

# RAHIM MEDICAL CENTRE AND GENERAL HOSPITAL

## Discharge Planning Policy

Effective Date: \_\_\_\_\_

Review Date: \_\_\_\_\_

### 1. Purpose

The purpose of this policy is to establish a standardized framework for discharge planning at RAHIM MEDICAL CENTRE AND GENERAL HOSPITAL. Effective discharge planning ensures patient safety, continuity of care, reduced readmission rates, and improved patient satisfaction.

### 2. Scope

This policy applies to:

All medical, nursing, and allied health staff involved in patient care and discharge

Administrative personnel responsible for documentation and coordination of discharge

Patients and their families or caregivers involved in discharge planning

### 3. Definitions

Discharge Planning: A patient-centered, coordinated process to prepare patients for a safe transition from hospital to home or another care setting.

Care Transition: The movement of a patient between healthcare practitioners, facilities, or levels of care.

Discharge Summary: A comprehensive document outlining the patient's hospital stay, diagnosis, treatment, medications, and follow-up instructions.

### 4. Policy Statement

RAHIM MEDICAL CENTRE AND GENERAL HOSPITAL is committed to:

Ensuring all patients receive individualized, safe, and comprehensive discharge planning.

Promoting coordination among healthcare providers, patients, and caregivers.

Providing clear written and verbal instructions to patients and families.

Reducing preventable readmissions and complications post-discharge.

### 5. Discharge Planning Process

#### 5.1 Initiation

Discharge planning begins at the time of admission.

Assessment of the patient's medical, social, and psychosocial needs is performed.

Identify potential barriers to safe discharge, including mobility, home support, and financial considerations.

## **5.2 Coordination**

Assign a discharge coordinator or case manager to oversee the process.

Collaborate with the multidisciplinary team, including physicians, nurses, social workers, and therapists.

Coordinate with external healthcare providers, pharmacies, or community services as needed.

## **5.3 Patient and Family Education**

Provide information about diagnosis, treatment, medications, and follow-up care.

Educate patients and caregivers on warning signs, dietary instructions, and activity restrictions.

Confirm understanding through teach-back methods or demonstrations.

## **5.4 Documentation**

Prepare a comprehensive discharge summary, including:

Admission and discharge diagnosis

Procedures and treatments

Medication list and instructions

Follow-up appointments and referrals

Patient instructions and education provided

Ensure documentation is complete, accurate, and accessible to all relevant staff and care providers.

## **5.5 Medication Reconciliation**

Review all medications prescribed during hospitalization.

Compare with prior medications to prevent duplication, omissions, or interactions.

Provide a clear medication plan to the patient and caregivers.

## **5.6 Follow-Up and Post-Discharge Support**

Schedule follow-up appointments as indicated.

Arrange community or home health services if required.

Provide contact information for questions or concerns after discharge.

## **6. Staff Responsibilities**

Physicians: Ensure medical readiness for discharge and complete the discharge summary.

Nurses: Educate patients, perform medication reconciliation, and coordinate care transition.

Social Workers / Case Managers: Identify social or financial barriers and coordinate community support.

Allied Health Staff: Provide therapy instructions and recommendations for home care.

## **7. Quality Assurance**

Monitor discharge planning effectiveness through:

Patient satisfaction surveys

Readmission rates

Compliance audits of discharge documentation

Continuous improvement initiatives will be implemented based on audit outcomes and feedback.

## **8. Confidentiality and Compliance**

Patient information must be protected in accordance with hospital policy and applicable data protection laws.

All staff involved in discharge planning must maintain confidentiality and professional standards.

## **9. Review of Policy**

This policy will be reviewed every two years or whenever best practices, laws, or hospital procedures change.

Updates require approval by the Hospital Management Committee.

## **10. Acknowledgment**

I, \_\_\_\_\_, acknowledge that I have read, understood, and agree to comply with the Discharge Planning Policy of RAHIM MEDICAL CENTRE AND GENERAL HOSPITAL.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_