Category: Coordination of Care	Subject: Psychiatric Hospital Discharge Planning County of San Luis Obispo: Behavioral Health Department Effective Date: 1/5/2023

Purpose:
To clarify the process for ensuring continuity of care and discharge planning for clients discharging from the San Luis Obispo Crestwood Psychiatric Hospital Facility (PHF).

Confidentiality:
An Authorization to Use/Disclose PHI is not required to facilitate a referral for appropriate services (W&I Code 5328 (a)).

Procedure:

Client is open to Outpatient Services

1. Notification of hospitalization – Staff will notify outpatient providers and program supervisor when a client has been admitted to the PHF using non-billable progress note and the messages feature in the Electronic Health Record.
    a. Write Service Note including hospitalization information.
    b. Use SmartView to see client's treatment team.
    c. Use Select Action (three dots) to send progress note as a message.
    d. Include Treatment Team members and Central Health Information staff as staff message is being sent to.

2. Scheduling follow-up appointments.

    a. Check client programs/treatment team and staff schedule.

    b. If a client already has a service scheduled within seven days of the discharge date, change <u>Emergency Indicator to Yes.</u>

    c. If the client does not have a scheduled appointment within seven days of the discharge date schedule an appointment with the client's LPT or Clinician if no LPT assigned to case (identify by using SmartView to see Treatment Team) search staff's "Post appointment" timeslot.

        1. Use Magnifying glass to search for "Appointment Search."
        2. Under Location, select desired clinic location, and click "Any Weekday," Minutes: 60, Appt. Type "Urgent Appointments" then click "search".
            1. Use the schedule appointment icon to enter appointment details.
            2. Procedure is TCM Targeted Case Management
            3. Duration (Face to Face time = 60 minutes)
            4. Emergency indicator=Yes
            5. Program

d. If the client does not have a scheduled appointment within seven days of the discharged date and the LPT or Clinician does not have an available post-appointment timeslot, Crestwood will schedule the post-hospitalization appointment into one of the other clinic med manager's available post-appointment timeslots using the Appointment Search steps above.

Client is not currently Open to Outpatient Specialty Mental Health Services

1. Crestwood staff will launch an Inquiry and follow guidance (see appendix) to assign to Central Health Information staff.
2. Use current scheduling procedure guidelines to schedule post hospital follow-up appointments for clients being discharged.
    a. If Client is Spanish speaking there are a few bilingual staff that do post appointments. A list will be provided that you can use for post appointments but if there are any questions or no availability so an interpreter must be arranged contact Central Health Information for assistance.
3. Add information about appointment to Inquiry.
    a. Assign Central Health Information staff to Inquiry.
    b. Open clinic intake program as "Requested."

4. Write Service Note including hospitalization information.
    a. Use SmartView to see client's treatment team.
    b. Use Select Action (three dots) to send progress note as a message.
    c. Include Treatment Team members and Central Health Information staff as staff message is being sent to.

5. Scheduling Appointments:
    a. Clinic medication managers will have at least three 1-hour timeslots for post-hospitalization appointments on their Scheduler each week.
    b. Crestwood will schedule post-hospitalization appointments into the medication manager's available post-hospitalization appointment timeslots.
    c. Use Magnifying glass to search for "Appointment Search."
        i. Under Location, select desired clinic location, and click "Any Weekday," Minutes: 60, Appt. Type "Urgent Appointments" then click "search".
        ii. Use the schedule appointment icon to enter appointment details.
        iii. Procedure is TCM Targeted Case Management
        iv. Duration (Face to Face time = 60 minutes)
        v. Emergency indicator=Yes
        vi. Program

6. Central Health Information staff will:
    a. Verify clinic program is has been opened as “Requested” and ensure scheduled appointment is on staff calendar and correct.
    b. Verify information on Inquiry and mark complete.
    c. Verify client insurance information, add to coverage screen if needed.
    d. Verify client information screen.
    e. Forward message to clinic Program Supervisor, HIT, and AA.

7. The clinic is responsible for contacting the client/family if any changes are to be made to the post-hospitalization appointment time (for example, schedule a full assessment).

APPENDIX

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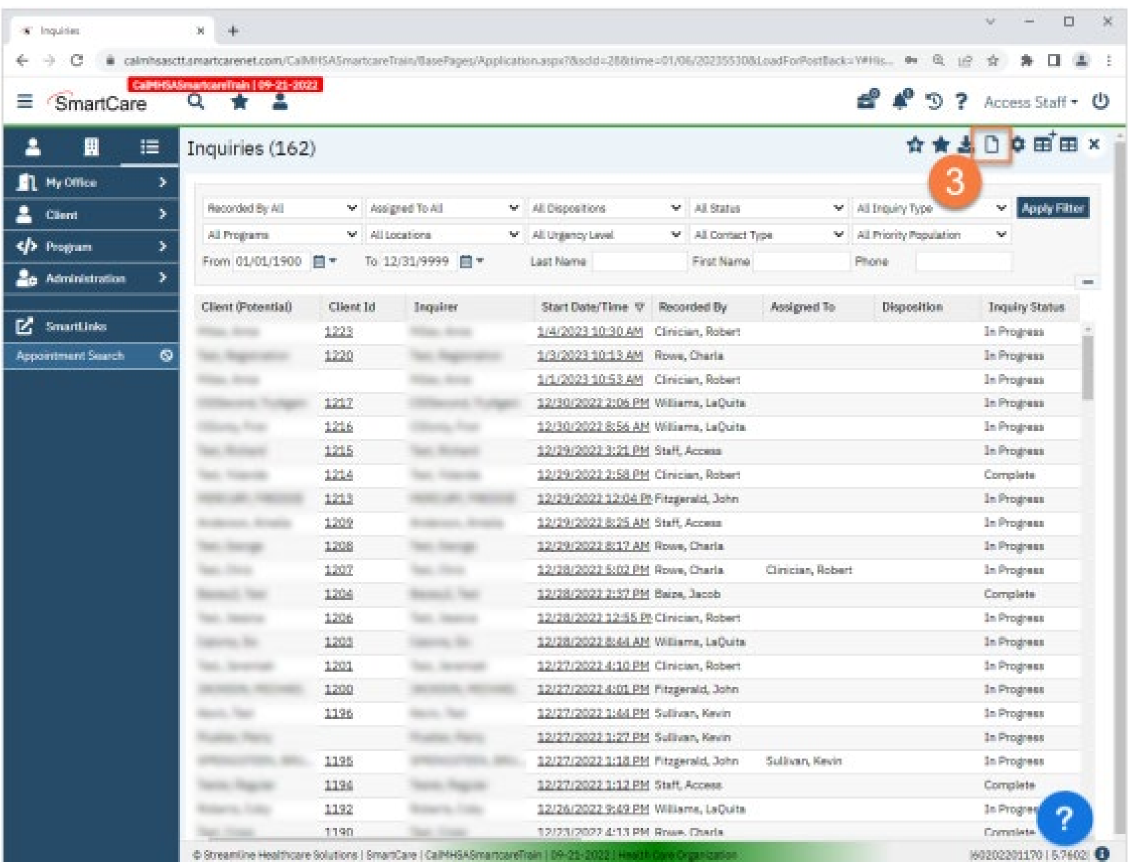
Client Search & Inquiry

