

# Hospital Discharge workflow guidance

# Summary:

All hospital practitioners use the workflow step **Hospital Discharge**. This step is used to detail the current circumstances, potentially propose a care plan/ services, and send a task to Purchasing to ensure these are arranged for discharge.

This step can be created from scratch (from 'Start', as a stand-alone step), however it will then consequently link in with other Three Conversation workflow steps, if required.

This step is also to be used by any practitioner facilitating the discharge, such as an allocated worker in the community<sup>\*</sup>.

This workflow step is kept open while planning the discharge, and also 24 hours after the individual has returned home, to ensure the follow up section is completed before being finished.

It's important for the worker completing the Hospital Discharge workflow step, to check which existing workflow steps are already open/ pending, to avoid any duplication.

\*The current process is that when an adult is admitted to hospital, the hospital social worker will lead and co-ordinate the discharge planning in most cases. Where there is an allocated social worker, they should liaise with the hospital social worker and agree who will lead on the discharge. The allocated SW must not deallocate a case because the person has been admitted to hospital and nor should they cancel any care package until full admission to a ward is confirmed. Once the discharge from hospital has taken place the review will return to the primary allocated social worker or locality to complete.

## 1. Starting the Hospital Discharge workflow step

• Using the person's toolbar, select 'Start', 'New' and then *Hospital Discharge*, to open this workflow step:

Person summary	y - Caitlin Test (220	7627) born 1 Nov 1954 (69 years old)	
Demon detelle		Start	
Person details 🔹	Demographic in	<u>Dol - Application/Assessment</u>	
Start >		DoL - Enquiry/Casework	
Case notes	Address	DP Monitoring - Initial	
Documents		DP Monitoring - Review	
	Main address	• <u>HoNOS-LD</u>	
Health >		Hospital Discharge	
1 1 - 1 - 1		Initial Record (New or returning adults only)	



2. Completing the Hospital Discharge form

• Check the prepopulated details in **Section 1: Basic Details** to ensure all are correct:

Hospital Discharge Form		
Sections	1. Basic Details	
1. Basic Details		*indicates required field
2. Reablement only	Basic details of adult 🧭	
3. Ongoing care only		
4. Discharge details	NHS Number	
5. Manager decision	NB. It is vital that we have accura	ate NHS numbers for our records to assist the sharing of data with and from our Health partners
6. Follow up		ate the nembers to our records to associate sharing of acta with and non-our realth partners
7. Next actions	Person's Full Name	Caitlin Test
<ul> <li>indicates completed section</li> </ul>		
	Date of Birth	01/11/1954
	Address	40 Argyle Square London WC1H BAL
	C	Please tick if the person currently has no fixed abode
	Phone numbers	Home 020 8888 7777
	Email	<b>*</b>

- Please ensure the NHS number is recorded on the person's main record, to assist in the sharing of data with and from Health partners.
- Complete the *What Matters* section, noting the link to the Ethnical Framework for ASC. If this section has been completed in a previous workflow step, the information will pull through here to be helpful and can be amended/ added to:

What matters	
NB. Please use this link to read the Ethical Framework for Adult Social Care	
What matters to the person?*	

- If you answer 'Yes' to whether the person is already in receipt of services prior to admission, then it will inform you when the last review was completed. If it's blank, then a Review has not yet been completed for the person.
- Please note the list of current or pending workflow steps already in place for the person in the *Pending/scheduled work* table. This is for information only, to highlight what workflow is already in existence so you are aware of the current ASC involvement, but also to support you to not create workflow duplication as an outcome of this *Hospital Discharge* step:

Are they already in receipt of servi	ces from Adult Social Care (prior t	o hospital admission)?*	
• Yes	○ <sub>No</sub>		
Date of last completed review 22/12	/2023 🔳 🛟		
	Pending/sc	heduled work	
	-		
Work step		Date scheduled	Date started
Work step What matters - Support Plan Updates	;/Review 🔁	Date scheduled 22/12/2023	Date started



