**HAMILTON CENTER, INC.**

**OPERATIONS MANUAL**

Section: **MEDICAL SERVICES** Policy No.: OP.12.01.00.00

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Policy: **COORDINATION OF** Date Originated: 09/96

**CLINICAL CARE** Last R/R Date: 04/17

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PURPOSE

To provide the highest quality health care services to consumers by effectively communicating/coordinating care with co-treating providers.

POLICY

At Hamilton Center, Inc. (HCI) coordination of care is a fundamental principle to an effective system of care for the consumer. Optimal coordination of care is achieved through the exchange of information with other health care providers involved in the individual’s care to ensure:

1. Needs are met through the appropriate services;
2. Services are not duplicated by providers involved in providing care; and
3. Follow-up and continuity of care with other providers to whom the consumer is referred.

In compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), other federal and state laws and third party payer expectations, HCI will exchange information and coordinate care with co-treating providers. HCI also releases information to family members, legal guardians and referral sources as authorized to coordinate care and implement the treatment plan. HCI encourages family members and other consumer support system(s) to be involved in treatment in order to assure success for the person served.

Consumers receiving services from HCI’s inpatient services are referred back to their referring or preferred outpatient provider. Coordination of care occurs prior to the consumers discharge from inpatient services. HCI may arrange for and/or facilitate inpatient services placement with another provider for registered HCI outpatient consumers. In such cases, HCI will coordinate with the inpatient service provider to facilitate the individual’s return to HCI outpatient services.

Additionally, for certain Program/services (should we name the programs?) HCI will maintain protocols for tracking consumers who are admitted to and discharged from non-HCI treatment facilities including, acute care hospitals, other psychiatric hospitals, urgent care settings, residential settings, opioid treatment programs or other specialty substance use disorder treatment facilities,

In the (do we need to say CCBHC and/or Grace Clinic) programs, HCI will maintain protocols to coordinate the transition of consumers from emergency rooms and from the types of facilities listed above and provide transition services to a safe community setting if required, and ensure that the transfer of medical records, prescriptions and related information is obtained. Where appropriate, transition and follow-up activities could include a Safety plan and peer services for those consumers awaiting placement to a program or until their next scheduled HCI appointment.

When HCI consumers in (Grace and or CCBHC?) programs are referred to other medical providers/specialist, care managers will facilitate the consumers ability to attend the appointment, and follow up with the provider and consumer to ensure the appointment occurred. The outcome and information form the appointment will be communicated to the treatment team.

At present HCI screens individuals being considered for admission to a state operated facility and serves as the local gatekeeper for admissions to state operated facilities. The evaluation findings may be shared with the presiding court and state operated facilities considered for placement. State operated facility admissions and discharges are coordinated by the HCI liaison to ensure continuity of care.

When coordination of care with co-providers cannot be arranged because the client refuses to release or exchange pertinent information that could impact the efficacy and safety of treatment, or the client is obtaining treatment from a non-HCI provider, i.e., medication, contrary to the recommendation of his/her physician or advanced practice nurse, HCI may

choose to discontinue services and refer the person to their co-treating provider for continued care.

Add joint commission reference