1. Search for the **Inquiry** screen using the search icon.

2. Select **Inquiries (My Office)**

3. This will bring you to the Inquiries list page. Create a new inquiry by using the new icon.



4. This will open the client search window. You may search to determine if the person is a current client.

   a. To search for a client, enter their name and click “Broad Search.” You can also search by SSN by entering their social security number and clicking “SSN Search.” You can do the same with date of birth (DOB), phone number, etc.

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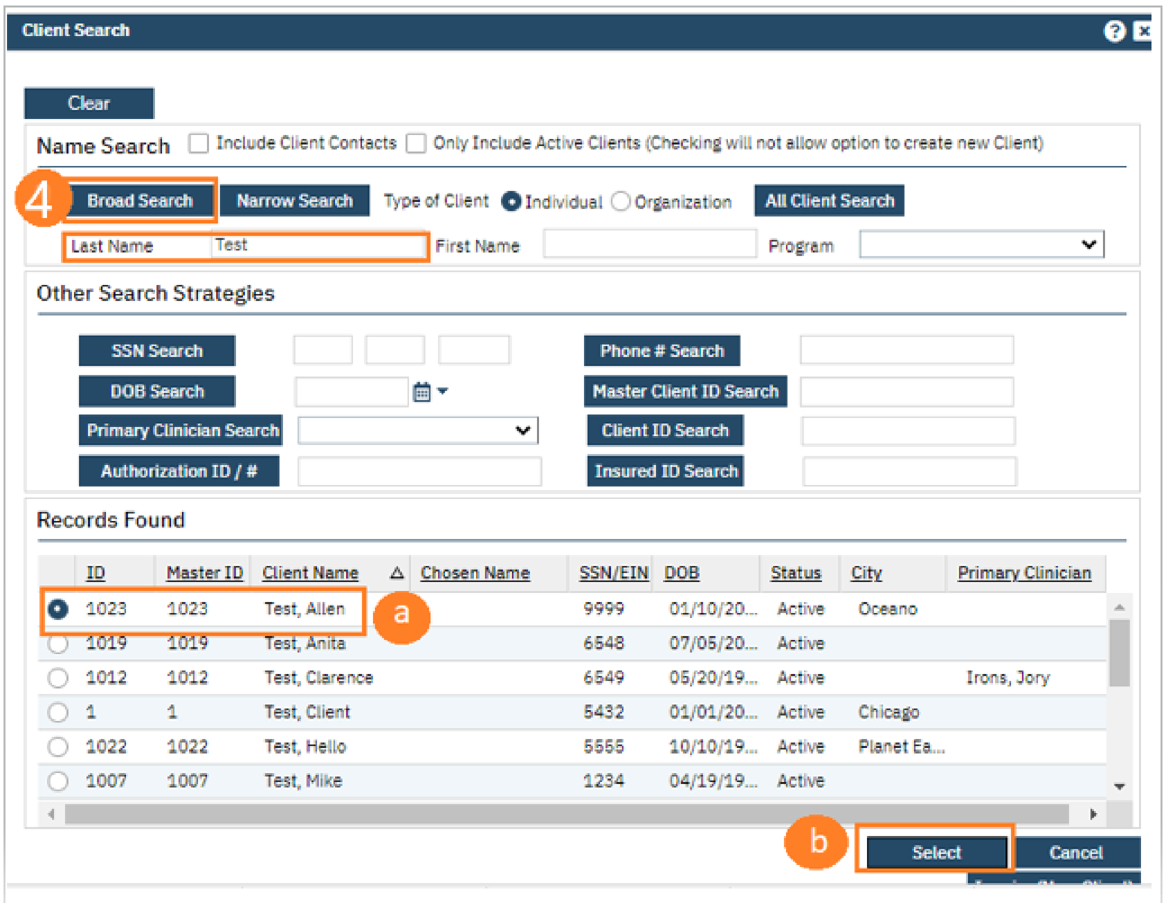
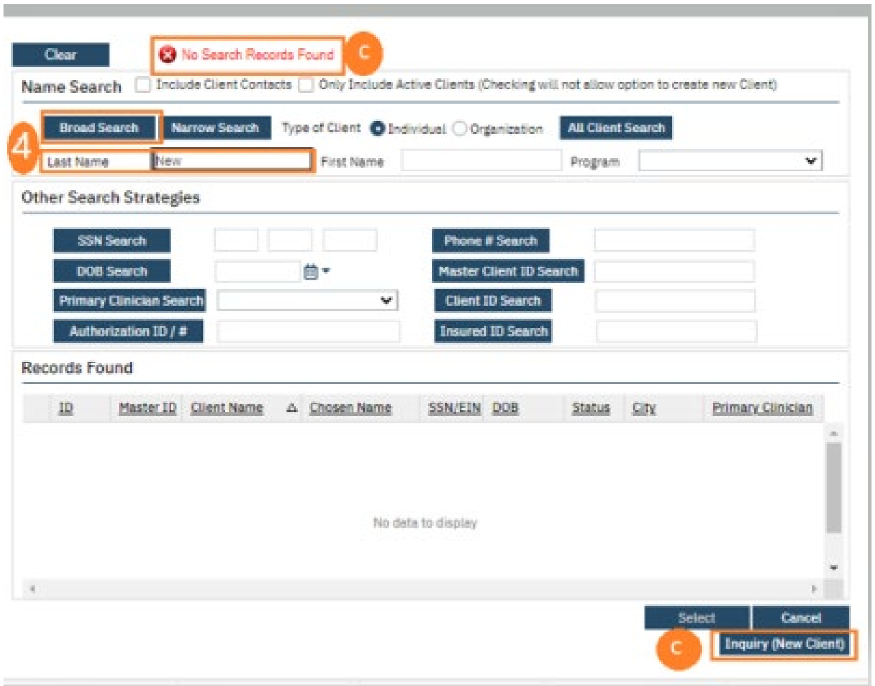
b. If you find the person in the system, meaning they show in the Records Found section, click the radial button to the left of their name, then click "Select" to bring their information into the Inquiry screen.



c. If a person is a new client, or you cannot find them in the system, click "Inquiry (New Client)".

