

# Rancho Los Amigos National Rehabilitation Center

# ADMINISTRATIVE POLICY AND PROCEDURE

SUBJECT: OUT OF HOME FACILITIES PLACEMENTS

Policy No.: B828

Supersedes: October 11, 2018 Reviewed: July 14, 2022

Page: 1 of 2

#### **PURPOSE:**

To state the hospital's position regarding the placement of patients in out of home facilities.

#### **POLICY:**

Placements of patients in nursing homes, sub-acute and board and care homes are made only by staff members of the Social Work Department.

The medical record should clearly indicate a medical recommendation for discharge, the level of care the patient requires, and any special needs or limitations (ambulating capability, level of self-care, mental state, need for special diets or equipment, return clinic appointments, etc.). Notify Social Work Department of patients whose medical condition and/or other circumstances will require assistance in planning for living arrangements following hospitalization and preliminary steps have been initiated to make it possible to discharge the patient at the time he is medically ready.

If the patient's condition precludes his returning to his former mode of living, it is always the prerogative of the patient and/or his family and friends to make their own plan, but in all instances the patient and/or his family and friends should be aware of and encouraged to utilize the assistance by Social Work Department in working out a plan compatible with the patient's needs. If discharge plans to a nursing home, sub-acute, or board and care facility are made without the assistance of the Social Work Department the medical record should reflect the fact that the patient and/or his family and friends made their own plan.

# **Out Of Home Placements**

The Medical Case Workers (MCW's) in the Social Work Department make all arrangements for patient transfer to skilled nursing facilities, sub-acute facilities and board and care facilities. They initiate the placement process when they receive a written referral from the patient's physician. The patient's physician with input from the rehabilitation team makes the recommendation on the level of care and the Medical Case Worker follows up appropriately.

Using a variety of methods, the Medical Case Worker begins searching for a facility that will meet the patient's medical needs, and within the geographic vicinity (when possible) requested by the patient and/or family member.

On all inquiries, the proprietor of the facility is given a clear understanding of the patient's needs, social data that is relevant to the patient's ongoing care, and payment resource information. When a facility is identified, the Medical Case Worker is notified, and in turn notifies the patient and any significant others who may wish to

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Supersedes: October 11, 2018

Page: 2 of 2

visit the facility prior to transfer. The Medical Case Worker will also give family members a list of facilities (New Life Styles Book-A Guide to Senior Living and Care) for their own education and if they want to conduct their own search.

#### Housing for Health

Due to a large percentage of homeless and indigent patients that we serve, we have a special program called Housing for Health designed to subsidize the housing need. It is a department-wide program that assists county hospitals consisting of a team that will provide a range of medical housing opportunities (Skilled Nursing Facility, Congregate Living, Assisted Living Center, Board and Care Home) requiring patients to pay only a portion of their income. Referrals to recuperative care placement are also coordinated through Housing for Health. Homeless patients can consent to the Housing for Health program and agree to be placed once a bed becomes available regardless of the particular region. Housing for Health does its best to accommodate housing based on the patient's regional preference. In some cases, patients are assigned an Intensive Case Management agency contracted with the Department of Health Services where a staff monitors treatment compliance and assists with financial benefits if needed.

## **Conflict of Interest**

The Medical Case Worker maintains documentation of all facilities contacted in placement efforts, and the contact person for each of the facilities. Any hospital personnel, other than the Medical Case Worker or Clinical Social Worker who are contacted by a facility representative for the purpose of placing patients, should notify the Chief of Social Work. The Clinical Social Work Department does not engage in any business relationships where there is a conflict of interest. Various local placement providers offer to do in-services sometimes providing lunch or dessert to staff, but there is no specified incentive for staff to refer to a certain facility and not others. Staff search for the most appropriate placement to meet the patient's needs and navigate multiple placement barriers and insurance restrictions. Any gifts received from a facility must be returned to the facility, or donated to Volunteer Services. It is illegal for anyone to solicit business (without Materials Management approval) of any kind on County premises, including recruitment of patients for their respective facilities.

## Complaints, Abuse or Neglect

Due to the current social media age, family members and any staff can research reviews on a particular placement. There are online mechanisms where patient, family or staff can look up detailed information on a placement where they can see comments or complaints from patients and/or family members. Some facilities that accept Medicare have ratings by indicating a number of stars. Please refer to the updated Hospital Policy on Elder Abuse and Dependent Adult reporting for various reporting scenarios. The California Department of Social Services has a Community Care Licensing (CCL) Division which oversees skilled nursing facilities and Adult Residential Facilities (ARF's or Board and Care Homes). It has a complaint line to report any concerns or possible abuse at 1844-538-8766

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