

COMMUNITY VISITING NURSE ASSOCIATION & AFFILIATES		CONTINUUM OF CARE	
TITLE: ACCEPTANCE INTO SERVICE		EFFECTIVE: 3/25	
		REVIEWED: 3/25	
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PURPOSE

For providers to make publicly available information regarding services offered and any limitations related to types of services, service duration, or service frequency.

To ensure patients' home care needs are assessed and adequately met.

POLICY

Patients are accepted for treatment on the basis of a reasonable expectation that the patient's nursing, rehabilitative, personal care and/or social needs can be met adequately in the patient's place of residence.

PROCEDURE:

1. The intake staff will ensure only patients appropriate for care at the time of the referral are accepted onto service.
2. The intake staff will evaluate each patient referral against the following criteria:
 - A. Anticipated needs of the Patient
 - B. The case load of the perspective clinician(s) at the time of the referral
 - C. The agency's case mix of the patients at the time at the time of the referral
 - D. The number, if any, complex patients on service
 - E. Specialized treatments that might be required
 - F. The skills of the staff related to the patient's needs
 - G. Availability of appropriate staff
3. Intake staff will review referral for:
 - A. Diagnosis
 - B. Any prescribed visit frequency
 - C. Disciplines requested
 - D. Caregiver support
 - E. Recent hospitalizations
 - F. New condition versus exacerbation of existing condition
4. Next steps:
 - A. Intake and Clinical departments will review staffing levels
 - B. Disciplines available
 - C. Case Loads
 - D. Ability to complete SOC within 48 hours of completed referral

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5. Criteria for staff assignments:

A. Clinical Department will review staffing competencies, including skills, education level and certifications based on patient need prior to assignment.

6. Admission/SOC visit

- A. Practitioner will be notified of visit via phone and computerized schedule
- B. Clinical Manager will discuss any relevant challenges or special needs
- C. Practitioner opens case and develops appropriate Plan Of Care
- D. Coordinates care via Clinical Manager, other disciplines as per policy.