Discharge Planning from the Psychiatric Inpatient Unit

Last updated March 2024 Introduction: Effective discharge planning is crucial for ensuring the continuity of care for psychiatric patients, minimizing their risk of readmission, and facilitating a successful transition back into the community.

Key Elements of a Successful Discharge Plan

- Make sure there are scheduled follow-up appointments with outpatient mental health services, ideally within 7-10 days of discharge.
- Prescriptions:
 - Complete the medication reconciliation process to ensure the discharge medications match the medications the patient has been taking in the hospital.
 - Provide a 2–4-week supply of medications to make sure the patient won't run out before their follow-up appointment.
 - Stress the importance of medication adherence. Help patients decide on when they'll take the medications (e.g., "every evening after I brush my teeth") to solidify a routine.
 - Offer nicotine replacement therapy (NRT, e.g. nicotine gum, lozenges, or patches) to patients who smoke. Many hospitals require that patients with a history of nicotine use be discharged with a month supply of NRT and referrals to nicotine cessation programs.
 - Prescribe naloxone nasal spray (Narcan) to patients at risk of opioid overdose (e.g., patients with a history of opioid use or opioid overdose). Many states have established guidelines or even mandates for this practice.
- Collaborate with social workers to connect patients with:
 - Outpatient individual, group and / or family counseling.
 - Support organizations, such as NAMI (National Alliance on Mental Illness), which also offers support groups for family members.
 - Referrals to substance use recovery programs like outpatient drug rehabilitation programs, Alcoholics Anonymous (AA), and Narcotics Anonymous (NA), for patients with dual diagnoses.
 - Housing assistance if needed, like referrals to transitional residential facilities, HUD-VASH programs for veterans, or local homeless shelters.
 - Community and Social Services:
 - Transportation assistance for accessing healthcare and other services
 - Health and wellness programs
 - Employment or vocational training
 - Assistance with applications for Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) through referrals to a Social Security Office.
- Provide education about the patient's condition, warning signs of relapse, and when to seek immediate help.
 Send patients home with written informational materials; hospital EHRs typically have material you can print, or you can download material from websites like NAMI.org.
- Develop a plan for what the patient should do in case of a crisis, including emergency contact numbers, like for local psychiatric mobile response teams and suicide prevention hotlines.
- Assist patients in obtaining primary care follow-up, considering the high prevalence of co-occurring physical health issues in psychiatric patients.
- Involve the patient and, when appropriate, their family or caregivers in the discharge planning process to ensure that it meets their needs and preferences.

Interview Questions to Aid Discharge Planning

- "What concerns do you have about returning home?"
- "Do you have a support system in place? Can we discuss who is in your support network?"
- "How do you feel about your current medication regimen? Do you feel confident managing your medications?"
- "What coping strategies have you found most helpful?"

"Are there any barriers you anticipate in following your treatment plan outside the hospital?"

