

# PATIENT RESTRICTED

Coalinga State Hospital

OPERATING MANUAL

SECTION - MEDICAL/NURSING SERVICES  
ADMINISTRATIVE DIRECTIVE NO. 522  
(Replaces A.D. No. 522 dated 10/5/06)

Effective Date: July 12, 2007

## SUBJECT: INDIVIDUAL RELEASE

### I. PURPOSE

To ensure all Individual releases and escorted day-trips shall follow the established policy and procedures as set forth below and in the referenced Administrative Directives.

### II. AUTHORITY

California Welfare & Institutions Code (WIC), Sections 6604, 7351, and 7355; and California Penal Code (PC), Sections 1604 and 2685.

### III. POLICY

No Individual shall be released from Coalinga State Hospital (CSH) unless all Discharge Summaries/Recommended Continuing Care Plans (DS/RCCPs) have been completed as specified by the Documentation System. This includes completion of the Medical, Psychiatric, Social Work Services, and Nursing DS/RCCPs. The Executive Director must approve any exceptions.

### IV. METHOD

Types of Releases:

- A. Discharges include all releases in which the hospital no longer maintains the person on its active Individual roster. This category includes:
  - 1. Discharges to the community with continuing supervision. Included in this group, for example, are WIC 6604 (Individuals placed on outpatient status with CONREP); PC 2684 or WIC 6600 (Individuals released to parole supervision); and all Individuals discharged on conservatorship.
  - 2. Discharges to the community with no continuing supervision. Included in this group, for example, are:
    - a. Releases of PC 2684 – Individuals who have reached their maximum release date.
    - b. Releases of WIC 6600 – Individuals who have been released by the courts or reached their Determinate-Sentence-Law release date.

# PATIENT RESTRICTED

3. Return to prison of Individuals committed under PC 2684 or WIC 6600 et. seq. This category includes Individuals who have reached maximum hospital benefit.
4. Transfers to prison or jail under other legal authority, pursuant for example to WIC 7301, PC 4011.6, or as results of an additional criminal or civil hold.

## B. Transfers to other State Hospitals:

Included in this category are Individuals whose psychiatric care will be provided by other state hospitals.

## C. Definite Leaves include all releases in which the hospital continues to maintain the Individual on its active Individual roster. Leaves included in this group are:

1. Definite Leaves to Court includes cases in which Individuals leave the hospital under supervision of an agent of the courts. The Individual is no longer in our direct care/custody and include:
  - a. Returns to court for extension, writ, or other court hearings.
  - b. Temporary transfers of PC 2684 Individuals to the California Department of Corrections and Rehabilitation (CDCR) for "lifer" or other Board-of-Prison-Term hearings.
2. Definite Leaves for medical treatment include transfers to community hospitals, correctional facility hospitals, or to other state hospitals for medical treatment. These leaves must extend past midnight.
3. Definite Leaves to other includes, for example, temporary transfers to Other State Hospitals (OSH) to enable Individuals to attend local court hearings.

Note: Escorted trips to Fresno and Kings County Courts are not considered as Definite Leaves; they are day trips.

## D. Day Trips:

1. Before the Individual leaves for a day trip, the unit staff will complete a Release Form. All day trips require order or approval of the Medical Director/designee.
2. Any special instructions to the transporting officer will be noted on this form, i.e., alerts, physical limitations (handicaps), and required medication. The Pharmacy will provide all essential medication(s) when necessary. (Note: Prescriptions are labeled according to Pharmacy law.) Unit staff shall ensure that the Pharmacy-provided medications are given to the transporting officer or, when appropriate, to the Individual.

# PATIENT RESTRICTED

3. If the physician determines an inhaler or nitroglycerin will be necessary during a day trip, a Physician's Order will be written and the appropriate section of the release form will be completed.