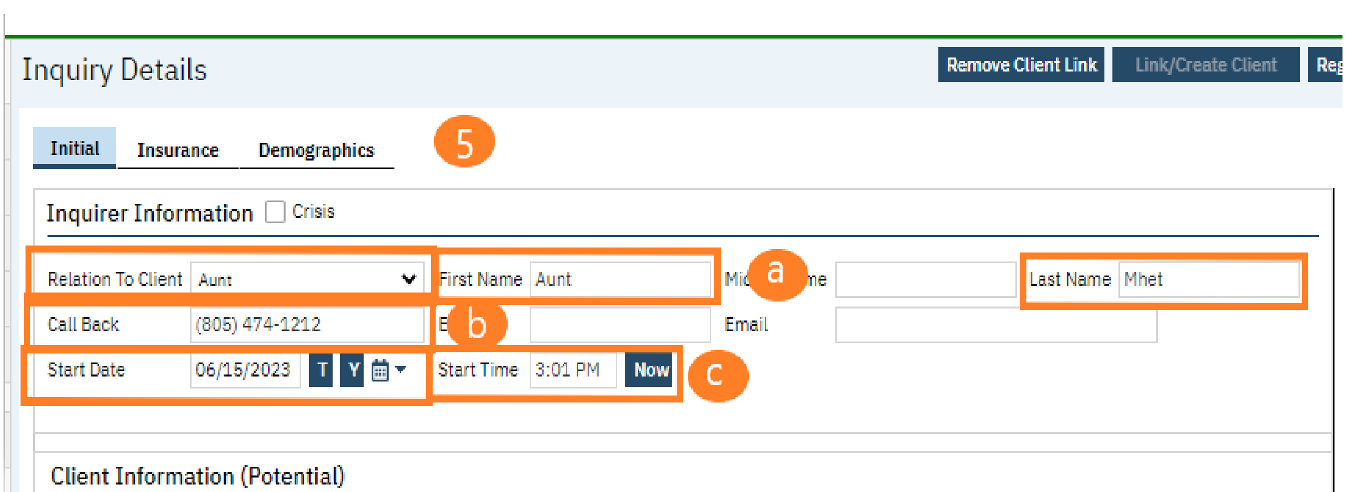


5. This brings you to the Inquiry Details screen. Complete the information about the Inquirer in the top section.

a. Enter Relation to Client, first and last name (if inquirer is someone other than the client.)

b. Enter the call back phone number.

c. Make sure to input the start date and time. There are buttons for today “T” and “Now” to help make this quick and easy.



6. Complete the information about the client/person in crisis.

   a. Complete the First Name and Last Name fields. Middle Name is not required but can be added if given.

   b. Complete the SSN and DOB fields. If the client refuses to share, or does not know, you can simply check the box “SSN Unknown/Refused.” Once saved, this will fill in the SSN with “999999999”, which is SmartCare’s version of “no SSN”.

   c. Complete the Sex field.

   d. Complete the Urgency Level, Inquiry type, and Contact type fields. The options for each field are listed in the tables below. This includes a description of when to use each option.

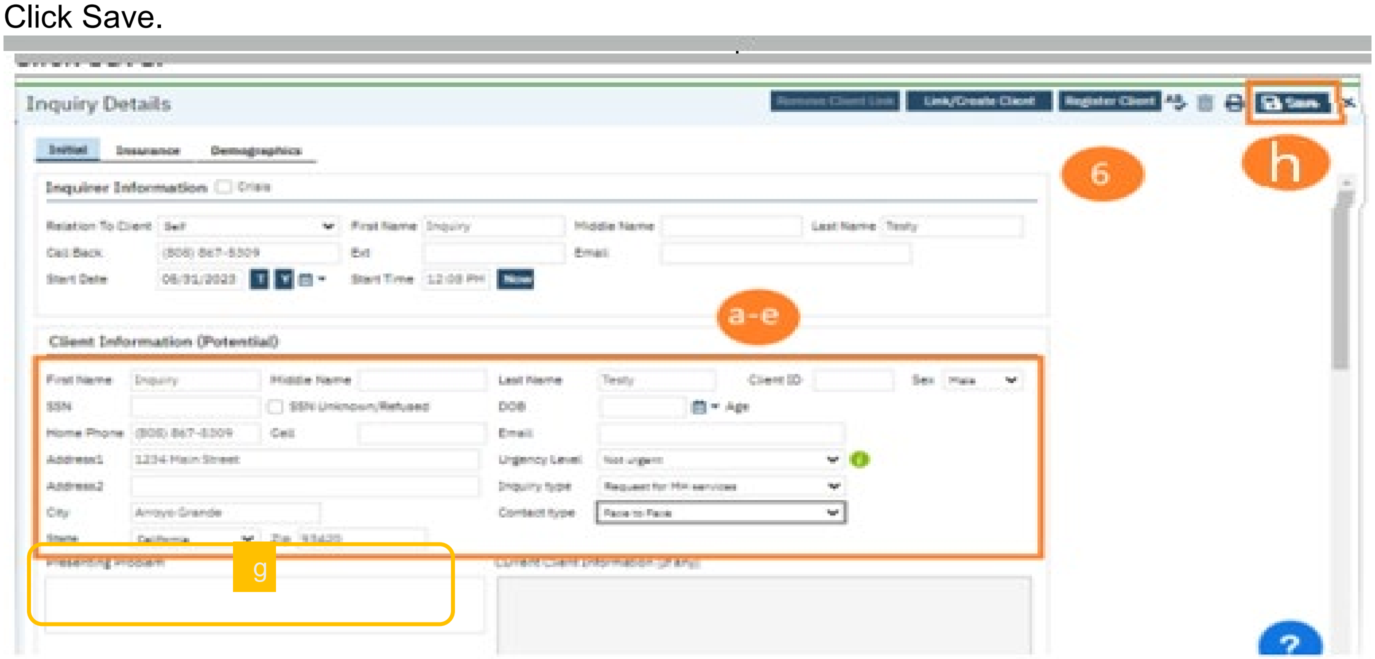
   e. Complete address.

