THE CARE PARTNER PROJECT

Preview Safe & Sound™ Checklists

Plan Discharge and Support Recovery

Contact us for more information or to subscribe:
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YOUR LOGO

CARE PARTNERS ARE KEY:

The Discharge Conversation!

Make sure you're able to be present with your loved one for their discharge meeting with the nurse.

Take good notes and speak up with questions. You may ask permission to record the discharge conversation on your phone, especially if you explain that you don't want to bother them later with a call in case you miss an important detail.

PLEASE NOTE:

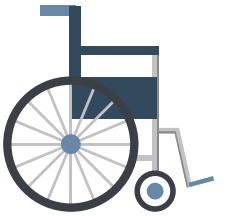
If your loved one doesn't have any support for recovery at home, it is okay to say: "This is an unsafe discharge."

The hospital will then hold off discharge until support care can be arranged.

HOW TO HELP

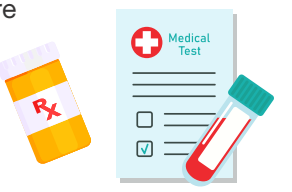
TRANSITION FROM HOSPITAL TO HOME:

- ☐ **Ask for a meeting with a discharge planner** early in your loved one's stay, ideally on Day One.
- ☐ **On the day of discharge, be sure to stay with your loved** one during the entire discharge conversation. This is no time to get the car—a very common practice!
- ☐ **Discuss the home environment for safety** equipment that may be needed.



- ☐ **Ask where to rent or buy any needed medical equipment or supplies.** TIP: *Many communities have lending programs through churches and senior centers.*
- ☐ **Ask when the hospital stay records will be sent** to your loved one's main doctor.

- ☐ **Confirm follow-up doctor appointments** needed (when, with which doctors).
- ☐ **Find out if follow-up tests are needed** or if there are prescriptions to fill.
- ☐ **Record the medications administered the day of discharge,** including the time and dose.



- ☐ **Cover driving limitations** (if any), and any other limits, like exercise.
- ☐ **Ask about signs or symptoms to watch for,** when to get medical attention, and if there's a hospital hotline.
- ☐ **Find out if skilled care is needed—**for example, speech therapy, physical therapy, occupational therapy, wound care.
- ☐ **Get specifics on any diet and nutrition needs,** including groceries to buy or remove from the home.

- ☐ **Ask if your loved one could benefit from electronic monitoring equipment** which reports info directly to the doctor. Will hospital supply?

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YOUR LOGO

HOW PATIENTS ARE AT RISK OF OVERDOSING AT HOME:

- *Patients are typically given a dose of medication before leaving the hospital.*
- *The patient may take another dose too soon by mistake if they're in the habit of taking the same medication before bed, or if their residential community administers medications on a schedule.*
- *The second dose, taken in error, can send them right back to the hospital.*

Yes, it happens... more often than you can imagine! Another reason why your help as a Care Partner to your loved one is invaluable!

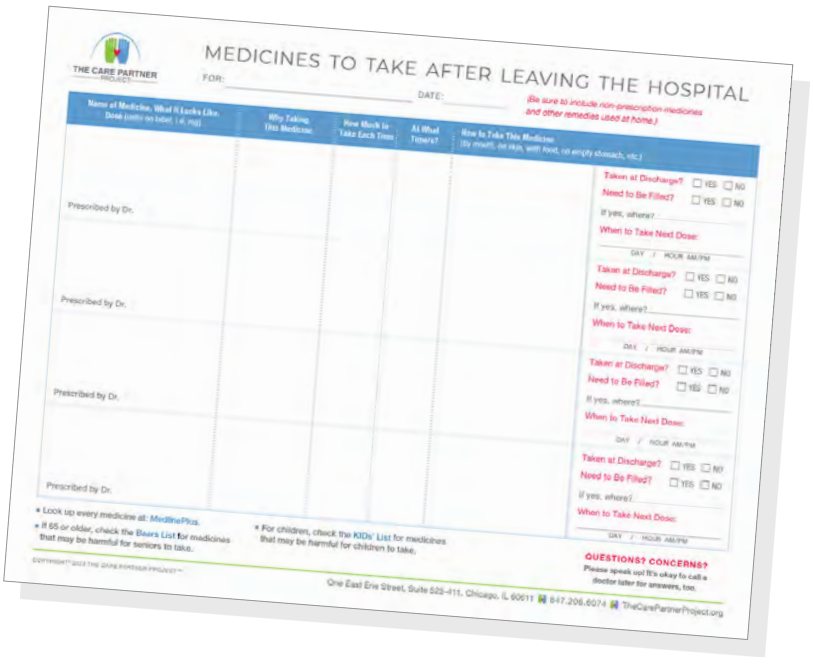
HOW TO HELP

AVOID MEDICATION MIX-UPS:

In the hospital, there are many steps involved in making sure a patient gets the correct medication—yet, mistakes occur sometimes. Use our Medication Record to have a clear plan of what your loved one takes and when.

