

NORTHERN NEVADA ADULT MENTAL HEALTH SERVICES
POLICY AND PROCEDURE

SUBJECT: OUTPATIENT DISCHARGE PROCESS

NUMBER: NN-PC-PL-17

Page 1 of 4

ORIGINAL DATE: 05/04/06

REVIEW/REVISE DATE: 11/19/09, 9/20/12

APPROVAL: Cody L. Phinney, Agency Director

I. PURPOSE

To establish the process for discharging consumers from outpatient services and providing a uniform method for closure of outpatient records

II. POLICY

Northern Nevada Adult Mental Health Services (NNAMHS) will have procedures established to discharge consumers from services

III. REFERENCES

MHDS Policy 4.025 Failure to Appear "No Shows" (Mental Health Agencies)

IV. PROCEDURES

1. Consumers may be closed for any of the following criteria:
 - a. The consumer completes a course of treatment resulting in a level of functioning no longer meeting criteria for service or requiring assistance of outpatient services.

- b. Consumer requests closure to an outpatient service.
 - c. Consumer receiving duplicate services from another agency for over 90 days or when it is known duplicate services will last more than 90 days.
 - d. Consumer moves from the area.
 - e. No contact due to No Show, no current appointment, no response to phone calls and/or letter, or unable to contact by any manner, for a period of at least 120 days.
 - f. Consumer has insurance with an outside provider for services
 - g. Consumer dies.
2. All records will be closed when the consumer has not received services for 150 days. Each program is responsible for closing the chart to their service at 150 days and to establish whether the consumer is to remain open in any other program at NNAMHS.
 3. Aftercare planning begins when the consumer is assessed in the PAS and continues when assigned to a community outpatient episode. The outpatient clinician will complete conditions for discharge in the appropriate fields in Clinical Work Station. Clinician will inform consumer he/she can return for assistance even after they are discharged from outpatient services.
 4. Upon discharge from outpatient services the clinician charting for that episode will document in the ambulatory progress note where the consumer will continue their treatment for mental illness once they are closed to NNAMHS or to that service and documents that a letter has been sent to the consumer encouraging follow through with treatment to which they have been referred, assuring assistance from NNAMHS at any time upon request.
 5. A consumer may be transferred to another department in NNAMHS completely or referred for additional services. Consumers may also be

transferred to a different level of care, such as, to a less restrictive housing setting or a less intensive service coordination level. These decisions will be based on the consumer's current clinical status and the consumer's agreement or request for transfer. Transfer or referral will occur only after clear communication of clinical status and shared or shifted responsibility has occurred.

6. When a consumer is receiving services from more than one program and is being considered for discharge for missed appointments or underutilization of that service, the discharging program will notify the remaining open programs for input prior to the discharge. When open to the Medication Clinic, the attending Clinical Prescriber/Nurse team will be notified to discuss the consumer's discharge plan before being discharged from other services.
7. Health Information Services (HIS) Responsibilities for Record Closure
 - a. HIS is responsible for opening records for using the packet generated by the admitting clinician and referring possible closures to the appropriate department head for closure evaluation.
8. Outpatient Staff Responsibilities
 - a. Service Coordinators, nurses, psychologists, and PACT staff are responsible for closing records to their respective program.
 - b. The program that last serves the consumer is responsible for closing the record to all services permanently.
 - c. Closing the record when the consumer has never been seen by an outpatient clinician:
 - i. Check to see if the consumer is open to services in the computer. If so, close to all services, including pharmacy.
 - ii. Write a progress note to explain why the record is being closed. Notify HIS of the closure via e-mail.

- d. Closing the record when the consumer has been seen by outpatient staff:
 - i. Check to see if the consumer is open to other services in the computer. Contact those programs to see if the consumer is to remain open to those programs. If not, close the chart to all programs, including the pharmacy. If so, close only your program.
 - ii. Write a progress note to explain why the record is being closed to your service. Do not notify HIS of this type of closure IF the record is still open to other outpatient programs.
- e. Closing the record when you are the only program open:
 - i. Close the record to all services including pharmacy.
 - ii. Complete an outpatient discharge summary MR-161.
 - iii. Notify HIS by e-mail of the closure.