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| Subject: Planned Discharge (home or lesser care environment) | Effective Date:  Revised Date:  Revised Date:  Revised Date: |
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POLICY:

It is the policy of the [program name] to provide clear, consistent, and accurate information to our patients prior to any planned discharge home or to a lesser care environment. We want to assure adequate time for planning and preparation to facilitate a smooth discharge to the community or for LTC while promoting patient/family education and minimizing confusion and/or anxiety associated with such moves.

REASONS FOR PROPOSED/PLANNED DISCHARGE:

The reason for planned discharge is due to one of the following:

# Patients health has improved sufficiently so that the patient no longer needs the services provided.

# Patients welfare and care needs cannot be met.

# Safety of individuals on unit is endangered.

# Health of individuals on unit is endangered.

# Patient has failed, after reasonable and appropriate notice, to pay for (or to have paid under government sponsored, commercially sponsored health care benefits or personal funds) a stay at the unit. Patient who becomes Medicaid eligible following admission, will only receive charges allowed under Medicaid, but only if the unit is dually certified.

# Unit ceases to operate.

# Patient refuses to participate in treatment, therapy or care being provided when that is the only justification for daily skilled needs.

# Patient leaves against medical advice. (Patient must sign form stating they are aware of leaving against medical advice.)

PROCEDURE:

# Patient and family/significant other(s) will be involved with discharge planning discussion prior to admission to the unit as much as possible. This is to facilitate meeting patient goals and securing appropriate care subsequent to their skilled stay.

# Notice shall be given to patient and if known, a family member or legal representative as soon as practicable. This may occur following the initial or subsequent Interdisciplinary Team Conference. Sufficient time (generally no less than 2 days prior to planned discharge) should be provided to prepare and orient patient to a safe and orderly discharge from the facility.

# Patient shall be provided with information on the right to appeal and how to notify the Ombudsman and district department of health or survey agency.

# Written notice will be provided to the patient and/or responsible party as detailed in this policy unless directed otherwise by state regulations.

# Clinical patient record should reflect reason for discharge and mechanism of notification both verbally and in writing. This information will generally be relayed by Care Management for the skilled program.

# The attending physician will be notified of the team’s recommendation and an order to discharge patient with appropriate instructions will be written if appropriate.

# A copy of the signed “Notice of Medicare Non-Coverage” will be maintained in the Medical Record. (See P&P re: Notice of Medicare Non-Coverage (NOMNC))