

Topic: Transitional Care

Care Coordination

Problem:

Hospital/Facility Name	
Admission Date	
Pending Discharge	
Discharge Date	
Social Worker/Provider Name	
Telephone #	
Encounter Date	
Follow-Up Needed	

<input type="checkbox"/>	To Conduct Case Conference with Social Worker/Attending Provider in Next _____ Days to Discuss Clinical Event Details, Outcomes and Needs.				
	Tasks	Responsibility			Target Date
	Review Hospital Alert/Clinical Event Notification for Admission/Event Details.	o Client	o Care Manager	Other:	
	Research Provider Contact Information from Admission/Event Details.	o Client	o Care Manager	Other:	
	Contact Attending SW/Provider to Discuss and Verify Clinical Event Details.	o Client	o Care Manager	Other:	
	Conduct Case Conference with SW/Provider to Discuss Aftercare Planning.	o Client	o Care Manager	Other:	
	Schedule Field Visit with SW/Provider and/or Client.	o Client	o Care Manager	Other:	
	Other:	o Client	o Care Manager	Other:	
<input type="checkbox"/>	To Link to _____ in Next _____ Days.				
	Tasks	Responsibility			Target Date
	Other:	o Client	o Care Manager	Other:	
	Other:	o Client	o Care Manager	Other:	
	Other:	o Client	o Care Manager	Other:	
<input type="checkbox"/>	To Schedule _____ in Next _____ Days.				
	Tasks	Responsibility			Target Date
	Other:	o Client	o Care Manager	Other:	
	Other:	o Client	o Care Manager	Other:	
	Other:	o Client	o Care Manager	Other:	
<input type="checkbox"/>	To _____ in Next _____ Days.				
	Tasks	Responsibility			Target Date
	Other:	o Client	o Care Manager	Other:	
	Other:	o Client	o Care Manager	Other:	

