Coordinated Bed Access Patient Transitions Decisions Processes

	Definition	Receiving Site	CBA	Sending Site

BYPASS	• Patient matched to a bed
	• Meets eligibility of the level of care
	• Receiving site not able to meet the patient need immediately due to:
	  o Physical environment need
	  o Patient clinical need
	• There will be a delay in the patient being able to start the program at the site to which the patient is matched.
		1. Front line staff to initiate conversation with contact person at the sending site (name indicated on the application) to clarify needs and attempt to resolve concern(s).
		2. Send WW549 to inform CBA of reason for bypass and estimated date of admission, if applicable, once site to site front line staff conversation has occurred and the need to bypass is confirmed.
		3. If font line conversation does not resolve concern(s), or identified need for support/facilitation by CBA, the manager of either the sending or receiving site to notify CBA manager by phone or email. This would prompt a teleconference.
			1. Upon receipt of WW549, immediately un-match patient from bed.
			2. Share WW549 with CBA manager.
			3. Match patient to next receiving site if in an idle bed situation or hold patient on wait list.
			4. CBA Manager to facilitate all site teleconference if needed/requested. The purpose of the call is to vet the scenario and determine patient plan or recommended program change.
			5. Track WW549 and outcome of teleconference, if occurred.
			6. Share summary data with PTSC.
				1. Participate in site to site conversation regarding patient and engage in problem solving of identified concerns.
				2. If font line conversation does not resolve concern(s), or there is identified need for support/facilitation by CBA, the manager of either the sending or receiving site to notify CBA manager by phone or email. This would prompt a teleconference.
				3. Communicate with patient/SDM.

REFUSAL	• Patient matched to a bed
	• Receiving site determines the patient is not appropriate for the level of care based on:
	  o Eligibility criteria of the program
	  o Service matrix
	  o Identified discharge destination or planning barriers
		1. Front line staff to initiate conversation with contact person at the sending site (name indicated on the application) to clarify needs and attempt to resolve concern(s).
		2. Send WW549 to inform CBA of reason for refusal, once site to site front line staff conversation has occurred and the need to refuse is confirmed.
		3. If font line conversation does not resolve concern(s), or identified need for support/facilitation by CBA, the manager of either the sending or receiving site to notify CBA manager by phone or email. This would prompt a teleconference.
			1. Upon receipt of WW549, immediately un-match patient from bed.
			2. Share WW549 with CBA manager.
			3. CBA Manager to facilitate all site teleconference if needed/requested. The purpose of the call is to vet the scenario and determine patient plan or recommended program change.
			4. If recommendation of the all site teleconference is another level of care, patient application to be sent to all sites of identified level of care. Sites will review application and provide response as to patient eligibility to CBA within 24 business hours. CBA to send response to participants of the all site teleconference.
			5. Patient to retain original wait list date for another level of care.
			6. Track WW549 and outcome of teleconference, if occurred.
			7. Share summary data with PTSC.
				1. Participate in site to site conversation regarding patient and engage in problem solving of identified concerns.
				2. If font line conversation does not resolve concern(s), or there is identified need for support/facilitation by CBA, the manager of either the sending or receiving site to notify CBA manager by phone or email. This would prompt a teleconference.
				3. Communicate with patient/SDM.

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	Definition	Receiving Site	CBA	Sending Site

EXCEPTION	• Patient is not matched to a bed
	• Patient applies for admission to specific site(s) for:
	  ○ Clinical reasons as identified by the service matrix. That is, where matrix identifies that intervention is provided by specific site(s) only
	  ○ Compassionate reasons
		• Not directly involved in the exception process.
		• Should a receiving site identify a patient situation where an exception should have been considered, the bypass process will be applied.
			1. Place patient on wait list for site(s) as confirmed by Letter of Understanding and WW549.
			2. Confirm Sending Site Manager approval of exception for compassionate reasons.
			3. Share WW549 with CBA manager.
			4. CBA Manager to contact Sending Site Manager only if exception for compassionate reasons does not fit CBA Guiding Principles. All site teleconference may be called to vet the scenario and determine patient plan if required.
			5. Track WW549 and outcome of teleconference, if occurred.
			6. Share summary data with PTSC.
				1. Clinical team identifies rationale for exception.
				2. For an exception based on compassionate reasons, Sending Site Manager approval is required.
				3. Inform patient/SDM. Patient/SDM to sign Letter of Understanding reflecting exception.
				4. Send Letter of Understanding and WW549 with application to CBA if exception for compassionate reasons. WW549 is not required if exception based on matrix.

TRANSFER FEEDBACK	• Patient meets eligibility of the level of care • Patient admitted to receiving site and arrives not as advertised.	1. Assume patient care and determine next best level of care. Repatriation may be considered if patient is medically unstable requiring acute care. 2. Front line staff to initiate conversation with contact person at the sending site (name indicated on the application) to clarify needs and attempt to resolve concern(s). 3. Unit Manager to Unit Manager Conversation may be needed if concern(s) not resolved at front line. 4. Send WW549 to CBA. 5. Communicate with patient/SDM and engage in alternate planning, as appropriate.	1. Receive WW549. 2. Share WW549 with CBA Manager. 3. CBA Manager to share WW549 with Manager of Discharge Planning at sending site. 4. Track WW549. 5. Share summary data with PTSC.	1. Manager of Discharge Planning to share specific patient feedback with Unit Manager and front line staff for discussion and future learning. 2. Share data received at PTSC with front line staff.