- Complete the remaining information required in Section 1, including:
- Next of Kin/ Key contacts
- GP information (if the GP does not pull through here, please manually add it)
- Consent
- Capacity (note the guidance around the current MCA and BIA process).
- Covid-19 status
- Admission details
- Medical information (post op instructions, medication, weight bearing and skin integrity)
- Accessibility (note the guidance around key safe codes- not to be recorded anywhere other than a secure case note).
- If there is a key safe (do not record the code in your form/ workflow- this needs to be recorded securely in case notes: Key safe recording guidance).
- In Section 2: Reablement only, you can detail any reablement services being put in place for discharge.
- The *Reablement Goals and Plan* table is to detail the reablement goals and outcomes.
- **Reablement ONLY Provisional care timetable** is to detail the reablement support that will be provided for discharge.
- Please note, these tables are not mandatory, so for instance if outcomes cannot be detailed at this stage, or no reablement is going to be put in place; these do not need to be completed.
- Once this Hospital Discharge workflow is finished, these tables will also then pull through to any future Three Conversation workflow steps.

				Reableme	nt Goals and Plan	ı	
Goal	Actio	n		By who	m	When	
							Add
			Reablem	ent ONLY -	Provisional care	timetable	
Activities	No. of carers	Frequency	Day	Hours	Time of day	Start time (if specified)	Weekly hours
							Add 🗟
Reablen	nent - Total Hours 0						

• Underneath the reablement tables, you will find an enhanced reablement authorisation section available, if this is required:

			R	eableme	ment ONLY - Provisional care timetable			
Sections	Activities	No. of carers	Frequency	Day	Hours	Time of day	Start time (if specified)	Weekly hours
1. Basic Details 2. Reablement only								Ad
<ol> <li>Ongoing care only</li> <li>Discharge details</li> </ol>	Reablement	- Total Hours 0						
5. Manager decision								
7. Actions Taken	Request for enh	anced reableme	nt services 🥩					
indicates completed section	Reablement so         30 hours or         Extension p	ervices required above past 4 weeks		Double	carer supp	ort	□ Night care	



- You'll note enhanced reablement means a reablement package of care that is over 30 hours, includes double handed care, any night time support, or an extension past the usual maximum of 4 weeks. If the reablement care you're proposing includes any of these, you will need to send a different authorisation task to the enhanced reablement team via the request icon in the toolbar (please go to authorisation section of this guide).
- In Section 3: Ongoing care only, you can detail any ongoing services being organised for discharge.
- The *Support Plan- purchased support* table is to detail the person's outcomes.
- The *Provisional care timetable* is to detail the ongoing support that will be provided.
- Please note, these tables are not mandatory, so for instance if outcomes cannot be detailed at this stage, or no ongoing support is going to be put in place; these do not need to be completed.
- If either of these tables have been completed in a previous workflow step (in a *Conversation 3* step or a *Support plan updates/ Review* step for instance), the details will pull through here, and you can amend if required (if an increase in care is being implemented etc).

			Ope	n services			
Service		Start date			s	tatus	
		Su	ipport Plan ·	- purchased support		¢	
What I want to achieve	The support I will need	Who will support n	ne with this	When will I need this supp	ort (if known)	Updates/Has this been achieved?	
x	x	x		×			0
							🗟 Add
Lctivity categories: • PC - Personal care • MD - Medication • ML - Meal preparation • TL - Tollet use • CL - Cleaning • SH - Shopping				-			
			Provisional	care timetable 🤣			
Activities No. of	carers Frequer	icy Day	Hours	Time of day Sta	rt time (if specit	ied) Weekly hours	🗟 Add
т	otal Hours 0						

- Once this Hospital Discharge workflow is finished, these tables will also then pull through to any future Three Conversation workflow steps.
- If organising discharge for a person who already draws on care, and changes are required to the existing ongoing service, you will be detailing any amendments also in this section (Section 3. Ongoing care only), before tasking this to your manager for authorisation.

