

PROGRAM POLICY - CRISIS SERVICES

- 1 Discharge
 - 1.1 Discharge planning begins on the day of admission.
 - 1.2 The ID Team (Clinical Team), including the person served, will participate in the development of the discharge plan.

- 2 Discharge Plan
 - 2.1 Discharge planning will be flexible and change according to the ongoing needs of the person served. The process of planning for discharge will be evaluated at clinical team meetings held on a bi-monthly or monthly basis, at the discretion of the planning team. This process will continue until the person is actually discharged.
 - 2.2 The goal of the plan is to incorporate the needs and supports necessary to return the person to their prior setting or an agreed upon alternative placement, as deemed appropriate by the interdisciplinary team, to avoid a re-admittance to the Crisis Services.
 - 2.3 The discharge plan will include:
 - 2.3.1 The original reason why a person was referred to the Crisis Services.
 - 2.3.2 The interventions/techniques that were successful at the Crisis Services.
 - 2.3.3 Recommendations which may include: future services, follow-up on interventions/techniques utilized, Medical follow-up, issues/concerns to monitor.

POLICY DATE: July 2004
REVISED: January 2008
May 2012
August 2014
September 2016
REVIEWED: October 2017
October 2018
November 2019
November 2020
January 2022
May 2023