

SUBJECT: TRANSITION/DISCHARGE PLANNING AND
TRANSITION/DISCHARGE SUMMARY PROCESS

EFFECTIVE
DATE: 04-05-11 (replaces 03-02-10)

APPROVED BY:

Reviewed (no changes): _____

Executive Director

POLICY

It is the policy of McIntosh Trail CSB to assure the timely and orderly planning of transition to appropriate levels of care and discharge for each consumer. The process of transition and discharge will start early in the assessment process and proceed throughout the course of treatment until final discharge is facilitated. All references to "consumer" in this policy include involved family members.

PROCEDURE

1. Initial transition/discharge planning: During the initial development of the MICP/OTR and the Individualized Service/Recovery Plan, the discharge criteria will be determined with the consumer and agreed upon as part of the service plan. If at any time the consumer meets the discharge criteria, discharge activities will occur.
2. Review process:
 - A. Reauthorization Assessment Review: Justification to continue services will be reviewed with the consumer on an ongoing basis. If no justification to continue services can be found, final transition/discharge planning will begin. If justification to continue services is determined, an updated individual service/recovery plan will be developed and the transition/discharge criteria will be reviewed with the consumer.
 - B. Level of Care Change Assessment: Justification to increase or decrease intensity of service resulting in changing level of care will be reviewed with the consumer. Revised treatment goals, objectives, and interventions are developed with transition/discharge criteria stated via clinical benchmarks.

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PROCEDURE (CONTINUED)

3. Final transition/discharge planning:

- A. Initial transition/discharge activities: The clinician will discuss the transition/discharge process with the consumer and family. The need for external services will be reviewed with the consumer and an appropriate referral and linkage will be completed as needed. Final discharge cannot be completed until after successful linkage with the referral has occurred, unless consumer leaves services without notification.
- B. Transition/Discharge interview: The clinician will schedule a discharge interview, and it will be conducted with the consumer as a therapeutic termination. The transition/discharge interview will be documented in the progress note. Information will be given to the consumer at the time of this interview specific to aftercare for self and documentation will be noted in the Transition/Discharge Summary.
- C. Documentation will be recorded on the Transition/Discharge Summary form and in the progress notes as appropriate. The transition/discharge form will be completed within fifteen (15) working days of a planned discharge from services (10 days for SA consumers).

4. Consumer early withdrawal from service:

- A. If the consumer withdraws prior to service completion (early withdrawal), the transition/discharge form will state the reasons for early withdrawal as can be determined.
- B. The transition/discharge form will document the clinician/case coordinator's attempts to deter early withdrawal from service when continued service is clearly indicated. If the consumer has decided to pursue external services independently, the clinician/case coordinator will document coordination/linkage activities carried out to ensure the consumer's continuity of care.

FormDocs: Transition/Discharge Summary