# Treuvés Health Care Corporation Care Disprise Composition

### Trouves Health Care

TITLE: RESIDENT DISCHARGE POLICY 6.02

Authority:

RCW 70.129.110

WAC 388.78A.2120,2350,2640,2710,2720

WAC 388.110.100

#### **PURPOSE:**

This policy outlines the procedures to discharge a resident

#### **SCOPE:**

This policy applies to all Trouves employees and clients.

#### **POLICY:**

We strive to avoid resident discharge through reasonable accommodation. When a change in resident condition precludes the ability of the facility to safely and adequately provide the care and services required by the resident and agreed to in the negotiated service agreement and as described in the facility disclosure statement, a discharge to an alternate location that can meet the increased needs will be planned.

If necessary and allowed by applicable law, the facility will, with proper written notification, ensure an efficient, safe, and organized transfer. This transfer will occur in conjunction with the resident and/or resident representative, family, physician, (if necessary), if there is one, or any other individuals identified by the resident.

#### PROCEDURE:

- 1. We will permit each resident to remain in the facility and will not transfer or discharge the resident from the facility unless:
  - a. Transfer/discharge is necessary for the resident's welfare when the resident's needs cannot be met in the facility.
  - b. The safety of individuals in the facility is in danger.
  - c. The health of individuals in the facility would otherwise be in danger.
  - d. The resident has failed to meet required and agreed upon payment.
  - e. The facility ceases to operate.
- 2. We will attempt through reasonable accommodation to avoid transfer or discharge. If the transfer or discharge is unavoidable then the



## Trouves Health Care

| TITLE: | RESIDENT DISCHARGE      | POLICY 6.02 |
|--------|-------------------------|-------------|
|        | INCOLDER I DISCHI INCOL |             |

administrator or designee will:

- a. Notify the resident and his or her representative and make reasonable efforts to notify, if known, any interested family members of the resident and the reasons for the move in writing and in a language and manner that they can understand.
- b. Record the reasons in the resident's record.
- c. Include in the written notice the following items:
  - i. The reason for transfer/discharge.
  - ii. The effective date of transfer/discharge.
  - iii. The location to which the resident is to be transferred/discharged.
  - iv. The name, address and telephone number of the state long-term care ombudsman
- 3. The notice of transfer or discharge will be made by the facility at least thirty days before the resident is transferred or discharged. Notice may be made as soon as practicable before transfer or discharge when:
  - a. The safety of individuals in the facility would be endangered.
  - b. The health of individuals in the facility would be endangered.
  - c. An immediate transfer or discharge is required by the resident's urgent medical needs.
  - d. A resident has not resided in the facility for thirty days.
- 4. Staff will provide sufficient preparation and orientation to residents to ensure safe and orderly transfer or discharge from the facility.
- 5. Discharge will be recorded in the resident register by the administrator or a designated staff member at the time of discharge.

# **EXCEPTIONS:**

No exceptions to this policy may be granted without the prior written approval of the Director.

# **SUPERCEDES:**

None



# Trouves Health Care

| TITLE: | RESIDENT DISCHARGE | POLICY 6.02 |  |
|--------|--------------------|-------------|--|
| TITLE: | NESIDENT DISCHILL  |             |  |