1 Pasia Dataila	Service		Start date			Status	5	
2. Reablement only								
3. Ongoing care only			Sup	port Plan – pu	irchased sup	port		
4. Discharge details								
5. Manager decision	What I want to	The support I will	Who will sup	port me with	When will I	need this support (if	Updates/Has this been	
6. Follow up	achieve	need	this		KNOWN)		achieved?	
7. Actions Taken								-
indicates completed ection	Activity categor PC - Persona MD - Medicat ML - Meal pre TL - Toilet us CL - Cleaning SH - Shoppin	les: ion sparation e g						STAGO
			Р	rovisional ca	e timetable	Ŷ		
	Activities	No. of carers Freq	uency Day	Hours 1	ime of day	Start time (if specifie	d) Weekly hour	S
								₿Add



# • In Section 4: Discharge details

- Complete the discharge details underneath the support plan: detailing the date of discharge, the date support is required from, the type of support from the drop down, and the discharge pathway from the drop down:

4. Discharge details		
Discharge		
Name of worker*	Efioawan Glover	<b>*</b>
Team	HASC	<b>*</b>
	Please tick if person deceased before	discharge process completed
Date of discharge	•	
Date support required		
Adult Social Care support required on discharge:	Please Select  V	<u>~</u>
Discharge pathway	Virtual ward Reablement	~
Section completed	Un-going Care Residential care home Nursing care home Reablement flat – Henderson Court No support required	



Date support required	26/12/2023	
Adult Social Care support required on discharge:	On-going care	~
Discharge pathway	Please Select 🗸	<b>1</b>
<ul><li>Pathway 0: Discharge with</li></ul>	Please Select P0 P1	ig arranged.
<ul> <li>Pathway 1: Discharge with a non-residential package of a</li> </ul>	II P2 8 P3	and support. This includes new reablement or ongoing care and the reinstatement of any existing ted.
• Pathway 2: Discharge to sh	ort term residential and	nursing care – in effect 'interim' care.
Pathway 3: Discharge to lor	g term residential or nu	rsing care.

- □ Section completed
  - If the person passes away before this discharge process has been completed, you can select the tick box here, which will hide the discharge information which is no longer required:

4. Discharge details	4. Discharge details				
Discharge					
Name of worker*	Efioawan Glover	<b>*</b>			
Team	HASC	<b>*</b>			
	Please tick if person deceased before discharge pro	cess completed			



#### 3. Sending Authorisation Requests

For standard reablement or ongoing care authorisation:

 Once you have completed either the reablement plans (Reablement Goals and Plan and Reablement ONLY - Provisional care timetable) in Section 2, or the ongoing care plans (Support Plan – purchased support and Provisional care timetable) in Section 3, you will need to send an authorisation task to your manager, via the request icon

in the toolbar:

<b>.</b> V 2 🔁 🗓	Ø (o)	8			
Hospital Discharge Form	Perso	New reques	st		
Sections	3.0				
1. Basic Details		Select	Request type	<ul> <li>Status (date)</li> </ul>	Assigned to
2. Reablement only		0	Enhanced Reablement Services – Authorisation	Ē	
3. Ongoing care only	Guida	۲	Support Plan – Manager Decision	Ē	
4. Discharge details	• NE				
5. Manager decision	• DC		Note	~ 1	_
6. Follow up					
7. Actions Taken	• Plo			~	
indicates completed section	To     th     Or     up	Pa	ss to worker* Find		
	• Or re	This r	request will be sent when you next save.		
					OK Cancel

- Select 'Support Plan Manager Decision', put a note and send to the manager (click 'Find' by Pass to worker and search for your manager), before selecting 'Ok'.
- You can now 'Save and Close' your workflow and wait for your manager to authorise the workflow.
- Your manager will resume your workflow step and complete Section 5: Manager decision, authorise and 'complete' the task under the request icon that you've sent them.
- Once authorised, you can resume and proceed with your workflow step.

## For Enhanced Reablement authorisation:

If organising an enhanced reablement package for discharge, you will need to task this to the **Virtual Reablement Lead** for authorisation (instead of your manager).

	📑 🖉 (o 👗			
n		New request		
	4. Discharge de			
		Select Request type       Enhanced Reablement Services – Authorisation	Status (date)	Assigned to
y	Discharge	O Support Plan - Manager Decision	Ē	
, 1		Note		
ection			li	
	Date	Pass to worker* Please select 🗸		
	Adult Social Care	Please select     This request will be: Virtual Reablement Lead		
	Dis			OK Cancel
	□ Section complete	bd		



- Using the request icon in the toolbar, select 'Enhanced Reablement Services-Authorisation' and send to Virtual Reablement Lead.
- You can now 'Save and Close' your workflow and wait for the Reablement Lead/s to pick this up.
- Based on the information you have provided in your hospital workflow step, and having discussed this with Reablement Lead, they can then make a decision whether enhanced reablement can be agreed.

