

## Optimizing Discharge Medication Education in Parents of Children With Medical Complexity

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Orchestrating a safe discharge and preventing unnecessary re-admissions in children with medical complexity (CMC) in the hospital setting continues to be a challenge for pediatric hospitalists on many fronts.

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Orchestrating a safe discharge and preventing unnecessary re-admissions in children with medical complexity (CMC) in the hospital setting continues to be a challenge for pediatric hospitalists on many fronts. One important aspect of discharge planning that is critical in this vulnerable population from a quality and safety perspective is education around discharge medications. In this month's complex care issue of *Hospital Pediatrics* ([10.1542/hpeds.2020-0078](#)), investigators report on a

qualitative focus group study of English and Spanish speaking parents of hospitalized CMC about their experiences around discharge medication education titled "Parent Perceptions and Experiences Regarding Medication Education at Time of Hospital Discharge for Children with Medical Complexity." The study findings are not entirely surprising. Parents in the study desired information in their preferred language that is consistent across medical providers and pharmacists. Parents often felt rushed during the discharge process with errors in medication reconciliation discovered after hospital discharge. Parents wanted their discharge medication education from a content expert but also from someone who knew their child on a more personal level and who also understood the parent's health literacy level. In the current era where hospitals recovering from the effects of COVID-19 are having to re-think financial priorities, will this study be a call to action to pediatric hospital leadership and administrators to consider investing in dedicated personnel to close the gaps identified by parents of CMC in this study? Or, do hospitals need to reconfigure existing resources to optimize translation services, for example, as the investigators chose to do in their own institution or perhaps, bridge the communication gaps between medical providers and pharmacists and create more consistent messaging? Those of us who take care of CMC have tremendous respect for the caregivers and families of these children and we owe it to the families and children to set them up for success after leaving the hospital.

- [Challenges Following Hospital Discharge for Children With Medical Complexity](#)

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