

## **QUALITY MANAGEMENT MEMO**

**To:** Mental Health System of Care Providers **Date**: 04/04/19

From: Steve Jones, LCSW, BHPC - Quality Management

**Re:** New Updated Discharge Form in CCBH "go live" on April 15, 2019

Dear Providers,

This memo is provided to introduce a change in the Discharge Form in CCBH. Documentation of a beneficiary's discharge is vital to ensure quality and continuity of care. This change is to assist providers in accurately documenting a beneficiary's discharge from treatment.

**BACKGROUND:** The main problem identified with the current process was the need to gather information regarding both the "why" and "where" with regard to the discharge. In other words, why was the client discharged (e.g., did not return, satisfactorily achieved goals, required higher LOC) and what was the destination of the client after discharge (e.g., primary care physician, transferred to lower LOC). The current form combines the why and where questions and clinicians are only allowed to select one choice resulting in limited or misleading information in the discharge summary form. The new method proposes three independent questions, capturing goals, reason, and destination, with one selection for each permitted creating a clear discharge picture.

## **NEW DISCHARGE REASON AND DESTINATION CHOICES:**

DISCHARGE REASON CHOICES	DEFINITION
Requires higher level of care	Client requires services at a higher LOC than can be
	provided at their current LOC
No longer requires services at this level of care	Client no longer requires services at this level of care
Lost contact	Client unresponsive to attempts to contact
Ineligible for services/does not meet medical	Client does not meet Medical Necessity Criteria
necessity	according to Title 9, Chapter 11.
Moved away from service area	Client no longer resides within service are
Change in medical insurance	Client medical insurance provides other options
Client receiving services/Tx elsewhere	Client is receiving services at another program either
	within or outside of SDCBHS
Client/Family dissatisfied	Client/Family discontinued services due to
	dissatisfaction
Left against medical advice	Left against medical advice
Refused services	Refused services
Death – suicide	Services discontinued due to death by suicide
Death - non suicide	Services discontinued due to death by non-suicide
Incarcerated	Client no longer receiving services at this program
	due to incarceration
OTHER	





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DISCHARGE DESTINATION CHOICES	DEFINITION
Transferred to Primary Care Physician	Client discontinued services at program but intends
	to or already has started similar services through
	PCP
Transferred to EQUIVALENT level of care	Client has transferred to an equivalent LOC.
Transferred to HIGHER level of care	Client has transferred to a higher LOC.
Transferred to LOWER level of care	Client has transferred to a lower LOC.
Self-care/family/general community support	Client discontinued services but with the assumption
	that sufficient services would be available from
	other sources to maintain recovery.
Unknown: Referred to non-county services	Client referred to other non-county services - no
	ability to further confirm or track
Unknown: Never returned	Client never returned after services - no other
	information available
Unknown: Not eligible for services	Client not eligible for services and ultimate
	destination unknown
Jail/Prison	Client discharged due to incarceration
Not applicable	No destination applicable
OTHER	

## **TRANSITION PLAN:**

As of April 15, 2019, the new Discharge Form will be available in CCBH. **Programs are advised to Final Approve any open Discharge Forms prior to April 15th.** If Discharge Forms are not final approved by end of day April 14<sup>th</sup>, you may lose the information in the non-final approved Discharge Summary.

Please direct any questions and/or comments to **QIMatters.HHSA@sdcounty.ca.gov** 