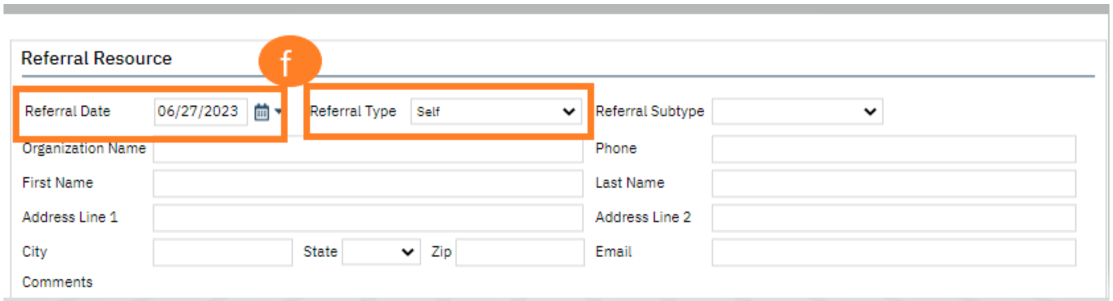
   f. Enter referral date & referral type.

   g. In Presenting Problem box enter information about hospital stay. Name of hospital and dates.

   h. Assign Inquiry to staff handling call.

   i. Click Save.



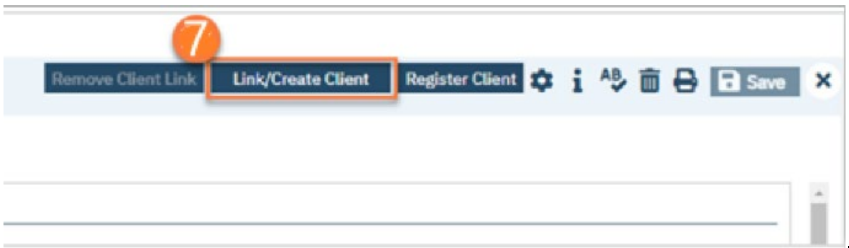


Urgency Level	Description/Use Case	Timelines
Emergent	Use if the call is an emergency	Addressed immediately
Not Urgent	Use if the call is a routine request for services	Appointment within 10 business days
Urgent	Use if the call is an urgent request	Appointment within 72 hours

Inquiry Type	Description/Use Case
Requests for services/screening	Use when the reason for the call is a request for new services
Crisis	Use when the reason for the call is for crisis services
Information	Use when the reason for the call is for information
Discharge/Transition Coordination	Use when the reason for the call is for another provider to coordinate transition of care to/from your agency
Jail Diversion	Use when the reason for the call is related to Jail Diversion programs
Consultation	Use when the reason for the call is for an outside provider seeking a consultation
Other	Use when the reason for the call is not addressed by any of the above

Contact Type	Description/Use Case
Call	Use when the inquiry was complete via telephone
Face to Face	Use when the inquiry was completed via in-person, such as a walk-in
Form	Use when the inquiry was completed via form, such as a referral that was sent to the county
Teleconference	Use when the inquiry was complete via teleconference, such as Zoom, FaceTime, Webex, or other video-audio conferencing software

7. Select the “Link/Create Client” button. This will bring up the client search window, with a few extra buttons at the bottom.



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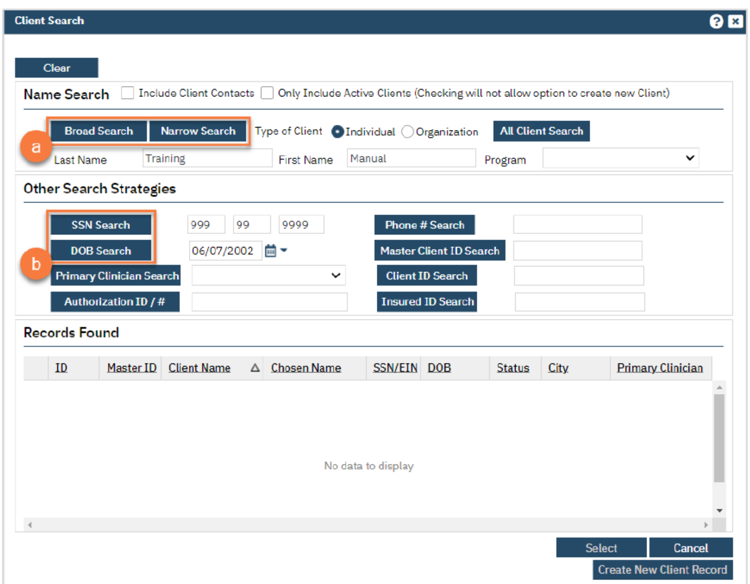
   a. You must search by name by clicking on either “Broad Search” or “Narrow Search”.
   b. You must also search by SSN and DOB by clicking on those respective buttons.



   c. If no records are found based on the search you do, an alert will show at the top of the window.

