

CHAPTER Service Delivery	CHAPTER 02	SECTION 004	SUBJECT 220
SECTION Clinical and Support Services		DESCRIPTION Behavioral Health Hospitalizations and Discharge Planning	
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APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input type="checkbox"/> Board Members	<input type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input type="checkbox"/> Employment Services Provider Agencies	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers	<input checked="" type="checkbox"/> Persons Served		

POLICY:

Lapeer County Community Mental Health (LCCMH) provides coordination of care, including discharge planning, with behavioral health units (BHU) when persons served are admitted to an inpatient facility.

STANDARDS:

- A. Hospital Liaison maintains a collaborative relationship with BHUs to ensure a continuum of care to person served while they are hospitalized.
- B. Primary case holders and/or Hospital Liaison coordinate with the hospital to ensure best possible care for persons served while on the BHU.
- C. Primary case holders and/or Hospital Liaison maintain a therapeutic relationship with persons served while they are on the BHU.

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- D. Discharge planning begins immediately at admission or when the primary case holder is notified of admission. This allows for discharge to occur as soon as appropriate.
- E. LCCMH staff provides increased services upon discharge and for one-month post-discharge to ensure support and reduce risk of readmission.

PROCEDURES:

- A. Hospital Liaison is the primary contact with BHU for persons served admitted to the unit.
- B. The Hospital Liaison notifies primary case holders of persons served BHU hospitalizations.
- C. Coordination of care between the primary case holder, the Hospital Liaison and BHU staff is done at least weekly.
- D. The primary case holder and/or Hospital Liaison visits the person served in the hospital throughout their stay to maintain a relationship and plan for discharge.
- E. The primary case holder begins discharge planning upon notification of admission to BHU. Discharge planning includes but is not limited to:
 - a. Determining housing arrangements
 - b. Arranging transportation from BHU and to/from hospital discharge appointments (if necessary)
 - c. Ensuring person served has access to medications upon discharge and making accommodations to assist persons served in obtaining medications (if necessary)
 - d. Scheduling hospital discharge appointment within seven days of discharge
- F. Services are increased for the month following hospitalization to continue stabilization and reduce risk of readmission. Primary case holders must see and/or call person served at least weekly for one-month post-discharge.
- G. The Hospital Liaison takes the place of primary case holder if the person served is new to LCCMH services or does not already have an assigned case holder.

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H. See LCCMH 02.004.220 Behavioral Health Hospitalizations and Discharge Planning Work Instructions.

DEFINITIONS:

Hospital Liaison: a point of contact between persons served in a BHU and LCCMH; serves as the facilitator of care for the transition out of inpatient care and back into the community.

REFERENCES:

LCCMH 02.004.220 Behavioral Health Hospitalizations and Discharge Planning Work Instructions.

JW & LM: Ir