- If agreed, the Reablement Lead will resume your workflow step and 'complete' the task (via the request icon) that you've sent them.

- The Reablement Lead will also complete the authorisation text box that opened when you chose the relevant enhanced reablement options in Section 2. They will detail their decision and tick the authoriser box:

(eaplement services required			
✓ 30 hours or above	Double carer support	□ Night care	
Extension past 4 weeks			
Authorisation (to be completed by	Reablement Lead)		
Decision			

• Once completed, you can resume and proceed with your workflow step.

#### 4. Manager Authorisation

• As the authorising manager, this authorisation request will appear in your **Incoming** request folder under Current work.



• Click on 'Support Plan – Manager Decision: Hospital Discharge' and select Resume:

Hospital Discharg	ge: Caitlin Test (2207627)	
Resume Person summary	Status	Documents
Work history	🖥 Incomplete	Hospital Discharge Form
	15	Proposed next actions
	15494209	🛞 🖹 No Further Action
	Assignment details	Requests
	Assigned to: Eficawan Glover History	Support Plan - Manager Decision - SENT   <u>History</u> Assigned on 22/12/2023 12:18 to <u>Effoawan Glover</u> by <u>Effoawan Glover</u>
	Progress details	
	Started on: 22/12/2023 12:18 Last updated by: <u>Efioawan Glover</u> on 22/12/2023 12:18	



- Read Section 1 4 of the Hospital Discharge workflow, completed by the practitioner.
- Complete Section 5: Manager Decision:

Support plan approved?		
• Yes	○ <sub>No</sub>	
Details of decision/feedback	t.	
⇔	A Mandatory Field Manager details A Mandatory Field	
Guidance: Please note, to assist the	Purchasing Team in ensuring the right level of authorisation has been obtained	, please complete the additional information below
Total hours OR value being approved		
Authorisation outside of Mosaic	<i>#</i> ,9	9

- Details of decision/feedback manager to complete this section.
- Manager details tick this box to display your name as the authoriser.
- Total hours OR value being approved detail the hour or value agreed.
- Authorisation outside of Mosaic not relevant when you are the manager. authorising in the step; this can be left blank (some practitioners would use this text box to copy and paste an authorisation email for instance from a manager, when the manager is unable to update Mosaic).
- To authorise the request/ task sent, click on the Requests icon and select **Support Plan – Manager Decision,** highlighted in red.

Hospital Discharge : Caitlin Tes	st 2207627	
🔚 🖬 🔽 🎦	🛃 🖉 (o 👗	
🔺 Hospital Discharge Fe 🛛 🔺 🔒	Support Plan – Manager Decision - 2	22/12/2023 (Efioawan Glover)
Sections Sections	nd request	<b>企</b>
1. Basic Details 2. Reablement only	Guidance: This section should o	Sent request
<ol> <li>Ongoing care only</li> <li>Discharge details</li> <li>Manager decision</li> </ol>	Support plan approved?	Request ID: 1043891 Request type: Support Plan – Manager Decision
6. Follow up ▲ 7. Next actions	© Yes Details of decision/feedbag	${\cal O}$ You may complete, withdraw or return the request, change the note or reassign to another party.
Indicates completed section		Status O Sent O Withdrawn O Completed O Returned

- Select Completed and then OK. You do also have an option to return this task to the practitioner if you feel more work/ information is required (select 'Returned' and add a note). If you opt for this response, the practitioner will need to send you another request task to authorise again, to be able to proceed.
- **Save and close** the workflow and let the practitioner know the request has now been authorised.
- The practitioner will complete the 'Follow up' and 'Next actions'.



#### 5. Next actions

- Under Section 7: Next actions, there are several options you can select, depending on the outcome for discharge.
- If you require new services to be set up or existing services to be amended for discharge, you will need to select the relevant purchasing workflow step as an outcome.

Next actions	
Select action Existing client: Pu	chase/Change Service (Personal Budget) ~
Pass to worker Find Clear	Assign To Me
Pass to team Please select Note Please select ASC Purchasing Te	am I
Priority	
O 🕭 Urgent 💿 🗎	lormal O 🎍 Low

- Select 'Send immediately' to ensure it is sent at the point of saving the workflow.
- For the majority of services, you are passing this purchasing step to the ASC
  Purchasing Team, from the drop down. However, if you are increasing a Direct
  Payment for discharge for instance, the Purchase Service (Personal Budget) step will
  need to be assigned to yourself for you to amend this on the system as usual- not
  the Purchasing Team.