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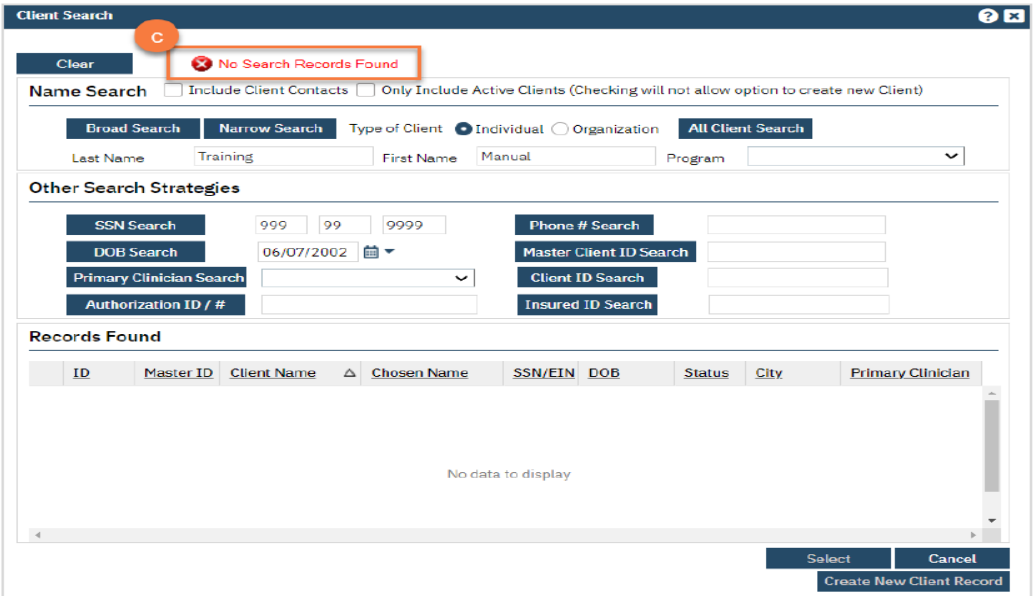
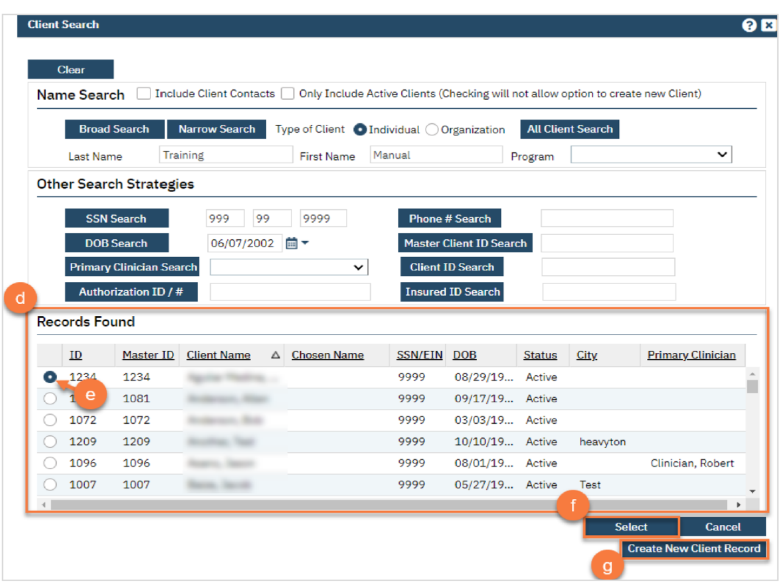


d. Any search results will show in the “Records Found” area. Review the Records Found to determine if the person is already in the system as a client.

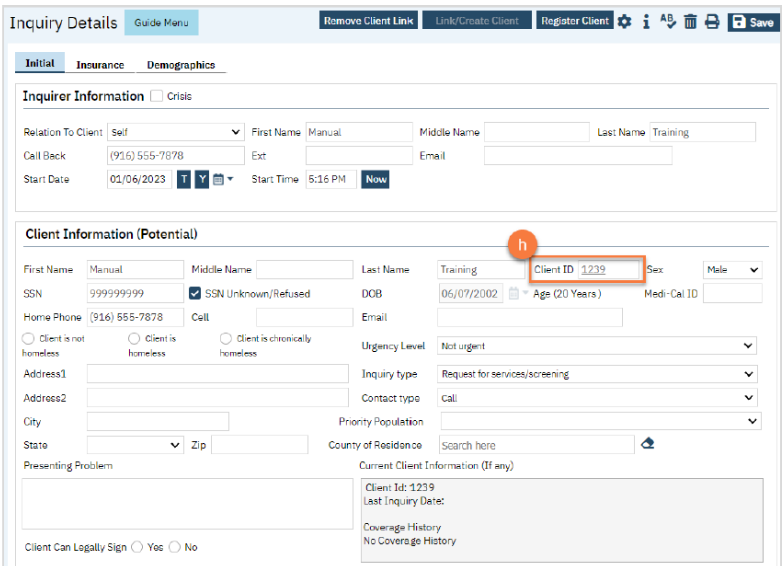
e. If the person is already a client in the system, select the button next to the appropriate record.

f. Click “Select” to link the Inquiry to the selected client.

g. If the person is not a client, meaning no records were found matching the client’s information, click “Create New Client Record.”

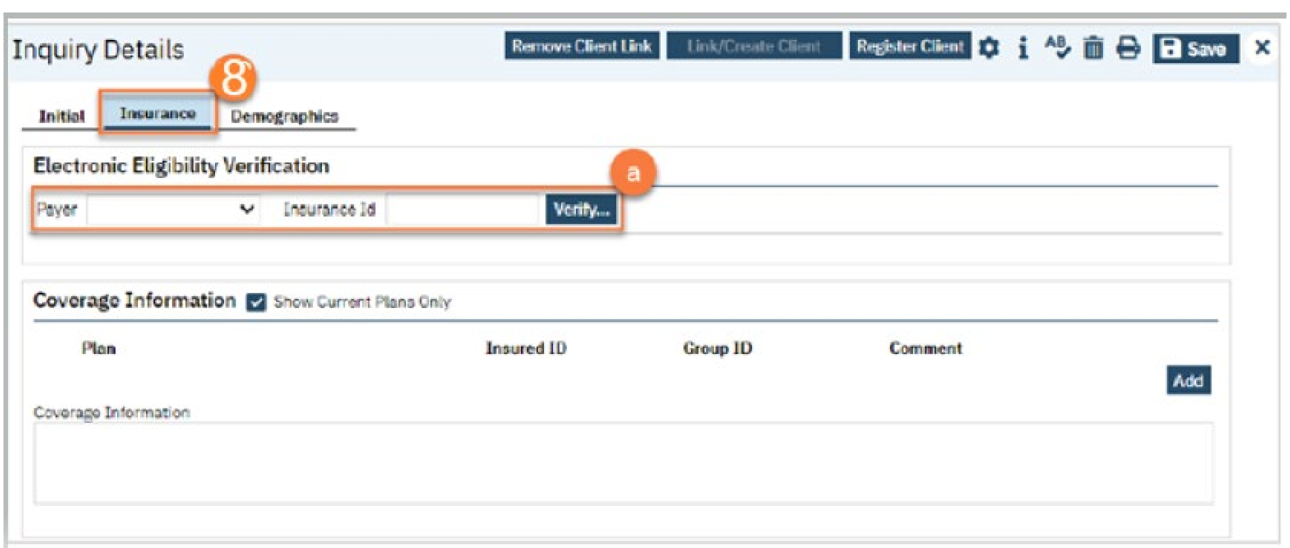


h. This will take you back to the Inquiry screen but now a client ID number will be added. (Make note of client ID # so you can easily find client/open client record once done with the inquiry.)

