

DEPARTMENT OF PEDIATRICS POLICY AND PROCEDURE

SUBJECT:	GUIDELINES FOR DISCHARGE AND	Policy No.:	P144
	OUTPATIENT TREATMENT	Supersedes:	09/2016
		Revision Date:	12/2019
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PURPOSE:

To provide guidance for staff in preparing Pediatric patients to an appropriate and safe discharge.

GUIDELINES FOR DISCHARGE AND OUTPATIENT TREATMENT:

- 1. Discharge planning begins with admission and establishment of goals. Discharge occurs only when patient goals are met and family training goals are met, or patient no longer shows progress towards goals.
- 2. As part of the inpatient rehabilitation program, it is mandatory to re-establish goals and revise treatment programs based on periodic reassessment of the child and his/her needs in relation to his/her developmental level. This is done through weekly team conferences.
- 3. Discharge is made only when the patient (if over 18 years of age or an emancipated minor) or the parent or appropriate family member or legal guardian (for children under the age of 18) is fully trained in all the medical care needs. Children under 18 years may also be discharged to non-blood relatives in accordance with current state law. All equipment and supplies necessary are also secured prior to discharge. School plan is also in place as appropriate.
- 4. For the child where the home environment is deemed unsafe by the physician or by the Department of Children and Family Services (DCFS), or where no family member or legal guardian is available, referral is made to DCFS in order to obtain Juvenile Court direction and authorization for discharge. Discharge is facilitated by coordination of the medical needs of the child with the Juvenile Court assigned Social Workers.
- 5. Team responsibility does not end with discharge. Most patients are followed until 21 years of age in the Pediatric outpatient clinic.
- 6. Long term care is maintained through outpatient clinics for coordination of therapy and medical services in the community, educational services, supportive psychological services and provision of communication devices and specialized equipment.

SUBJECT:

- 7. In compliance with California Children's Services guidelines, most patients with long term disabilities are seen at least yearly in the outpatient clinic for reevaluation of their rehabilitation program.
- 8. The Department of Pediatrics adhere to Rancho Los Amigos National Rehabilitation Center Administrative (RLANRC) Policy and Procedure B 826 Discharge Planning.

REFERENCES:

RLANRC Policy B826 Discharge Planning California Code of Regulations Section 70707 California Family Code Division 11 California Children Services Manual of Procedures, Standards for Pediatric Community Hospitals Section J

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