Patient Education

Social Work

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help at any time –

For Social Work, contact the Social Work office at 206-598-4370 Monday-Friday, 8 a.m.-5 p.m., or ask your health care provider for a referral to Social Work.



Answers to common questions

Every patient at University of Washington Medical Center (UWMC) will have a discharge plan. If your stay is scheduled ahead of time, the planning may start before you arrive. If your hospital stay is not planned ahead, the planning for your discharge will start soon after you arrive. This brochure explains your role in the process, and answers common questions about discharge planning.



Social Work

Box 356125 1959 N.E. Pacific St. Seattle, WA 98195 206-598-4370



Social Work Your Discharge Plan

How does discharge planning work at UWMC?

You and your family are our partners in planning a safe, smooth, and prompt discharge. We start early to allow you and your family time to gather information and resources, and to review options.

Who can help with discharge planning?

The doctor, nurse, social worker, rehabilitation therapist, dietitian, and pharmacist all have roles in discharge planning. The social worker helps to find a skilled nursing facility, a home care or home health agency, and other resources in the community. The social worker also provides support to you and your family as needed.

How can I help with my discharge plan?

To help with your discharge plan:

- Ask your doctor about your expected length of stay, and what assistance she or he recommends.
- Tell your nurse where you plan to fill your prescriptions. Will you use the UWMC pharmacy or one in your community?

Notes

Social Work Your Discharge Plan

Here are some phone numbers that may help you while you are here:

Social Work: **598-4370** (Monday-Friday, 8:00 a.m.-5:00 p.m., or ask your doctor or nurse for a referral.)

Financial Counseling (for help with questions about payment for your hospital stay): **598-4320** (Monday-Friday)

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- Talk with your family and support system about how they are able to help at home upon discharge. Tell your nurse if you do not have someone who can help you at home.
- Talk with your nurse about getting home.
 If there are restrictions on how you may travel, the nurse can help you make plans.
- In general, discharge is at 11:00 a.m.
 Please confirm your discharge time with your nurse or doctor and arrange your ride in advance.

What do I need for my hospital stay that will help with planning for discharge?

- Health insurance card.
- Pharmacy or drug benefit card (this is part of many insurance cards).
- Legal papers about your health care, such as a Health Care Directive (Living Will) and Power of Attorney, if you have them.
- Phone numbers of family or friends you may want contacted during your stay.
- Glasses, hearing aids, dentures, or any other health aids that you may use.
- It is best to leave valuables at home, but please plan on how you will pay for prescriptions and/or a ride home.

Social Work Your Discharge Plan

How is a skilled nursing facility (SNF) arranged?

If you and your doctor determine that you need the specialized services of a skilled nursing facility, the social worker will meet with you and your family to provide a list of facilities and ask you to decide on your top three or four choices.

We make every effort to arrange care in one of your preferred choices.

Due to the demand for hospital services, we cannot keep you here once you no longer need to be in the hospital.

What if I need rehabilitation services at discharge?

Rehabilitation can occur in an inpatient setting, a skilled nursing facility, or in the home, depending on need. Inpatient rehab admission is based on:

- Your diagnosis and condition.
- Your expected progress.
- Your insurance coverage.
- Bed availability.

Your doctor will order a rehab evaluation for in-hospital rehabilitation if needed.

What if I need help at home?

Home health means the skilled services of a nurse or physical, occupational, or speech therapist. It requires that you be homebound and it requires a doctor's order. Home health is often covered by insurance, and will be arranged by your social worker.

Home care programs generally do not offer "skilled" services and are not covered by insurance. These programs may include help with:

- Transportation.
- Bathing.
- Dressing.
- Feeding.
- Housework.
- Cooking.

The social worker can provide you with a list of agencies so you and your family can arrange for this help if you need it.

We're Here to Help

Each patient has a care plan for his or her stay. Ask your nurse to review it with you so that you will know the goals for your stay.

Your nurse, social worker, doctor or financial worker can answer any questions that you or your family may have. Or, they can help direct you to the person who will know the answer.