If your loved one's home is in assisted living, memory support, long-term care or rehab, make doubly sure that:

- ☐ You complete the Medication Record.
- ☐ Your loved one's Medication Record is shared with everyone involved in their care.
- ☐ The staff has several copies.
- ☐ **All nurses involved in your loved one's care are aware of all medications taken the day of discharge and any changes to your loved one's prior medication routine.**
- ☐ **You call to follow up** and confirm all details.


MEDICINES TO TAKE AFTER LEAVING THE HOSPITAL

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YOUR LOGO

Be sure to ask nurses and doctors about medications your loved one may need that don't require a prescription, *such as those for:*

- *Headaches.*
- *Sleeplessness.*
- *Pain.*
- *Cold/Sinus.*
- *Allergies.*
- *Nausea.*
- *Diarrhea.*
- *Quitting smoking.*
- *Nutrition (vitamins, herbs, protein supplements).*

Ask for recommendations of *those that will not interfere, or cause bad side effects, when taken with the new prescriptions your loved one is taking.*

Why not double-check with the pharmacist *who fills your loved one's prescriptions? They are a wonderful resource and will be glad to know you're being so careful.*

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HOW TO HELP

MANAGE MEDICATIONS:

During a hospital stay, it's common for doctors to adjust patients' medications and routine for taking their prescriptions. There may be medications at home that are not needed anymore, or may be in different doses than needed going forward. It's really important to make sure these are removed to help prevent any medication mix-ups—which can be dangerous!

Do not flush or throw these medications in the garbage—it's unhealthy for Mother Earth, as they make their way into our water systems. Instead, take unusable medications to a safe disposal location. Some pharmacies, hospitals and public safety centers—such as your local fire department—will take them off your hands and dispose of them responsibly.

OLD MEDICATIONS TO DISPOSE OF:

Medication Name	Form	Dosage	Doctor

YOUR LOGO

Sometimes, patients ignore signs of health problems after a hospital stay, *hoping they will "just go away." This is fairly common — no one wants to think about going back to the hospital!*

Care Partners have an important role to play, *monitoring a loved one's recovery and, possibly, providing moral support, can help ensure that any medical complications are spotted and treated early.*

Don't hesitate to call your loved one's doctor *for any health problems you see or your loved one tells you about.*

Trust your gut. *It's okay to call about anything that "just doesn't seem right" concerning your loved one's physical, mental, or emotional wellbeing.*

HOW TO HELP

RECOGNIZE RECOVERY SETBACKS:

Go over this list with your loved one every day for at least a month after leaving the hospital. It will help both of you stay on the lookout for early signs of complications.

- ☐ Increase in pain — anywhere!
- ☐ Headaches or fever.

- ☐ Coughing, congestion.
- ☐ Bulging neck veins.
- ☐ Light-headed, dizzy.
- ☐ Confusion.

- ☐ Chest pain, indigestion, heartburn.
- ☐ Heart thumping or fluttering.

- ☐ Trouble breathing, shortness of breath.
- ☐ Nausea, vomiting.
- ☐ Appetite not improving/ loss of appetite.
- ☐ Swelling in stomach, ankles, legs.

- ☐ Weight gain of 2+ lbs. in just a day or two.
- ☐ Burning or pain in legs or arms.

- ☐ Trouble walking.
- ☐ Trouble sleeping.
- ☐ Body chills, body aches.
- ☐ More frequent need to urinate, especially at night.

- ☐ Blood in urine or stool, rectal bleeding.
- ☐ Diarrhea.
- ☐ Sores or raised red bumps that look like insect bites, open oozing sores, or open breaks in skin.

- ☐ Increasing redness or swelling around wound/stitches.
- ☐ Any oozing from wound(s) or stitches.
- ☐ Sadness, hopelessness.

