**Regional discharge planning objective and priorities**
**January 2018**

Identified objectives:

1. Develop contact list of regional discharge planning workgroup for distribution between members to increase continuity of care
2. Identify priorities through survey to establish workgroups to focus on specific priorities.

Priorities:

1. Transportation:
   Map out existing resources and gaps to develop plan for transportation solutions
   - Ambulance service won't transport clients because it's not a "medical issue
   - Challenges using MTM
   - Lack of access to transportation for Medicaid
   - People with Medicare don't have enough services
   - Transportation for elderly

2. Collaboration:
   Develop and formalize relationships and processes between community providers to facilitate efficient and effective patient transfers between levels of care
   - Develop mechanism to strengthen community provider relationships
   - Have a clear point of contact at agencies
   - Utilize Zoom meetings for multi-disciplinary teams with client participation
   - Develop discharge planning task force
   - Consider community advocate
   - Implement follow up calls upon discharge
   - Use of database for collaborative case management

3. Connection:
   Establish best practices to strengthen client motivation to connect with services using "client centered" lens for transfers between levels of care.
   - Building relationships using client centered lens
   - Identify and mitigate barriers for client entry into services
   - Change in system perspective: Instead of people asking for help at identified agency, the agency goes to the client to provide help
   - Utilize resource liaisons/ community health workers
   - Incorporate peer/ family voice in planning and service delivery

4. Older adults:

Identify gaps in care for older adults
- Lack of timely access to appropriate levels of care for older adults
- Lack of community based services to keep older adults stable in their homes
- Develop solution for crisis response for individuals
- Lack of geri-psych beds for dementia and behavioral issues
- Lack of placement for older adults with behavioral health issues
  -Delay in time required to be approved for institutional care and community based waivers

5. Housing:
Identify housing gaps and needs for individuals discharging from higher levels of care
- Often no bridge housing, no housing, affordable housing available for individuals discharging from higher levels of care

6. Vulnerable Adults:
Develop strategies to identify agencies, initiatives, and support for vulnerable adults 18-59
- No agencies in Nevada to provide crisis response to vulnerable adults 18- 59
- Nevada one of 5 states left to have Elder Protective Services, but no Adult Protective Services
- Nevada Aging and Disability Services Division (ADSD) is interested in developing capacity for Adult Protective Services

7. Behavioral Health Parity:
Develop strategies to increase timely access to appropriate levels of care for individuals with behavioral health needs

8. Discharge medication support: Identify community solutions to assist patients in overcoming barriers to obtain medication upon discharge.
  Reported barriers:
  - Seasonal availability
  - Copay/cost/ prior authorization

  Suggested solutions:
  - Develop mechanism from discharging hospital
  - Utilize What's app, zoom