

WHN Inpatient Continuity of Care Review

Reviewer: _____

Program:	Provider ID#:
County of Program Operation:	Review Date:
Consumer Name (Last):	Consumer Name (First):
Consumer ID#:	Consumer DOB:
OPC at discharge? Y N	Hospital:
Date of Discharge:	Date of Follow-Up OP appointment:
<i>Case Status: (Please check one only)</i> <input type="checkbox"/> Consumer already open to provider <input type="checkbox"/> New referral	Did consumer keep appointment? Y N
Medication Status at Discharge: (One only) <input type="checkbox"/> Consumer given samples <input type="checkbox"/> Consumer given Rx <input type="checkbox"/> N/A <input type="checkbox"/> Unable to determine	Primary Diagnoses: <i>(Use 5 digit DSM-IV-R code, and list in order of significance/priority. List top 3)</i> _____ _____ _____

Service Standard	Yes	No	N/A
1. Medical record contains copy of hospital discharge plan.			
2. Consumer was seen within 5 working days of discharge. (If Yes, skip to Question 5; If No, answer questions 3 and 4)			
3. (Consumer was <u>not</u> seen within 5 working days), but medical record indicates reason consumer not seen.			
4. (Consumer was <u>not</u> seen within 5 working days), but medical record has clear documentation of what efforts were made to engage consumer in OP treatment (i.e., TCs, HVs, or Letter).			
5. The medical record contains documentation of efforts to engage the consumer's family as a natural support.			
6. The medical record contains documentation of a crisis plan.			
7. The medical record contains evidence that the consumer was educated on crisis plan.			
8. The medical record contains evidence that attempts were made to refer this consumer to a more intensive service if needed.			
9. The medical record contains evidence of communication between hospital staff and OP staff regarding discharge planning.			
10. The medical record contains documentation of the assessment of pre-hospitalization danger.			
11. The medical record contains documentation of the assessment of post-hospitalization danger.			
12. (If on OPC) Consumer had appropriate, community-based, face-to-face contact to adequately assess MS, medication compliance, and safety issues.			

