



WTW at Work

RELATE for Estimated Date of Discharge

REASSURE/ EMPATHIZE	<ul style="list-style-type: none">• We won't send you home before you are ready.• Your team of experts reviews your needs to make sure you get home safely and as quickly as possible.• Your questions are welcomed and important. At any time, please let us know if you have questions or concerns.• We will work to get you a follow-up appointment so your transition out of the hospital is smooth.• Our team is here to support you every step of the way and that includes ensuring we address any issues impacting your ability to safely transition out of the hospital.
--------------------------------	---

EXPLAIN	<ul style="list-style-type: none">• To be sure we have everything ready for you at discharge, we will talk about your estimated discharge date (the date we think you might leave the hospital) as early as when you're admitted.• Throughout your stay, we will help prepare you for your discharge.• We will keep you updated on your estimated day of discharge – when we expect you will leave the hospital.• Your estimated day of discharge is an estimate that we continue to review. You may go home sooner or later depending on your own care needs.• To help you be prepared, we will keep you updated if this day changes.• Getting you home as quickly as possible is best for your healing and recovery.• Staying in the hospital longer than you need is not best for you.• Because of the [test result/lab change/vital signs/etc.] we are extending your estimated day of discharge to [new estimate]. If anything changes, we will let you know.• We understand that everyone's situation is unique, and we will work closely with you and your family to develop a personalized plan that meets your specific needs and goals.• Our goal is to make sure you have a safe and seamless transition from the hospital to your next care setting, whether that's home or another facility. This may include arranging for follow-up appointments, coordinating with home health services, and providing education on managing your condition and medications.
----------------	---



LISTEN	<ul style="list-style-type: none">• What questions do you have?• What concerns do you have?
ANSWER	<ul style="list-style-type: none">• Great question. I am glad you asked.• <i>Address other questions/concerns using RELATE/WTW.</i>
TAKE ACTION	<ul style="list-style-type: none">• <i>Follow up on any agreed actions.</i>• <i>Include EDD in bedside shift report, and update patient and whiteboard when there are any changes.</i>
EXPRESS APPRECIATION	<ul style="list-style-type: none">• Thank you for allowing us to care for you.• Thank you for trusting us with your care.• Thank you for sharing your concern with me.



Things to remember

- 1. Reassure the patient.**
 - a. Let patients know you are going to take as much time as necessary to address their needs – that we won't rush them out the door.
 - b. Be present and mindful in the patient's presence. Being rushed or hurried increases patient anxiety and can leave the patient feeling like we are not giving them our proper attention or care.
 - c. Don't focus on other patients needing the beds as a reason to discharge or transfer. This is not reassuring. It minimizes the patient's needs and concerns, leaving them thinking, "But I need help too!" Reassure, explain, build trust to help patient feel safe to discharge.

- 2. Avoid a defensive attitude when discussing concerns and questions.**
 - a. Health care looks very different now and patients and families need compassion as they adjust. For many conditions, patients are discharged earlier than in the past, which can cause confusion and anxiety. Be patient and empathize if the patient shares concerns about being discharged.
 - b. Acknowledge and validate their concerns and situation:
 - i. "I'm glad you asked that. A lot of patients have the same concern so let's talk about it."
 - ii. "I'm sorry for the frustration you are feeling right now."
 - c. Phrases to avoid:
 - i. "Other patients are sicker than you and need the bed."
 - ii. "We are short-staffed."

- 3. Set expectations about reasonable time to be in hospital.**
 - a. Provide education on average lengths of stay for different conditions. With advances in treatments, patients don't spend as much time in the hospital as in the past. Example: overnight for knee surgery.
 - b. Follow-up appointments/phone calls and discharge planning provide patients with additional support when they leave the hospital.

- 4. Thank the patient.**
 - a. Thanking patients increases loyalty, reassures them and is best practice for providing quality patient-centered care.
 - b. This shows we acknowledge their time is valuable.
 - c. Patients have a choice on where to get their health care and being in the hospital is not easy. Thanking them is a simple way to acknowledge the challenge and show we appreciate them.