It's important to ensure the correct actions are selected, alongside any purchasing step. Please note the different titled steps for mental health, new clients and existing clients:

Next actions	
Select action	Please select 🗸
	Please select
	Mental Health only: Purchase Service (Reablement)
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)
	New client: Purchase Service (Reablement)
	New client: Conversation 2 – progress reablement
	New client: Purchase Service (Personal Budget)
	New client: Conversation 3 – progress ongoing service
Priority	New client: Purchase Service (Residential/nursing)
	New client: Conversation 3 – progress residential/nursing service
	Existing client: Purchase Service (Reablement)
	Existing client: Purchase/Change Service (Personal Budget)
	Existing client: Purchase/Change Service (Residential/nursing)
	Existing client: Contact relevant team to bring review forward
	No Further Action



## **MENTAL HEALTH: Reablement**

• If you are organising reablement support for discharge for a person whose primary need is mental health (they are under MH services), then the following two actions need to be selected together.

The *Mental Health only: Purchase Service (Reablement)* step to be sent to the Purchasing team, and the *Mental Health only: Work transferred to Mental Health (outside of Mosaic)* action which is for information purposes, because it does not get assigned (they complete their reablement reviews/ follow up outside of Mosaic). You will also need to email the allocated Mental Health team separately to make them aware.\*

xt actions	
Select action	Please select 🗸
	Please select
	Mental Health only: Purchase Service (Reablement)
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)
	New client: Purchase Service (Reablement)
	New client: Conversation 2 – progress reablement
	New client: Purchase Service (Personal Budget)
	New client: Conversation 3 – progress ongoing service
Priority	New client: Purchase Service (Residential/nursing)
O B Hannah	New client: Conversation 3 – progress residential/nursing service
🗆 🔤 Urgent	Existing client: Purchase Service (Reablement)
	Existing client: Purchase/Change Service (Personal Budget)
	Existing client: Purchase/Change Service (Residential/nursing)
	Existing client: Contact relevant team to bring review forward
	No Further Action

\*When a person is admitted to hospital and is open to MH services, the hospital worker will contact the relevant service and ask them to lead on the discharge. ASC SW at this point have no access to MH funding streams so are unable to set up care or placements on behalf of MH services. We can advise and link with hospital discharge teams only.

## NEW CLIENTS: Did not have any formal services prior to admission

If you are organising reablement support for discharge, then the following two actions need to be selected together.
 The Purchase Service (Reablement) step to be sent to the Purchasing team, and the sent to the Purchase service (Reablement) step to be serv

The *Purchase Service (Reablement)* step to be sent to the Purchasing team, and the *Conversation 2* step to be assigned to you to complete:

Select action	Please select V
	Please select
	Mental Health only: Purchase Service (Reablement)
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)
	New client: Purchase Service (Reablement)
	New client: Conversation 2 – progress reablement
	New client: Purchase Service (Personal Budget)
	New client: Conversation 3 – progress ongoing service
Priority	New client: Purchase Service (Residential/nursing)
	New client: Conversation 3 – progress residential/nursing service
J Ma Orgent	Existing client: Purchase Service (Reablement)
	Existing client: Purchase/Change Service (Personal Budget)
	Existing client: Purchase/Change Service (Residential/nursing)
	Existing client: Contact relevant team to bring review forward
	No Further Action



• If you are organising new ongoing services for discharge, then the following two actions need to be selected together.

The *Purchase Service (Personal Budget)* step to be sent to the Purchasing team, and the *Conversation 3* step to be <u>assigned to you</u> to complete:

Next actions	
Select action	Please select V
	Please select
	Mental Health only: Purchase Service (Reablement)
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)
	New client: Purchase Service (Reablement)
	New client: Conversation 2 – progress reablement
	New client: Purchase Service (Personal Budget)
	New client: Conversation 3 – progress ongoing service
Priority	New client: Purchase Service (Residential/nursing)
O Buland	New client: Conversation 3 – progress residential/nursing service
Orgent	Existing client: Purchase Service (Reablement)
	Existing client: Purchase/Change Service (Personal Budget)
	Existing client: Purchase/Change Service (Residential/nursing)
	Existing client: Contact relevant team to bring review forward No Further Action



Note, the Conversation 3 needs to be completed to detail eligibility etc, before it can progress to a Support Plan Updates/ Review (which is passed to the relevant neighbourhood team).