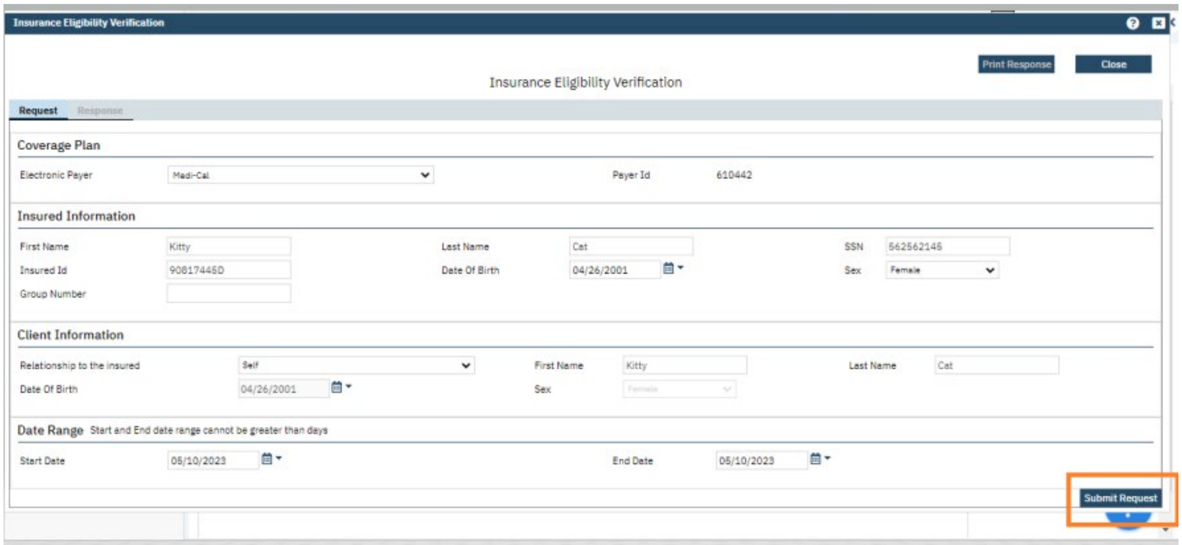


8. Click on the “Insurance” tab.

a. Select “Medi-Cal” from the “Payer” drop-down and enter the client’s Medi-Cal number (CIN) in the “Insurance ID” field. Click “Verify” to verify the client’s Medi-Cal insurance.

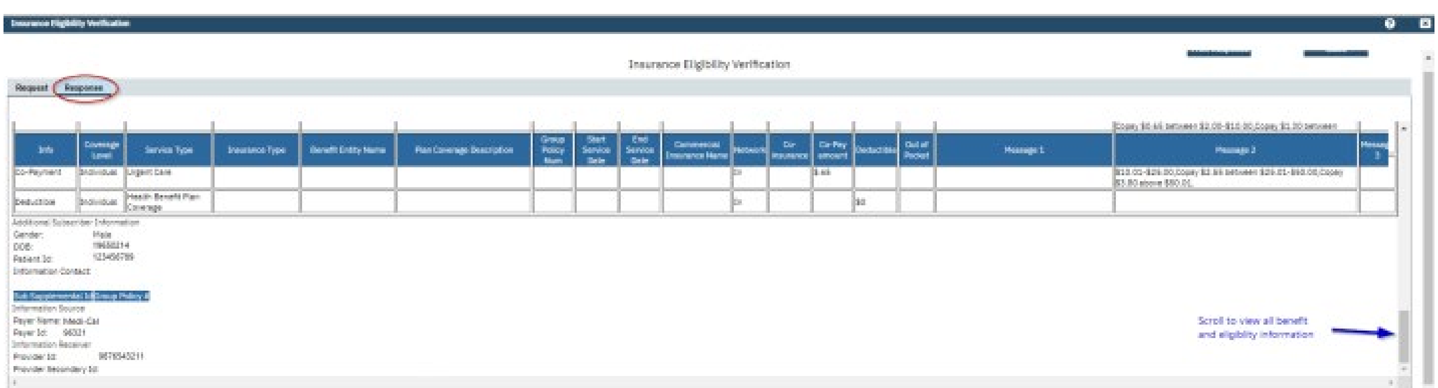


b. The Insurance Eligibility Verification screen opens. Click Submit Request.



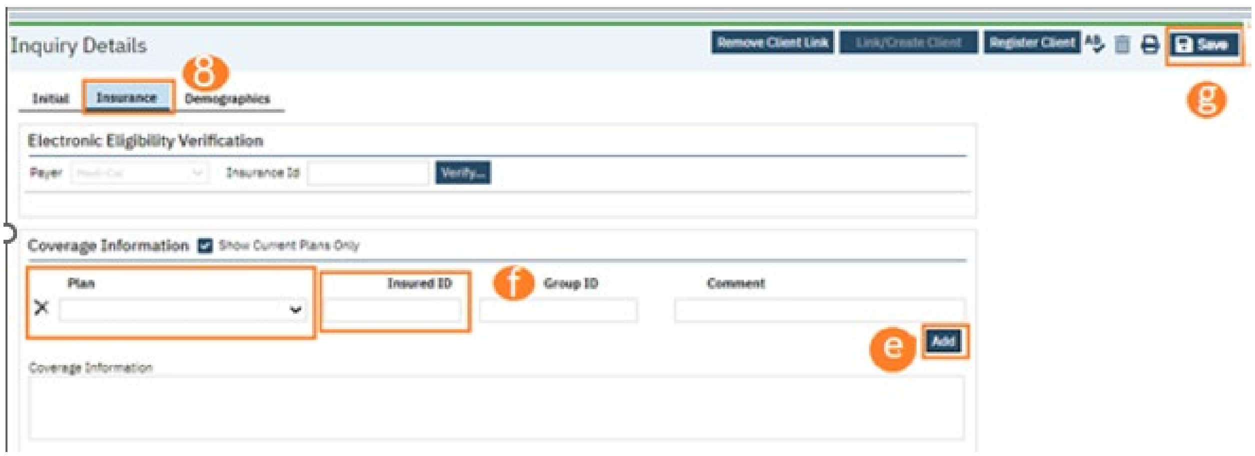
Click the Update Coverage button to automatically update the client's Medi-Cal coverage.

c. Click the Response tab to view and/or print the response. Scroll down to view additional benefits and client information.



