

LTACH ROADMAP TO DISCHARGE

PRE-ADMISSION

Your Liaison will meet with you to discuss your goals for admission, anticipated length of stay, explain how the LTACH differs from other levels of care and plans for future meetings with your care team.

UPON ADMISSION

Your care team, led by your physician, will review **goals for your stay** during a meeting with you and/or your caregiver.

WEEK #1

Your Case Manager will schedule a meeting with you, your caregiver and your care team to provide a **clear explanation of time-framed goals and anticipated length of stay** and provide time to answer your questions.

WEEK #2

Your Case Manager will schedule a meeting with you, your caregiver and key members of your care team to **review your progress towards time-framed goals and anticipated length of stay**. Together with your care team we will **confirm your discharge plan**, and you will be provided with a list of resources for your discharge needs.

WEEK #3

If your plan is for **discharge to home**, the team will **identify supplies and training** needed for you and your caregiver. If you are **not being discharged to home**, your Case Manager will meet with you and your caregiver to **choose your preferred facilities** and will begin the referral process.

WEEK #4

Your Case Manager will **confirm the finalized discharge plan** with you and your caregiver.

Discharge to home
or next level of care

DISCHARGE



GOOD SHEPHERD
PENN PARTNERS

SPECIALTY HOSPITAL
at RITTENHOUSE

LTACH ROADMAP TO DISCHARGE

Long-term acute care hospitals (LTACHs) specialize in treating patients who often need ongoing care but no longer require intensive care or diagnostic procedures. Patients admitted to the LTACH typically have serious medical conditions or injuries that involve respiratory care. The length of stay is usually about four weeks; however, each patient's situation is different, and their stay is based on their needs.

Care Team - the team of health care personnel that cares for you while you are a patient on the LTACH.

Liaison - a member of the care team who acts as link between the hospital and the LTACH to evaluate if you will benefit from this level of care and assists in coordinating your transition if you will be admitted.

Case Manager - a member of the care team who assists you, your caregiver and your care team at the LTACH in discharge planning.

Caregiver - your family member, partner or spouse or friend who assists you with care and/or care decisions.

Notes: _____

