortable rather than finding a cure. The care is provided in the individual's home or in a nursing home under custodial care. The hospice care approach uses a team, including the services of a nurse, doctor, social worker, home aide and clergy. The goal of hospice care is to meet the individual's emotional, social and spiritual needs during end-of-life care.

Inpatient Rehabilitation Facility

An IRF provides intensive rehabilitation services using an interdisciplinary team approach in a hospital environment. Admission to an IRF is appropriate for patients with complex nursing, medical management, and rehabilitative service needs.

- Be sufficiently medically stable to benefit from IRF services
- Require close medical supervision by a physician for managing medical conditions
- Require an intensive rehabilitation therapy program, generally consisting of 3 hours of therapy per day at least 5 days per week; or in certain well-documented cases, at least 15 hours of intensive rehabilitation therapy within a 7-consecutive day period, beginning with the date of admission

Long Term Acute Care Hospital

The long term acute care hospital (LTACH) provides specialized care for individuals who are very ill with many issues or need a long hospital stay.

Skilled Nursing Facility or Skilled Nursing Home

Skilled Nursing Facility (SNF) care requires a physician order stating that the individual needs daily skilled nursing care or other skilled rehabilitation (physical, occupational or speech) services that are related to the current hospital stay. The goal for a SNF is to increase individuals' functional abilities and return them to their prior-to-hospital condition. For example, a Medicare patient with a stroke will need physical therapy and occupational therapy before going home.

The Case Management department can provide you with more information related to post-hospital care. Each hospital area has a case manager to assist with complex discharge planning needs identified by the medical team. Contact (804) 765-5295 with any questions.



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