• If you are organising a placement for discharge, then the following two actions need to be selected together.

The *Purchase Service (Residential/nursing)* step to be sent to the Purchasing team, and the *Conversation 3* step to be <u>assigned to you</u> to complete:

Select action	Please select
	Please select
	Mental Health only: Purchase Service (Reablement)
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)
	New client: Purchase Service (Reablement)
	New client: Conversation 2 – progress reablement
	New client: Purchase Service (Personal Budget)
	New client: Conversation 3 – progress ongoing service
Priority	New client: Purchase Service (Residential/nursing)
	New client: Conversation 3 – progress residential/nursing service
	Existing client: Purchase Service (Reablement)
	Existing client: Purchase/Change Service (Personal Budget)
	Existing client: Purchase/Change Service (Residential/nursing)
	Existing client: Contact relevant team to bring review forward
	No Further Action

Note, the Conversation 3 needs to be completed to detail eligibility etc, before it can progress to an Initial Placement Review (you will be passing this to the Placement Reviews team- the Virtual Initial/Unscheduled Placement Reviews (unallocated) folder.)

Next actions		
Select action	Initial Placement Review	
Scheduled Date	02/02/2024	
Pass to worker	Find Clear Assign To Me	
Pass to team	Please select V	
Note	Please select	
	CLDS Integrated Team - Health Funded	
	CLDS Integrated Team - In Borough Communities	
	CLDS Integrated leam - In Borough Supported Living	
	Elex 360 - Adult Social Care Team	
Priority	Virtual Initial/Unscheduled Placement Reviews - Central Neighbourhood	
🔿 🔔 Urgent	Virtual Initial/Unscheduled Placement Reviews - North Neighbourhood	
	Virtual Initial/Unscheduled Placement Reviews - North/East Neighbourhood	
	Virtual Initial/Unscheduled Placement Reviews - South Neighbourhood	
	Virtual Initial/Unscheduled Placement Reviews - West Neighbourhood	
	Virtual Initial/Unscheduled Placement Reviews (unallocated)	
	Add Add and close Clos	
	Add Add and close clos	



# EXISTING CLIENTS: Has formal services in place prior to admission

• If you are organising reablement support for discharge, then the following two actions need to be selected together.

The *Purchase service (Reablement)* step to be sent to the Purchasing team, and the *Contact relevant team to bring review forward* outcome- which isn't a step, but for information purposes, so therefore:

 Once you have finished this *Hospital Discharge* step, you need to pick up the existing Review in place and review the reablement support in that workflow step (under Section 3 of the Review form). If the ongoing arrangement needs to be amended after reablement, it can all be detailed and organised in the Review.

Next actions			
Select action	Please select V		
	Please select		
	Mental Health only: Purchase Service (Reablement)		
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)		
	New client: Purchase Service (Reablement)		
	New client: Conversation 2 – progress reablement		
	New client: Purchase Service (Personal Budget)		
	New client: Conversation 3 – progress ongoing service		
Priority	New client: Purchase Service (Residential/nursing)		
	New client: Conversation 3 – progress residential/pursing service		
	Existing client: Purchase Service (Reablement)		
	Existing client: Purchase/Change Service (Personal Budget)		
	Existing client: Purchase/Change Service (Residential/nursing)		
	Existing client: Contact relevant team to bring review forward		
	No Further Action		

- If you are amending the existing ongoing community support for discharge, then
  the following two actions need to be selected together.
  The Purchase/ Change Service (Personal Budget) step to be sent to the Purchasing
  team (or to yourself if a Direct Payment is in place), and the Contact relevant team to
  bring review forward outcome- which isn't a step, but for information purposes, so
  therefore:
  - Once you have finished this *Hospital Discharge* step, you need to start the Review workflow to review the changed ongoing support.