- ☐ Lack of energy.
- ☐ Others suggested at discharge:

_____

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YOUR LOGO

After a hospital stay, patients often need special supplies.

It's best to have these on hand even before your loved one leaves the hospital.

Many will apply to your loved one's care, but many won't. It's okay to ask a nurse or hospital case manager to help you decide what to get.

They are very familiar with all of these items and may have ideas about certain products that are best for your loved one. They'll be glad to know you're thinking ahead!

HOW TO HELP

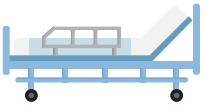
GET SUPPLIES FOR RECOVERY:

START WITH:

- ☐ Thermometer.
- ☐ Call bell.
- ☐ Night light.
- ☐ Flashlight with new batteries.
- ☐ Extra batteries for TV remote.
- ☐ Weight scale.
- ☐ Non-skid socks, good-fitting slippers.
- ☐ Compression socks or stockings.

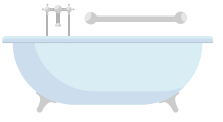
BEDROOM & RESTING:

- ☐ Bed rails.
- ☐ Foot stool.
- ☐ Head or neck supports.
- ☐ Foam cushions (to prevent bed sores).
- ☐ Heel cushions.
- ☐ "Doughnut" pillow.
- ☐ Disposable sheet protectors.
- ☐ Hospital bed.



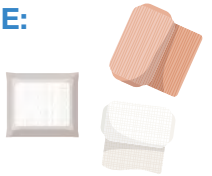
- ☐ Sitz bath.
- ☐ Bed pan or portable urinal.
- ☐ Standing security pole.
- ☐ Other: _____

BATHROOM:



- ☐ Grab rails.
- ☐ Shower seat.
- ☐ Non-skid bath mats or strips.
- ☐ Raised toilet seat.
- ☐ Disposable underwear.
- ☐ Night light.
- ☐ Other: _____

WOUND CARE:



- ☐ Bandages.
- ☐ Gauze.
- ☐ Tapes.
- ☐ Ostomy pouches, supplies.
- ☐ Barrier cream.

- ☐ Other ointments.
- ☐ Cleanser.
- ☐ Antibacterial soap, foam, or gel.

FOR MOVING AROUND:

- ☐ Cane.
- ☐ Crutches.
- ☐ Walker.
- ☐ Wheelchair.
- ☐ Scooter.
- ☐ Lift.
- ☐ Other: _____

MEDICAL DEVICES:

- ☐ Blood pressure cuff.
- ☐ Thermometer.
- ☐ Diabetes test supplies.

- ☐ Glucose monitor.
- ☐ Insulin pump.

- ☐ CPAP machine.
- ☐ Peak flow meter.

- ☐ Apnea monitor.
- ☐ Room monitor.
- ☐ Medical alert phone service.

NUTRITION/GROCERIES:

- ☐ Protein shakes, bars.
- ☐ Other: _____

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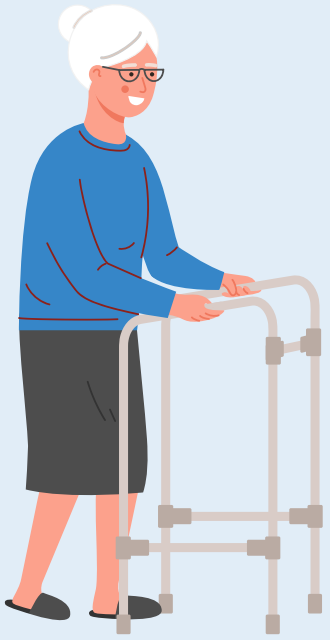
YOUR LOGO

Try to plan ahead for the home adjustments and supplies *your loved one is likely to need after a hospital stay. Talk to a case manager or discharge planner as soon as you can. They will fill you in on what to anticipate and what items to have on hand for a safe and sound recovery at home.*

Most of these items can be ordered online. *They should arrive promptly enough so that you won't have to spend precious time running from store to store.*

Preventing falls is a top priority.

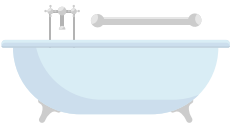


HOW TO HELP

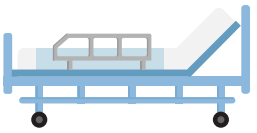
SAFETY-PROOF LOVED ONE'S HOME:

SAFETY-PROOFING SUPPLIES:

- ☐ Non-slip rubber mat for the tub or shower.
- ☐ Grab-bars for the shower and next to the toilet (towel bars are not strong or secure enough to handle any weight).



