LOS ANGELES GENERAL MEDICAL CENTER POLICY

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Subject:		Original	ginal		Policy #		
PATIENT DISCHARGE		Issue Date:	6/01/81	720 Effective Date:			
		Supersedes:					
			9/27/22	1/12/24			
Policy Owner(s): Director, Clinica	I Social Worker	·		·			
Executive Sponsor(s): Chief Medical Officer							
Departments Consulted:	Reviewed & appr	Approved	Approved by:				
Nursing Services	Attending Staff Association						
Clinical Social Services	Executive Con						
Utilization Review/Management	Senior Executive Officer		Chief	Chief Medical Officer			
		Chief Executive Officer					

<u>PURPOSE</u>

To ensure that patients are discharged in a manner that maximizes the use of beds and human resources and supports the patient's needs, the clinical requirements, and the operational efficiency of the Medical Center.

POLICY

The interdisciplinary patient care team is responsible for the coordination, collaboration, and development of the patient's discharge plan to ensure that the patient's continuous health care needs are addressed. Patients shall be discharged upon the written order of the physician of record. Discharge from the Medical Center shall be as early in the day as possible after the patient's discharge needs are met.

A minor may be released to a parent, guardian, or agency that admits the minor on its authority. An emancipated minor, self-sufficient minor, minor on active duty with the Armed Forces, or a minor married or previously married may be released on his or her own authority.

A patient who returns to the facility after leaving the facility either by discharge order or against medical advice (AMA) shall be considered a new admission/visit.

PROCEDURE

- Through written collaboration and/or discharge planning rounds, the interdisciplinary team shall review the status of the patient's condition and continuing care needs after discharge.
- The physician of record shall document the patient's status at discharge in the health/medical record. The documentation shall include a statement about the patient's condition, functional status, and requirements for follow-up care.
- Members of the interdisciplinary patient care team shall provide the patient with any necessary education and instruction prior to discharge. Discharge information may include prescriptions, use of medication, complete and reconciled list of medications along with education on the medications, diet treatment, post-hospitalization instructions, and follow-up appointments.

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- The patient and family (as needed) are given a complete and reconciled list of medications along with education on the medications.
- Education and instructions provided to the patient or patient's family by any member of the interdisciplinary patient care team shall be documented in the health/medical record.
- The patient's discharge record shall be reviewed and signed by the attending staff authorizing the discharge of the patient as per the Attending Staff Rules and Regulations.

Discharge Plan for Patients Identified as Homeless:

- Patients identified as homeless must be connected or referred to community resources, treatment, shelter, and other supportive services to help prepare them to return to the community (refer to Medical Center Policy #725 Discharge Planning).
- Patients identified as homeless are offered service required by SB1152 as needed: weather appropriate clothing, a meal if not medically contraindicated, discharge medications, insurance screening, referrals for medical/psychiatric follow-up care, transportation (30 miles or 30 minutes), etc.

Patients Identified at Risk for Suicide during Current Hospital Stay:

- Prior to discharge patients who were identified at risk for suicide will have a Suicide Risk Screening done.
- Discharged patients will be provided with emergency psychiatric telephone numbers:
 - Suicide Prevention Center 24-hour Access Hotline Number: 1-877-727-4747
 - o Department of Mental Health 24-hour Access Hotline Number: 1-800-854-7771
 - o Call 911

RESPONSIBILITY

Attending Staff Residents Allied Health Professionals Nursing Staff Clinical Social Services Registered Dietitians Physical Therapists Occupational Therapists Audiologist/Speech Pathologists

PROCEDURE DOCUMENTATION

Attending Staff Manual Nursing Services and Education Policy Manual Departmental Policy and Procedure Manuals

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REFERENCES

California Code of Regulations, Title 22, Sections 70749, 70751 (j) Health and Safety Code, Sections 1276, 1283 Welfare and Institutions Code, Sections 600, 601, 602 Family Code, Sections 7002, 7050, 7140, and 6922 California Healthcare Association Consent Manual Medical Center Policies # 211 and 405 Joint Commission Standards (Continuum of Care)

REVISION DATES

May 1, 1999; July 1, 2001; April 16, 2002; April 19, 2005; September 8, 2008; October 8, 2008; February 11, 2014; August 23, 2019, September 27, 2022; January 12, 2024