Health Beyond Hospital: Integrated Discharge Hub

January 2025 Update

Progress Update

During November and December, sites built, tried, and tested eight prototypes of **Health Beyond Hospital**: **Integrated Discharge Hub**. Some of these prototypes are continuing into 2025 and several of the prototypes are already showing early successes.

The **Complex Case Resolution** process prototype of an escalation pathway had a successful test-and-try. With this prototype, cases are brought forward for escalation if they meet the criteria for complexity or length of stay. Cases are packaged in a concise presentation and discussed among the escalation group for decision. This group is comprised of senior leaders from Nova Scotia Health and the Departments of Health and Wellness, Opportunities and Social Development, and Seniors and Long-term Care. The escalation group documents decisions made and the rationale for the decision. On this first test-and-try of the prototype, after several years, one patient's barriers to discharge have been resolved, and they have since transitioned out of the hospital.

The Care NS Hub is also showing initial success. The purpose of the Care NS Hub is to explore the benefits of physical co-location through encouraging integration of key roles from Nova Scotia Health and the Department of Opportunities and Social Development. With key partners in the same room, prompt knowledge-sharing and decision-making can occur, resulting in patients being discharged home sooner with the most appropriate supports. Through the initial test of this prototype, two patients who could be discharged to the same location were identified, providing synergy in their care delivery and expediting the discharge.

What Is It?

Health Beyond Hospital: Integrated Discharge
Hub is an initiative to support medically fit Nova
Scotians to return home from hospital sooner.
This enables greater collaboration between
hospital and communities through representation
of both groups on the discharge team. Partners
came together to review current state processes
and identify a model to test for Nova Scotia that
enhances collaboration and understanding
between hospital and community programs.

Testing the prototypes continues at sites across the province as we target a pilot implementation in the spring of 2025.

For more information:

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Who's Involved?

Nova Scotia Departments of Health and Wellness, Seniors and Long-Term Care, Office of Addictions and Mental Health, Department of Opportunities and Social Development and Emergency Health Services, Nova Scotia Health – Acute Care, Access and Flow, Frailty and Elder Care, Continuing Care, Mental Health and Addictions Program, and Care Coordination Centre (C3), supported by consultants Synthetikos and Shift Flow.