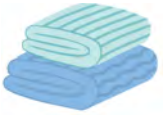
- ☐ Shower sponge with long handle.
- ☐ Shower chair.
- ☐ Elevated toilet seat.
- ☐ Portable commode.
- ☐ Hospital bed.



- ☐ Hoyer lift (helps in/out of bed and chairs).
- ☐ Shoehorn with a long handle.
- ☐ Sock aid to help put on socks.
- ☐ Dry shampoo.
- ☐ Reacher with long handle to pick up items from the floor or help with dressing.

- ☐ Cane, crutches, walker, wheelchair.
- ☐ Blood pressure monitor.
- ☐ Pulse oximeter.

- ☐ Bathroom scale.
- ☐ Small blankets for chair, recliner, and sofa sitting.



- ☐ Non-skid socks or a good-fitting pair of slippers.
- ☐ Extra batteries for the TV remote.

- ☐ Phone chargers.

SAFETY-PROOF THE HOME:

Try to imagine what it would be like to move around the home with less energy or physical limitations. Look for ways to make everyday life both convenient and safe for your loved one.

- ☐ Consider setting up one room to serve most needs, ideally on the main floor close to a bathroom or portable commode. Equip with a bed, cell phone, TV, remote (with extra batteries), comfy chair, laptop, iPad, chargers, and any other creature comforts close by.
- ☐ Remove throw rugs in the house—they're a tripping hazard!

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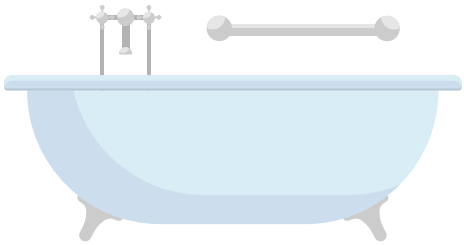
- ☐ Consider an electronic thermostat that controls heat and air through an app on the phone.
- ☐ Repair any uneven floors.
- ☐ Place nightlights in halls, bathrooms, the kitchen, and any other rooms your loved one may use at night.
- ☐ Remove any loose wires or extension cords that could cause a trip, or where equipment could become entangled.

SAFETY-PROOF THE BATHROOM:

The bathroom is where most accidents occur. Water, slippery tiles, and hard porcelain surfaces make a perfect storm for disaster. These little spaces need a lot of attention!

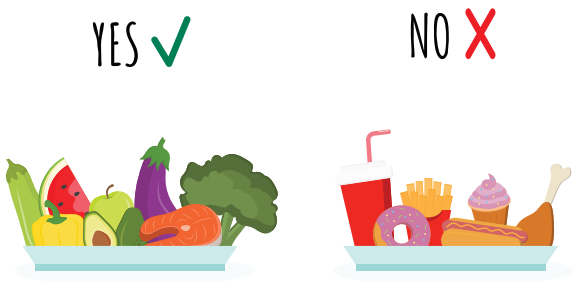
- ☐ Secure grab bars to the shower/tub wall and next to toilet either horizontally or vertically — not diagonally.



- ☐ Consider a portable commode or raising the toilet seat height using an elevated seat.
- ☐ Install non-slip suction mats or rubber silicone decals in the tub or shower floor to prevent falls.
- ☐ Be mindful of water on the floor and wipe it up immediately.
- ☐ Make sure the towels are in easy reach of the shower or tub.
- ☐ Make sure the shower curtain slides easily.
- ☐ Clean up any messy drips from shampoo, soaps, or lotions.
- ☐ Make sure a good hand soap is in easy reach of the sink faucet.

SAFETY-PROOF THE KITCHEN:

- ☐ Put glasses, plates, bowls, silverware and all food items in easy reach so that no tip-toes or bending is required.
- ☐ Make sure the eating table and chair are sturdy and positioned so they don't create a hazard.
- ☐ Make sure entrances and pathways are wide enough to fit a wheelchair or walker if needed.
- ☐ Keep the fridge and cabinets stocked with foods recommended for recovery and good health.
- ☐ Remove food and drink items discouraged by doctors.



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Nothing in life prepares your patients and their loved ones to manage a serious illness. Safe & Sound™ resources express your empathy and commitment to care that meets patients where they are.

Together, you are prepared to partner for patient-centered care.

Ready to partner for patients? Let's talk!

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