Select action	Please select 🗸	
	Please select	
Note	Mental Health only: Purchase Service (Reablement)	
	Mental Health only: Work transferred to Mental Health (outside of Mosaic)	
	New client: Purchase Service (Reablement)	
	New client: Conversation 2 – progress reablement	
	New client: Purchase Service (Personal Budget)	
	New client: Conversation 3 – progress ongoing service	
Priority	New client: Purchase Service (Residential/nursing)	
🔿 🕭 Urgent	New client: Conversation 3 – progress residential/nursing service	
	Existing client: Purchase Service (Reablement)	
	Existing client: Purchase/Change Service (Personal Budget)	
	Existing client: Purchase/Change Service (Residential/nursing)	
	Existing client: Contact relevant team to bring review forward	
	No Further Action	



• If you are changing the existing community support to a placement or need to amend the existing placement service already in place, then the following two actions needs to be selected together.

The *Purchase/ Change Service (Residential/nursing)* step to be sent to the Purchasing team, and the *Contact relevant team to bring review forward* outcome- which isn't a step, but for information purposes, so therefore:

- If you are a hospital worker, <u>and a placement was already in place</u>, you need to email the relevant team outside of Mosaic to request for the existing Placement Review workflow to be picked up.
- If you are a hospital worker, and you are changing the community support to a placement, then you will need to pick up the existing Support plan updates/ Review step, document the Review you have completed, and then send an Initial Placement Review step to the Placement Reviews Team, emailing them to inform them.
- If you are a community worker allocated to the case, then you need to start whichever Review workflow is in place to review the changed ongoing support.

Select action	Please select 🗸
	Please select
	Mental Health only: Purchase Service (Reablement)
Note	Mental Health only: Work transferred to Mental Health (outside of Mosaic)
	New client: Purchase Service (Reablement)
	New client: Conversation 2 – progress reablement
	New client: Purchase Service (Personal Budget)
	New client: Conversation 3 – progress ongoing service
Priority	New client: Purchase Service (Residential/nursing)
🔿 🕭 Urgent	New client: Conversation 3 – progress residential/nursing service
	Existing client: Purchase Service (Reablement)
	Existing client: Purchase/Change Service (Personal Budget)
	Existing client: Purchase/Change Service (Residential/nursing)
	Existing client: Contact relevant team to bring review forward
	No Further Action

# **NO FURTHER ACTION**

• If you are not setting up any services for discharge, or are not making any changes to the existing support in place, then select the action **No Further Action**- selecting a 'Reason' from the drop-down:

		_	
Reason*	Please Select V		
Note	Health funded care		
	Other (Please specify below)		
	Person declased		
	Private care in place		1.
riority	Restart of existing support		
noncy	Transferred to local hospital		
) 💫 Urgent	Normal	O 🎥 Low	

• If the person has passed away, and you need to generate a purchasing workflow step to terminate services, you won't be able to do so from this step. This can however be actioned in the ASC Case Closure workflow step (Case Closure Guidance).



#### 6. Follow up section (day after discharge)

- After 24 hours from discharge, you will need to 'Resume' this **Hospital Discharge** workflow step to record the welfare check.
- Under Section 6: Follow up, you can record the date you made contact, tick the 'completed by' box to ensure your details pull through to indicate who completed this follow up, and enter details of the follow up discussion in the 'Details' text box:

Hospital Discharge Form	
Sections	6. Follow up
1. Basic Details	*indicates required field
2. Reablement only	Guidance:
3. Ongoing care only	Once any support has been purchased and the person has been discharged, please ensure you attempt to contact the person the next day to confirm everything is in place
4. Discharge details	and use this section to record the details After the follow us is recorded, please do not keep this workflow step open but progress accordingly using the Actions Taken section and finish using the green tick
5. Manager decision	
6. Follow up	
7. Next actions	Date contact made 🐻 🤛
indicates completed section	Completed by
	Details

**Please note**, this section is mandatory, unless the person has passed away (and you have stated so in Section 4, under 'Discharge details').

# 7. Finishing the Hospital Discharge workflow step

• Once all mandatory sections have been completed, and the correct actions have been selected, you can FINISH this workflow step. To do so, click the green tick icon in the toolbar:



**Please note**, once the person has been discharged and the 24 hour follow up has been completed, this step needs to be finished- it should not be kept open past this period.