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| REFERRALS TO OUTSIDE AGENCIES | | | | NO. 257 | |
| If a patient needs services that are not available through Winning Wheels (such as serious mental health issues, chemical use/abuse/dependency, provision of durable medical equipment, extensive environmental modifications, specialty services), the Social Services Department will utilize procedures for recommendations to services outside of the facility that will meet the need for such services. Medical procedures (i.e. blood flow testing, oxygen, pulmonary function test, urodynamic testing, video fluoroscopic studies) outside facility scope of practice are referred to proper provider. Outside services will be obtained and scheduled with the resident's and/or guardian's informed consent and allow for informed refusal so that they are coordinated with the services provided by Winning Wheels. Such outside services will be incorporated as an integral part of the individual's plan of care and the risks and possible adverse consequences of decisions will be relayed, following a determination that the person served is able to make competent decisions, (based on the results of standardized assessments, guardianship status, etc.). The Social Services Department will summarize the current treatment that the resident is receiving as appropriate by putting together a packet of information copied from the individual's chart pm. The resident/guardian would be asked to sign a release of information form prior to releasing the information to the referral source. Social Service staff will also work with other departments as needed to ensure that the reason for referral has been documented in the resident's medical record as well as a report of the outcome. Information provided to other agencies will be limited to what is necessary for the individual or agency requesting the information. With the patient/guardian's permission, the Winning Wheels staff will go to any staffings concerning the patient at outside agencies as well in order to best meet the needs and plan of care for the patient. | | | | | |
| Approved: | Effective Date:  3/86 | Revision Date:  6/02; 7/05 | Change No.: | | Page:  1 of 1 |