



Patient Discharge Procedure

Effective: 24 April 2017

1. Guiding Principles

- 1.1 The National Standards for Mental Health Services provide the following guidelines for patients exiting or being discharged from an episode of mental health care. The mental health service ensures upon discharge that:
 - 1.1.1 the patient has access to services that promote recovery, minimise disability and prevent relapse
 - 1.1.2 the patient and carer, close family member or other personal support person (PSP) are provided with information on services and support
 - 1.1.3 there is a system in place to support patient follow up by Community Mental Health Services within seven days of discharge where possible.
- 1.2 Discharge planning commences at the point of admission.
- 1.3 Discharge is a high risk period and a critical point of care.
 - 1.3.1 Patient transfer of care requires clinical handover and documentation to be provided to the receiving Community Mental Health Service, remote area clinic or GP.
- 1.4 The patient and their carer, close family member or PSP is involved in developing the discharge plan. With the patients informed consent a discharge plan may be provided to the carer, close family member or PSP.
- 1.5 It is important that staff help patient to understand that their recovery may continue to take time after discharge and that ongoing community based support may be of benefit.
- 1.6 Every patient must be provided with a Care Transfer Summary SMHMR916 on discharge
- 1.7 Discharge medication information and understanding is provided to all patients and where possible and appropriate their carer, close family member or PSP. Where possible pharmacist assistance is provided for medication reconciliation.
- 1.8 The decision to discharge a patient who has absconded or is absent without leave and patients who discharge against medical advice (DAMA) who do not return within seven days or who do return will be determined on a case by case basis with regard to the [WA Mental Health Act 2014 \(MHA\)](#) principles and [BMHU Absent Without Leave and Missing Persons Procedure](#)
- 1.9 For all patients and or carers including those of Aboriginal origin or Culturally and Linguistically Diverse backgrounds, understanding is to be facilitated where appropriate by:
 - 1.9.1 utilising leaflets/signs
 - 1.9.2 using approved interpreter service
 - 1.9.3 involvement of an Aboriginal Mental Health Liaison Officer
 - 1.9.4 involvement of carer, close family member or PSP.

2. Procedure

- 2.1 Discharge planning must occur for each patient as part of the multidisciplinary clinical review.
- 2.2 The patient and, where possible and appropriate, the carer, close family member or other PSP is to be involved in discharge planning through regular contact by staff.
- 2.3 Where relevant, the community mental health service (CMHS) Case Manager, General Practitioner (GP), Aboriginal Medical Service (AMS) or Remote Area Clinic (RAC):
 - 2.3.1 is to be involved in the patient's discharge planning as far as practicable e.g. invited to attend Tuesday weekly Multidisciplinary Team Meeting via video-conferencing
 - 2.3.2 must be notified of the patient's pending discharge.
- 2.4 The Consultant Psychiatrist or delegate is responsible for:
 - 2.4.1 ensuring a Medical Discharge Summary is complete and that discharge information is communicated to the appropriate follow up agency. Where the Medical Discharge Summary is not available the ward clerk must forward at the earliest opportunity
 - 2.4.2 prescribing of discharge medications
 - 2.4.3 ensuring the patient and or carer, close family member or other PSP understands the discharge plan
 - 2.4.4 ensuring the patient is provided with relevant legal paperwork such as Community Treatment Order (CTO).
- 2.5 Prior to discharge, the discharge nurse is responsible for community follow up arrangements. They must ensure that the receiving service is aware of the pending discharge and
 - 2.5.1 where the patient is referred to CMHS, they must ensure that before leaving the unit the patient is given an appointment time and date including, where possible, the clinician's name. Contact the Case Manager (CM) if the person is case managed. If the CM is not available contact Triage to obtain a 7 day follow up appointment for the patient. Where the patient is not case managed contact Triage for an appointment.
 - The receiving service must be faxed or emailed the relevant discharge documentation including:
 - Mental Health Assessment (SMHMR902) or Psychiatric Assessment.
 - Care Transfer Summary (SMHMR916). Ideally this form is completed electronically and completed and available when the patient leaves the unit.
 - Risk Assessment Management Plan (RAMP) (SMHMR905).
 - Physical Examination (SMHMR 903).
 - *Mental Health Act* CTO forms (if applicable).
 - My Wellness Plan.