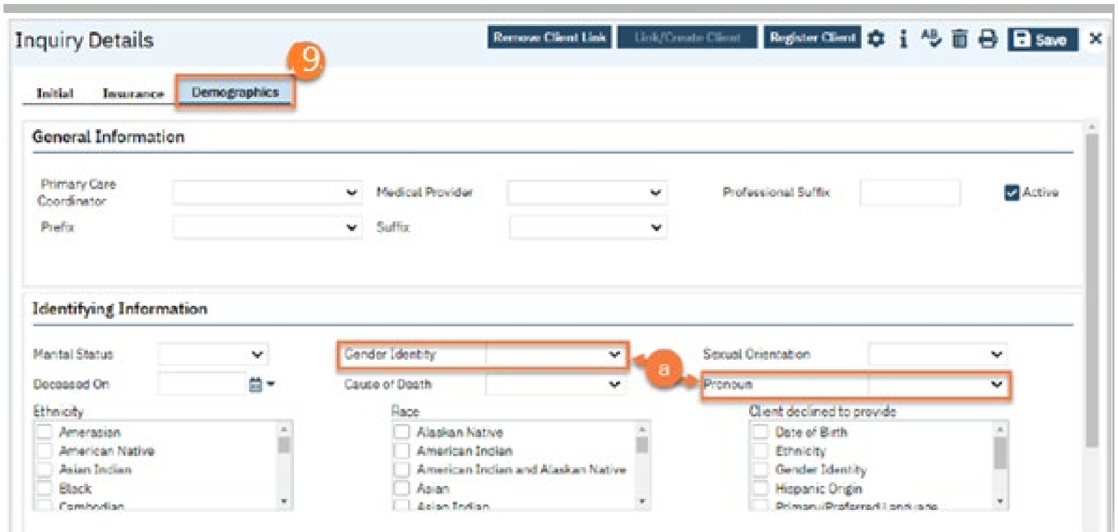
d. Click close to exit this screen.

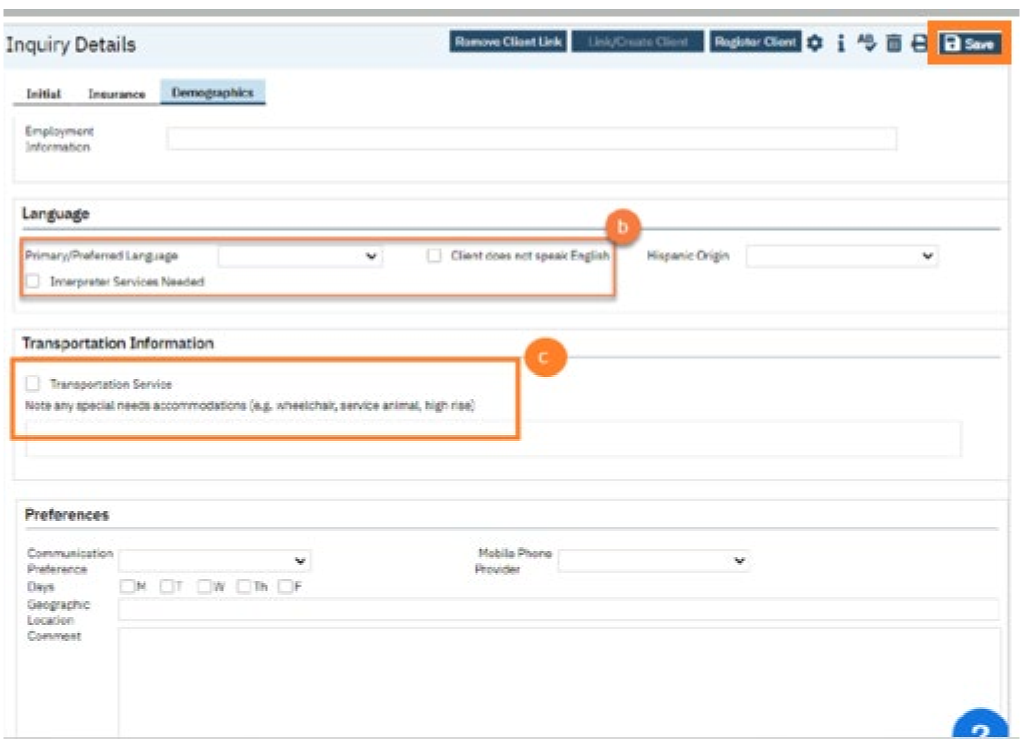
e. Additional insurance information can be added in the Plan field in the Coverage Information section.
f. Click Add. Select the plan from the drop-down and enter in Insured ID#.
g. Click Save.



9. Click on the “Demographics” tab

a. We recommend completing the “Gender Identity” and “Pronoun” fields to ensure the person is not misgendered as additional staff engage with the client.
b. Complete the “Primary/Preferred Language” field. If the client does not speak English or requires an interpreter, make sure to check the appropriate checkbox.
c. If the client has any transportation issues and will need transportation to and/or from appointments, check the Transportation Service checkbox. Save & X to close.





