A-Engrossed House Bill 3378

Ordered by the House April 23 Including House Amendments dated April 23

Sponsored by Representatives GREENLICK, NATHANSON; Representatives GOMBERG, KENNEMER, KENY-GUYER, READ, SMITH WARNER, WHISNANT, WILLIAMSON

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Requires hospital to adopt written discharge policies. Specifies requirements for policies.

A BILL FOR AN ACT

2	Relating to hospital discharge planning with lay caregivers.
3	Whereas Oregon's health care transformation efforts include improved health care by achieving
4	the "Triple Aim" objectives of reducing costs, improving health and enhancing patient experience,
5	including engaging the patient and family caregiver as part of the care team; and
6	Whereas family and other lay caregivers play an important role in supporting their loved ones
7	during and after a hospitalization; and
8	Whereas family caregivers are valued members of the patient centered care team and supporting
9	family caregivers will further promote high quality care; and
10	Whereas best practices for admission, discharge planning and time of discharge recognize the
11	unique needs of each patient and each patient's support group; and
12	Whereas about half of all family and other lay caregivers perform medical or nursing tasks such
13	as wound care, complex medication management and injections for their loved ones; and
14	Whereas most family and other lay caregivers receive little or no training for these complex
15	tasks; and
16	Whereas most patients do not receive a home visit by a health care professional after discharge
17	from a hospital; and
18	Whereas hospitals are continuously striving to improve patient care and outcomes while reduc-
19	ing unnecessary readmissions; now, therefore,
20	Be It Enacted by the People of the State of Oregon:
21	SECTION 1. Section 2 of this 2015 Act is added to and made a part of ORS chapter 441.
22	SECTION 2. (1) As used in this section:
23	(a) "Aftercare" includes all of the following:
24	(A) Assistance with activities of daily living or instrumental activities of daily living.

charge, that is related to the patient's condition at the time of discharge.

(B) Medical or nursing tasks such as wound care, the administration of medications and

(C) Other assistance provided by a caregiver to a patient, following the patient's dis-

the operation of medical equipment.

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- (b) "Discharge" means a patient's release from a hospital following the patient's admission to the hospital.
- (c) "Lay caregiver" means an individual who, at the request of a patient, agrees to provide aftercare to the patient in the patient's residence.
- (2) A hospital shall adopt and maintain written discharge policies. The policies must include the following components:
 - (a) Hospital staff assess the patient's ability for self-care after discharge;
 - (b) The patient is provided an opportunity to designate a lay caregiver;
- (c) The patient and lay caregiver are given the opportunity to participate in the discharge planning;
- (d) The patient and lay caregiver are provided instruction or training, prior to discharge, as necessary for the lay caregiver to perform medical and nursing aftercare following discharge; and
 - (e) The patient's lay caregiver is notified of the patient's discharge or transfer.
 - (3) The discharge policies must specify the requirements for documenting:
 - (a) The lay caregiver who is designated by the patient; and
 - (b) The details of a discharge plan.
- (4) The discharge policies may incorporate established evidence-based practices, including but not limited to:
- (a) Standards for accreditation adopted by the Joint Commission or other nationally recognized hospital accreditation organization; or
- (b) The Conditions of Participation for hospitals adopted by the Centers for Medicare and Medicaid Services.
- (5) The discharge policies must ensure that the discharge planning is appropriate to the condition of the patient and shall be interpreted in a manner and as necessary to meet the needs and acuity of the patient and the abilities of the lay caregiver.
 - (6) This section does not require a hospital to adopt discharge policies that would:
 - (a) Delay a patient's discharge or transfer to another facility; or
- (b) Require the disclosure of protected health information without obtaining a patient's consent as required by state and federal laws governing health information privacy and security.

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