- 2.5.2 Where documentation is faxed, the sender must contact the receiving service to ensure it has been received.
- 2.5.3 Ensure the patient's belongings are returned to the patient and the property book is reconciled. [BMHU Patient Property Procedure](#)
- 2.5.4 Ensure that the patient receives a supply of medications and /or prescription.
- 2.5.5 Ensure the patient and or carer, close family member or other PSP understands what medication is prescribed, the regime and consumer medicine information is provided.
- 2.5.6 Health of Nations Outcomes Scale (HONOS) and Kessler10 must be completed on Psychiatric Services On Line Information System (PSOLIS)
- 2.6 Where staff become aware that the patient has made changes to their agreed discharge plan, they are to inform the treating team who are to review the discharge plan and further management.

3. Definitions

HONOS	A system for measuring the health and social functioning of people with severe mental illness.
Kessler10	A brief measure of psychological distress

4. Roles and Responsibilities

- **Clinical Director**
Has overall responsibility for ensuring that services are delivered in accordance with this procedure
- **Consultant Psychiatrist**
Is responsible for the medical management of patients in accordance with this procedure
- **Clinical Nurse Manager**
Is responsible for the implementation of this procedure
- **All Staff**
All staff are required to work within this procedure to make sure Broome Mental Health Unit is a safe, equitable and positive place to be.

5. Compliance

It is a requirement of the WA Health Code of Conduct that employees “comply with all state government policies, standards and Australian laws and understand and comply with all WA Health business, administration and operational directives and policies”. Failure to comply may constitute suspected misconduct under the [WA Health Misconduct and Discipline Policy](#).

6. Evaluation

- This procedure is to be reviewed every five years

7. Standards

- [National Safety and Quality Health Care Standards](#): 1.1; 1.2.2; 1.7.1; 1.9.2;1.17.3; 1.18.1; 4.12.2; 4.12.3; 6.1.1; 6.1.2; 6.4.1; 6.5.1;
- [EQulPNational Standards](#): 11.2.1; 12.4; 12.8; 12.8.1; 12.8.2; 12.8.3; 12.9; 12.9.1;
- [National Standards for Mental Health Services](#): 1.11; 1.12; 1.7; 1.10; 2.13; 4.1; 7.10; 7.2; 7.12; 8.11; 8.9; 9.3; 10.5.1; 10.5.9; 10.5.11; 10.6.1; 10.6.2; 10.6.4; 10.6.5; 10.6.8;
- [National Standards for Disability Services](#): 2.2; 3.5.

8. Legislation

- [WA Mental Health Act 2014](#)

9. References

- [BMHU Discharge Checklist](#)

10. Related Forms

- [SMHMR916 Care Transfer Summary](#)
- [SMHMR902 Mental Health Assessment](#)
- [SMHMR905 Risk Assessment and Management Plan](#)

11. Related Policy Documents

- [WACHS Adult Psychiatric Inpatient Services - Referral, Admission, Assessment, Care and Treatment Policy](#)
- [WACHS Patient Discharge, Escort, Transfer and Transportation Clinical Practice Standard](#)
- [BMHU Patient Admission Procedure](#)
- [BMHU Patient Property Procedure](#)
- [BMHU Absent Without Leave and Missing Persons Procedure](#)

12. Related WA Health Policies

- WA Health [Operational Directive OD 0540/14 Admission, Readmission, Discharge and Transfer Policy for WA Health Services \(2014\)](#)
- WA Health [Assertive Patient Flow and Bed Demand Management for Adult Services Policy and Practice Guidelines](#)

13. WA Health Policy Framework

- [Mental Health Policy Framework](#).

**This document can be made available in alternative formats
on request for a person with a disability**

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