

Stroudwater Hospital Branded Swing Bed Program Name

At Stroudwater Hospital (SH), we accept patients from tertiary hospitals to transition from acute care to sub-acute rehabilitation care. This allows a patient to continue receiving services in the hospital even though acute care is no longer required. The goal is to restore healing and regain strength for the patient to transition back to home or their prior living situation. The patient must meet certain criteria such as acute hospital care for at least three consecutive days before sub-acute rehabilitation is an option. In 2019 and 2020, SH discharged fewer than 4% of patients to a Long Term Care Facility. For information, please call Case Management at (207) 221-8250.

	2021\Q2	2020\Q3 - 2021\Q2
Measure 1. Return to Acute Care from Swing Bed This measure scores the percentage of the hospital's swing bed patients who were re-hospitalized after a swing bed admission	0%	9%
Measure 2. Return to Acute Care Post Discharge This measure scores the percentage of swing bed patients who were readmitted to the hospital's acute unit within 30 days from swing bed discharge date	0%	6%
Measure 3. Improvement in Mobility This measure scores the percentage of risk-adjusted swing bed patients who made at or above average improvement in mobility based on 17 measured items	75%	67%
Measure 4. Improvement in Self-Care Improvement in Self-Care - This measure scores the percentage of risk-adjusted swing bed patients who made at or above average improvement in self-care based on 7 measures.	50%	49%
Measure 5. Discharge to Community This measure scores the percentage of the hospital's swing bed patients who were discharged to home/community (includes d/c to home, ID/DD and home with home health care)	67%	62%

About Swing Beds

Swing beds provide a comprehensive post-acute inpatient program for the patient who has had an acute medical or surgical event as a result of an illness, injury or exacerbation of a disease process. The patient needs these skilled services for a medical condition that is either a 1.) Hospital-related medical condition that they were admitted with and treated for during a qualifying three-day inpatient hospital stay or 2.) Skilled level of care need that developed while hospitalized, even if it was not the reason they were admitted to the hospital. Swing beds offer an outcomes-focused interdisciplinary approach comprised of the patient and family, and utilizes a professional team including physicians, nurses, therapists, dieticians, pharmacists and respiratory therapists as needed to deliver clinical interventions (medical and/or physical rehabilitation). Compared with Skilled Nursing Facilities (SNF), swing beds traditionally have shorter lengths of stay, lower hospital readmission rates during the hospital stay and lower readmission rates to acute care within 30 days post swing bed discharge.