## V. INSTRUCTIONS FOR PROCESSING THE DISCHARGE SUMMARIES/ RECOMMENDED CONTINUING CARE PLANS (DS/RCCP)

- A. Dispositional recommendations will be discussed at the Individual's Wellness and Recovery Planning Conference.
- B. On court leaves, the Health Information Management Department's (HIMD) Legal Section will notify the Program office, Housing Unit, Trust Office, Pharmacy, Department of Police Services (DPS), and the physician, as soon as an Individual's release date and time can be determined. It is the Program office's responsibility to notify the unit staff, physician, and social worker of the impending release. HIMD will also notify Nutrition Services when a transfer, discharge, or court leave occurs.
- C. The four separate DS/RCCPs are Medical, Psychiatric, Nursing, and Social Work Services. DS/RCCPs are completed by the appropriate discipline members. As each portion of the DS/RCCP is completed, it is placed in the front of the most current medical record for use by the Admissions Suite staff prior to discharge. All elements must be assembled into one packet prior to the Individual leaving hospital grounds. The hospital's time lines and special instructions for each DS/RCCP are as follows:
  1. Medical and Psychiatric DS/RCCP:
    - a. A medical and a psychiatric narrative are required on each Individual.
    - b. The Medical and Psychiatric DS/RCCPs must be completed prior to the Individual's release; it must be available to accompany the Individual at discharge.
      - i. The Medical Consultant will record the DS/RCCP and dictate a medical narrative. The Psychiatrist will dictate the psychiatric narrative. Upon completion the transcription tape will be delivered to HIMD transcription or call to request the tape be picked up.
      - ii. With the approval of the Medical Director, in the rare event that no advance notice is given, vital clinical information shall be faxed or phoned by medical staff to the physician in charge of the facility to which the Individual is being transported. The completed RCCP will be faxed to the facility by HIMD within 72 hours.

# PATIENT RESTRICTED

- iii. The physician also has the option to handwrite the medical or psychiatric DS/RCCP using the appropriate form (MH 5741A). If the physician uses this option, they must file the completed DS/RCCP in the front of the most current medical record and notify HIMD transcription section this has occurred.
- iv. When dictated, the HIMD transcription Section will forward the completed Medical or Psychiatric DS/RCCP to the clinician to obtain the signature.
- v. At the time of release, the Admission Suite staff will send copies of the Medical DS/RCCP, when permitted by departmental policy or state statute, with all Individuals in the following categories: returns to prison, transfers to OSHs, transfers to jail/prison, and Definite Leaves. A transport envelope is to be used for this purpose. Copies of the Medical DS/RCCP are not generally sent with Individuals who are direct discharges to the community (with or without continuing supervision).

## 2. Social Work Service DS/RCCP:

- a. The Social Work Service DS/RCCP must be completed by the Clinical Social Worker (CSW) at least 4 working days prior to the release date or immediately upon notification of release.
- b. The CSW shall obtain authorization for release of information from a discharging Individual, when necessary, to authorize a discharge referral to the appropriate mental health agency. The CSW will indicate on the Social Work Service DS/RCCP whether or not authorization is obtained, or if the Individual is being released under PC Section 1604 (outpatient status for 6604 Individuals).
- c. The CSW shall initiate the leave and discharge funding when appropriate by including the necessary information on the Social Work Service DS/RCCP.
- d. The CSW shall indicate on the Social Work Service DS/RCCP the following:
  - i. The date and time of release.
  - ii. Transportation arrangements.
  - iii. A complete "Will Live At" or referral address will be included on all PC 290 registrants.

# PATIENT RESTRICTED

- e. On discharges, transfers and temporary leaves to the community, the completed Social Work Service DS/RCCP is placed in the front of the most current medical record.
3. Nursing DS/RCCP:
- a. The Nursing DS/RCCP must be completed at least 3 hours but not more than 72 hours prior to an Individual's release from the hospital. This will allow time for all notifications and preparations by Pharmacy, Nutrition Services, HIMD, and Admission Suite staff. Nursing staff shall enter an Interdisciplinary Note (IDN) in the Individual's chart that the Nursing DS/RCCP has been completed.
  - b. All medications and treatments currently ordered shall be listed on the Nursing DS/RCCP. Any changes in medications for discharge purposes must be noted both on the Nursing DS/RCCP and in the Individual's chart. If the Individual requires medication in route, this information should be included on the Nursing DS/RCCP.
  - c. The four copies of the completed Nursing DS/RCCP and the Individual's complete clinical record must be taken to Pharmacy for review by Pharmacy staff and for dispensing of medications.
  - d. Upon receipt of the completed Nursing DS/RCCP, Pharmacy will:
    - i. Check all four copies of the Nursing DS/RCCP against the Physician's current orders and note on the Nursing DS/RCCP (above the list of medications) that Pharmacy review has been completed. Pharmacy shall indicate if medications are or are not ordered by Physician, be furnished for the Individual, specifying the quantity of medications to be sent with the Individual and the duration of the prescription.
    - ii. Provide all essential medication(s) when necessary (Note: prescriptions are labeled according to Pharmacy law). The Pharmacist will indicate the quantity of medications to be sent with the Individual.
    - iii. Keep one copy of the Nursing DS/RCCP for their records and return the other three to the Unit staff for proper routing (see section D. below).
  - e. The Unit staff, after Pharmacy review, will place original and two copies of the Nursing DS/RCCP in the front of the most current medical record.