10. Open the client record. Click the Person search icon and enter client ID# or client name. Select the client name.

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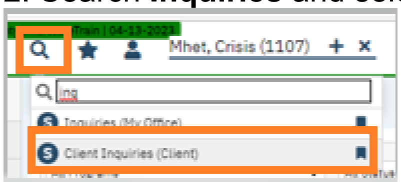
Finish the Inquiry –

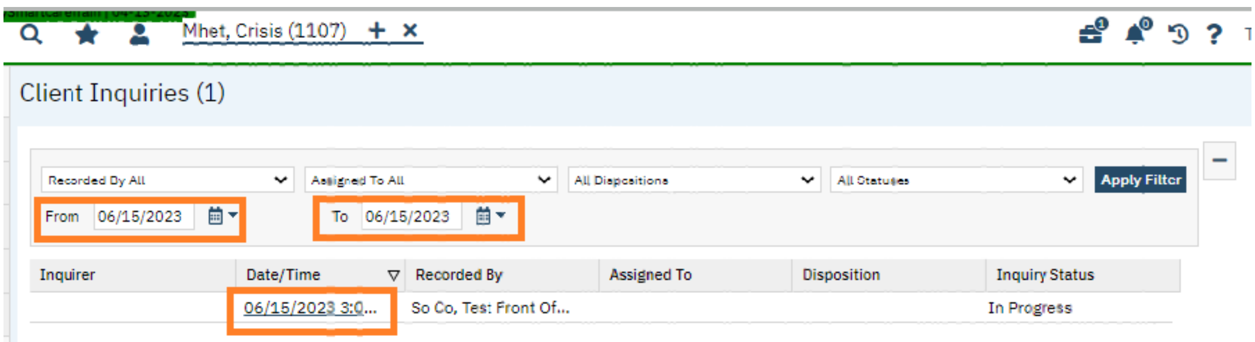
Go back to the Inquiry.

1. Search for the **Inquiry** screen using the search icon.

2. Search **Inquiries** and select **Client Inquiries (Client).**



3. Click the date/time link to open the in-progress Inquiry. (Make sure the filters are set to show the correct dates.)



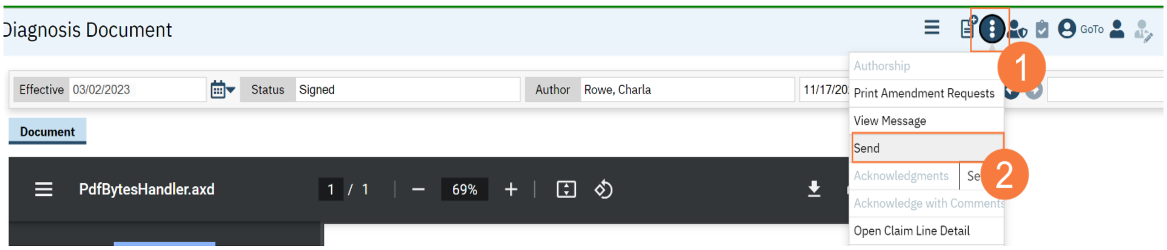
4. In the initial tab, in Dispostion comments add follow up information; scheduled appointment, clinic, and staff.

5. Assign to Central Health Information designee.

Write Note

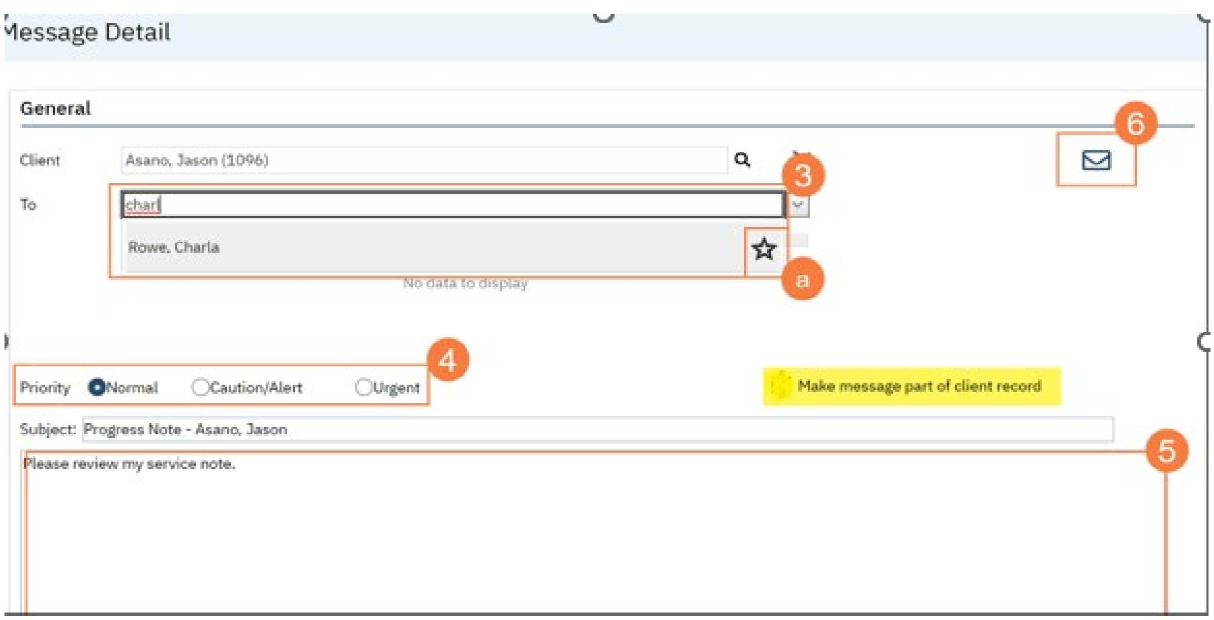
1. With the client open, go to Service Note (Client).
2. Complete service tab and enter diagnosis or social determinant on billing diagnosis tab (marking a priority).
3. Complete Note tab and sign.
4. Using SmartView view client's treatment team. 
5. Using three dots send note via message.
    a. **Click on the three dots icon** in the upper right side.

b. **Click Send** from the menu.



6. **Click in the To box and begin to type the staff member's name.**
    a. To save this person as a favorite **click the Star icon**.
    b. You may add all Treatment Team members to the list of staff to send the message to.
    c. Include Central Health Information staff to the message.
7. **Click the radial button** to change the priority from Normal if it applies**.**
8. **Click in the empty box below** and **type the message.**
9. **Click the mail icon** to send the message.

10. NOTE: DO NOT CHECK THE BOX TO MAKE MESSAGE PART OF THE CLIENT RECORD THE CLIENT RECORD



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Central Health Information Staff

1. Go to **Inquiries (My Office)**
    a. Find Client Inquiry by searching by client.
    b. Verify post appointment information.
    c. Verify disposition entered.
    d. Add end date/time to Inquiry and mark as complete.
2. Verify not a duplicate client.
3. Verify if client enrolled in treatment program for appointment. If not open requested program.
4. Enter Appointment in staff calendar.
5. Verify insurance information, and client information tabs.

Revision History

Date:	Section Revised:	Details of Revision:
1/5/2023	New	
7/25/24	Entire	Improve outline, add “Urgent Appointments,” add section on Spanish speaking clients
Prior Approval dates:		