

# Principles of Effective AOD Discharge Planning

**Vision: Clients have the opportunity to participate in discharge planning (DP) processes that support their recovery**

## Admission and Planning

- DP commences at the beginning of treatment and in conjunction with the development of a client's ITP. Client & families will be encouraged to actively contribute to discharge planning.
- On admission, client consent to share information with other service providers, is collected.
- DP is continually reviewed and updated throughout treatment eg, at weekly clinical review meetings, at the end of a set number of sessions, or when circumstances change.

## Early Discharge and Follow up

- Where clients are lost to follow up, there will be documented evidence of all reasonable and feasible assertive follow up attempts to contact the client.
- Where feasible, ensure continuity of care post discharge occurs through assertive telephone follow up

## Information Management/Sharing

- Discharge summaries are created at the end of all client treatment episodes and recorded in the client's case file.
- Discharge letters are comprehensive and indicate diagnosis, treatment, progress of care.
- With client's consent, comprehensive liaison & handover will occur with all other service providers who will contribute to ongoing care. Relapse patterns & risk assessment/management information including who is holding any identified risks, will be recorded in client's health record.

## On Discharge

- The discharge plan will include a relapse prevention plan & service re-entry plan to the same service.
- A discharge summary that includes additional relevant and useful treatment information, including any identified risks, is provided to service providers.

- If services are likely to be involved in a client's care post discharge, with client consent, they will be notified and involved in discharge planning.

- Discharge letters are sent to service providers, with client consent, within 7 days of discharge.
- A discharge summary that contains information that is relevant and useful to the client is provided to them on leaving the service.

## Change Management and Review

- Provide staff with orientation and training in AOD service discharge planning processes.
- Include DP conversations in forums such as clinical reviews, appraisals and supervision.

- Discharge surveys includes the client's reported experience through routine discharge practice
- Conduct regular audits of client health records to assess client discharge practice and identify where improvements can be made.