# PATIENT RESTRICTED

## D. Nutrition Services:

Upon notification of an Individual's pending discharge, Nutrition Services will:

1. Ensure Individuals discharging to the community, with selective medications, receive drug-food interaction education with appropriate documentation within 60 days prior to release.
2. Ensure Individuals with a modified diet, discharging or transferring to other state hospitals, receive nutrition education within 60 days prior to release and charted in the IDNs.

## E. DPS:

Upon notification of an Individual's pending discharge, DPS will:

1. Ensure that the Individual, if being discharged to the community, has been informed of his obligation to register with his local law enforcement agency as a convicted sex offender under PC 290 within five working days of arrival in that community for the purpose of residence, if applicable.
2. Notify CDCR/Custody of the need to transport the Individual to his destination (e.g., county jail, the bus station, train depot, or airport).

## F. HIMD:

1. The HIMD Legal Section will distribute photocopies of the DS/RCCP to the Courts, District Attorney, Defense Attorney, Program Director, Conditional Release Program, CDCR, Parole, or other community agencies as indicated by statute or department policy.
2. When the hospital is notified that the DS/RCCP is needed by a state hospital, jail, prison, parole clinic, or other community agency providing care or treatment to a released CSH Individual, HIMD will process the request and forward a copy by the most expeditious method available.

## VI. INSTRUCTIONS FOR PROCESSING THE TRANSFER OF AN INDIVIDUAL TO A LOCAL HOSPITAL OR OTHER LOCAL MEDICAL FACILITY FOR MEDICAL CARE

- A. When Individuals are taken off grounds for scheduled medical appointments, the Individual is not discharged from the hospital, & the DS/RCCPs are not required.
- B. The nursing staff is responsible for sending relevant/necessary paperwork with the Individual such as consultation form, labs, H&P etc., (Paperwork is to be given to the escorting Correctional Officer in a sealed envelope).
- C. When an Individual is transferred to another facility for emergency medical care and is admitted to a local or other community hospital, the Individual is not discharged from CSH and the DS/RCCPs are not required.

# PATIENT RESTRICTED

1. At the time of transfer, the nursing staff is responsible for completing the "Transfer Information" form.
2. The CSH clinical record will be maintained as needed, documenting the course of the Individual's stay in the outside medical facility.

## VII. INSTRUCTIONS FOR FINAL PROCESSING OF INDIVIDUALS LEAVING THE HOSPITAL

- A. The Individual's clinical record shall be available to the HIMD File Room for processing according to the following time lines:
  1. For transfers to OSHs, the Clinical Record must be available to HIMD no less than 24 hours prior to the Individual's transfer.
  2. For all other types of discharges/leaves, the clinical record must be transported to the HIMD File Room within three (3) days following the Individual's release.
- B. The Unit Staff is responsible for completing an inventory of Individual's clothing and personal effects. If clothing is inadequate, the unit staff shall coordinate proper discharge attire through Hospital Police Services. The Individual may not be escorted to any other part of the hospital after he is dressed in civilian clothing.
- C. The Trust Office is responsible to see that the Individual's funds and personal valuables are available at least one hour prior to release for pick up by Hospital Police Services. If the Individual will be leaving on a weekend or a legal holiday, the Trust Office is to have these items ready for pickup on the last working day prior to the Individual's release.
- D. HIMD will notify Hospital Police Services of all discharges. Hospital Police Services' staff will transport property to the Police Services holding area by 1500 hours, the day prior to discharge.
- E. Admission Suite staff is responsible for the following:
  1. Ensure Individual's funds and valuables have been picked up by Hospital Police Services from the Trust Office.
  2. Inform staff from the Escorting Unit if property is in the suite Property Room. Assure that the Escorting Unit staff and discharging Individual sign the property slip. Assure that the transporting agency signs for receiving the Individual's property.
  3. Ensuring that the Pharmacy-provided medications are available to the escorting staff to give to the transporting personnel or, when appropriate, to the Individual.

