

**OLIVE VIEW-UCLA MEDICAL CENTER  
CLINICAL SOCIAL WORK  
POLICY & PROCEDURE**

**NUMBER: 1333  
VERSION: 2**

**SUBJECT/TITLE: DISCHARGE PLANNING**

**POLICY:** The Clinical Social Work Department staff shall be active participants of the discharge planning process when cases are identified as high risk or problematic. Referrals shall be prioritized according to patient's needs and staff availability.

**PURPOSE:** To describe the Clinical Social Work Department's role in the Discharge Planning Process.

**DEPARTMENTS:** All

**DEFINITIONS:** Discharge Planning is a multi-disciplinary effort that takes place throughout the patient's hospital stay. It includes the patient, the family and the health care team. This process establishes the patient's post hospital care plan.

- PROCEDURE:**
- A. General Discharge**
    - 1. Confirm patient's level of care and medical needs as determined by patient's physician.
    - 2. Assess patient's situation and enlist their participation in the planning process.
    - 3. Collaborate with team, review available options, and participate in daily collaborative care rounds.
    - 4. Establish a plan and identify tasks.
    - 5. Coordinate activities with the patient, family, and team.
    - 6. Provide patient with community resources appropriate for their situation.
    - 7. Document worker activity in patient's chart as it occurs.
  
  - B. Department Procedures for Skilled Nursing Facility Placement**
    - 1. Confirm that patient is medically dischargeable and verify appropriate level of care.
    - 2. Contact In-Patient Financial Services (ext. 74181 or 74182). Notify the assigned worker of possible placement. Obtain patient's financial status. As applicable, request Medi-Cal application if not already initiated. Designate the patient as an immediate need for placement Medi-Cal and initiate documentation in the patient's chart.
    - 3. For placement of patients with insurance coverage (e.g., L.A. Care Medi-Cal Managed Care), contact Utilization Management for pre-

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- authorization.
4. Discuss the option of placing the patient at a nursing home facility with the patient/family. Obtain consent for release of records and for placement from the patient/family.
  5. Provide a copy of the “New Lifestyles, the Source for Seniors” Booklet to the patient/family and encourage them to participate in the process of finding a nursing home placement for the patient.
  6. Collect necessary patient information from the chart, nurse, doctor, patient, and/or family as needed.
  7. All efforts and communications related to skilled nursing placement efforts must be documented daily in the patient’s medical record.
  8. When notified by the Financial Worker that the patient has a Medi-Cal number, placement will be initiated using the Care Finder Pro web-based referral system database. Begin with facilities nearest to the area in which the patient/family would like to be placed and that meet placement criteria and work out geographically, as appropriate. The required number of placement calls should be made daily. These calls should be documented daily in the medical record or the phone list of facilities contacted on the patient’s behalf.
  9. In accordance with Medi-Cal requirements, placement calls are to be made to 15 facilities on the first day and a minimum of ten (10) calls daily until the patient is placed. Unless authorized by a supervisor or the Director of Clinical Social Work.
  10. If a patient requires placement outside Los Angeles County, approval must be obtained from a supervisor or the Director of Clinical Social Work.
  11. If the patient cannot be placed after four (4) days, Utilization Management shall be notified. Placement problems and indications for refusals should be reviewed with the Medical Team and Utilization Management to identify and implement possible actions to improve the placement opportunity.
  12. Upon location of an accepting facility, notify patient, family, ward staff, financial worker, and Utilization Management Nurse to identify the facility, and specify the date and time to transfer patient.
  13. Document discharge plan and request the Ward clerk to copy patient’s chart. The Chart copy, referral forms, doctor’s orders, discharge summary and Medi-Cal card all go to the facility with the patient.
  14. Contact Utilization Management to arrange transportation of the patient to the placement facility.

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References: VC Policy No. 262, "Admission / Transfer / Discharge"	
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