Early Discharge

The American Association of Birth Centers, an organization whose members have over 20 years of experience with short stay maternity care, takes the position that:

- The timing of discharge of mother and baby after birth is a complex clinical decision that should be made by the new mother and her team of health care professionals.
- The unique needs of the mother, newborn and family, not financial considerations, should dictate the timing of discharge after birth.
- Early discharge after birth is appropriate only as part of a comprehensive program of care which includes intensive prenatal education and close postpartum and newborn follow-up.
- A vital part of a comprehensive program of prenatal care is assisting families to identify and develop family and community support systems upon which they can rely in the days and weeks after birth.
- Families are the primary and continuing resource available to sustain optimal infant development. Communities have a responsibility to develop and fund a network of support systems which assist families in their critical role of parenting.
- Education of families, both prenatally and after birth, must focus on developing adequate knowledge and skills, self-reliance and self-confidence in caring for the new mother and her newborn.
- Health care providers have a responsibility to provide services in a cost-effective manner and to assist consumers and payors in evaluating the cost-benefit ratio of programs of care and specific interventions.
- Decisions regarding length of stay should be research-based. The problems associated with poor outcomes of early discharge have not been adequately defined and may well relate more to the program of care during pregnancy, birth and postpartum than the place or time of discharge. Ongoing research is needed to determine the safety, effectiveness and quality of various models of care.

Adopted by AABC Board of Directors: 10.2.1995