# PATIENT RESTRICTED

4. Placing all necessary documents, medications, and discharge documents (Medical, Social Service, and Nursing DS/RCCP) in a transport envelope for later delivery as follows:
    - a. When Individuals are being picked up by an officer of another agency, give such officer the prepared transport envelope with all the contents.
    - b. For Individuals being discharged directly, give such Individual the prepared transport envelope minus the Medical DS/RCCP unless the treating physician indicates that the Individual is to have a copy.
  5. Logging in all items given to the transporting officer/Individual and the name of the transporting officer/agency in the Admission Suite logbook.
  6. If the hospital receives an emergency after-hours court order to release an Individual without the DS/RCCPs on file, the Executive Officer of the Day (EOD) should be contacted for administrative approval and the Medical Officer of the Day (MOD) for medical approval, prior to release of the Individual.
- F. Individuals being paroled or discharged directly and who have no arrangements for transportation by others will be transported to the appropriate bus station by CDCR staff.

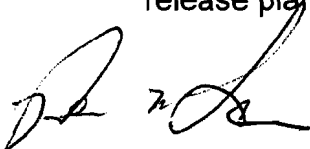
## VIII. INSTRUCTIONS FOR FINAL PROCESSING OF SEX OFFENDER COMMITMENT PROGRAM (SOCP) INDIVIDUALS LEAVING THE HOSPITAL WITH LITTLE ADVANCE NOTICE

- A. Any employee receiving a court order for the immediate release of a WIC 6600 series Individual will refer the court order to HIMD-Legal, who will confirm that the District Attorney does not intend to request a stay order and that no other holds (INS, criminal holds from other counties and states, current cases with the DPS), are outstanding.
- B. HIMD-Legal will request authorization for release from the Chief of the Sex Offender Commitment Program at DMH Headquarters. The Chief, SOCP, will fax the authorization to HIMD-Legal, who will notify the Clinical Administrator. HIMD-Legal will then notify Individual Admission and Discharge, who will in turn notify Program, Housing Unit, Pharmacy, Trust, DPS, the assigned psychiatrist and their social worker.
- C. In developing the discharge plan, the goal is to return the Individual to the county of commitment. The assigned social worker will confirm the Individual's proposed living arrangements, determine the need for funds, and together with team and program consultation, determine the means of transportation. In determining the means of transportation, the team will consider the risk the Individual poses to staff and to the public.



# PATIENT RESTRICTED

- D. Transportation may be by bus, by CDCR/Custody Staff, or by private car.
1. When transportation is needed, CDCR staff will transport the Individual to his destination (e.g., the bus station, train depot, or airport).
  2. If bus transportation is used, CDCR staff will: Escort the Individual to the bus station, confirm that he has boarded the bus, and witness the departure of the bus.
  3. Family, friends, or other outside support group may provide transportation to the destination, provided they understand and agree to follow the hospital's policy on returning the Individual to the county of commitment.
- E. The social worker shall call the Trust Office to verify the Individual has no funds available for discharge. A request shall then be made and also noted on the Discharge Summary, to issue funds not exceeding fifty dollars (\$50.00) as stipulated in WIC 7355.
- F. DPS will ensure that all elements of PC 290 registration are completed.
- G. Program will forward the completed discharge plan to the Executive Director (via the Clinical Administrator) for final approval, before the Individual is discharged.
- H. DPS will notify the following of the Individual's release:
1. Fresno County Law Enforcement Agencies.
  2. Law enforcement in the county of destination.
  3. Law enforcement in the county of commitment, if different from the county of destination.
  4. Department of Justice, convicted sex offenders registration file.
- I. The Executive Director, or designee, must review and approve all elements of the release plan prior to implementation.



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BEN MCLAIN  
Executive Director (Acting)

Cross Reference(s):

A.D. No. 346 Medical Care of Coalinga State Hospital Individuals in Community Facilities  
A.D. No. 850 Interhospital Individual Transfers