

CRITICAL ACCESS HOSPITALS

DISCHARGE PLANNING AND SOCIAL WORK SERVICES					
Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
Is there a director of social services who is responsible for the daily management of the social services program? 19 CSR 30-20.104(1)(A)(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Can you demonstrate that the director of social services is qualified by education, training and experience? 19 CSR 30-20.104(1)(C)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If the social services department is not directed by a qualified social worker, is a qualified social worker employed on a part-time or consultant basis? 19 CSR 30-20.104(2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the part-time or consultant social worker make regular visits to monitor and evaluate the psychosocial and discharge planning needs of the hospital's patients? 19 CSR 30-20.104 (2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the nursing care plan or interdisciplinary plan of care describing patient discharge planning include appropriate physiological and psychosocial factors? C-0298 COP §485.635(d)(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the social work services program include documenting: <ul style="list-style-type: none"> a. a method of screening to determine the psychosocial service and discharge planning needs of the patient? b. a method of providing appropriate social work interventions, including discharge planning and counseling? c. a mechanism for referrals to community agencies when appropriate? d. compliance with adoption placements under section 453.010, RSMo? e. reporting of suspected incidences of child abuse to the division of family services as established under section 210.120, RSMo? 19 CSR 30-20.104(3) 19 CSR 30-20.082(7)(C)(D)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are social worker service personnel knowledgeable of available social services for unmarried mothers and for the placement of children?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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19 CSR 30-20.082(7)(B)					
Does the hospital have policies and procedures in place that govern discharge procedures and instructions? C-0325 COP §485.639(d)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are social work services including discharge planning integrated with other direct patient-care services of the hospital? 19 CSR 30-20.104(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is a social work assessment and plan of action implemented for each patient who has need for social service? 19 CSR 30-20.104(4)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are written policies and procedures related to the quality and scope of social services reviewed and kept current? 19 CSR 30-20.104(5)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
The following questions pertain to the hospital discharge appeal notice required to be provided to all Medicare inpatients.					
Is the hospital discharge appeal notice (Important Message from Medicare) given to the Medicare patient or patient's representative no later than 2 calendar days following admission? 42 CFR 405.1205	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital require the notice to be signed and dated by the patient or patient's representative to indicate that he or she has received the notice and can comprehend its contents? 42 CFR 405.1205	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If the beneficiary refuses to sign the notice, is a note added to the notice to indicate the refusal, and the date of refusal? 42 CFR 405.1205	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is a copy of the signed and dated notice be given to the patient or patient's representative within 2 days of discharge? (Not required if initial notice delivered within 2 days of discharge.) 42 CFR 405.1205	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Do the facility's policies assure that if the beneficiary appeals the notice of discharge, the	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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hospital will provide a detailed notice to the beneficiary no later than noon of the day after the QIO notifies the hospital of the appeal? 42 CFR 405.1206					
Do the facility's policies assure the hospital provides documentation requested by the QIO no later than close of business of the first day after the material is requested? 42 CFR 405.1206	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
If the hospital has a distinct part rehabilitation or psychiatric unit, does the hospital make social services available to: a. identify and help resolve personal and social problems interfering with the treatment or rehabilitation processes? b. enhance the social functioning of patients? c. Help patients understand and effectively use medical and rehabilitation or psychiatric services? d. help families adjust to patient's disability and participate effectively in the treatment program? e. identify and develop resources within the hospital and the community needed by the patients? 19 CSR 30-20.104(6) and (7)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
For hospitals with a distinct part psychiatric unit, is there a director of social services who monitors and evaluates the social services program with a Master's of Social Work or qualified by education and experience in the social service needs of the mentally ill? 19 CSR 30-20.104(7)(A)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Note: If the director does not have a Master's of Social Work, at least one staff member must have this qualification.					
Are social service staff part of the treatment team to ensure a comprehensive treatment program? 19 CSR 30-20.104(7)(B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is essential information on the patient's social situation and history recorded in the patient's chart? 19 CSR 30-20.104(7)(B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Note: For CAHs with swing beds, see A-1538 COP §482.15(g)					

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Does the facility staff provide the following medically-related social services to swing bed patients:					
a. make arrangements for obtaining needed adaptive equipment, clothing, and personal items?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
b. maintain contact with family (with resident's permission) to report on changes in health current goals, discharge planning, and encouragement to participate in care planning?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
c. assist staff to inform residents and those they designate about the resident's health status and health care choices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
d. make referrals and obtaining services from outside entities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
e. assist residents with financial and legal matters?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
f. discharge planning services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
g. provide or arrange needed counseling services?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
h. assist residents to determine how they would like to make decisions about their health care, and whether or not they would like anyone else to be involved in those decisions?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
i. find options that meet the physical and emotional needs of each resident?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
j. meet the needs of residents who are grieving?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
k. assist residents with dental/denture care, podiatric care; eye care; hearing services, and obtaining equipment for mobility or assistive eating devices?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
A-1538 COP §482.15(g)					

Key Resources and Links

- [19 CSR 30-20.082](#)
- [19 CSR 30-20.104](#)
- [COP §485.635](#)
- [COP §485.639](#)
- [42 CFR 405.1205](#)
- [42 CFR 405.1206](#)
- [42 CFR 482.15](#)
- [453.010, RSMo](#)
- [210.120, RSMo](#)