

NON-HOSPITAL MEDICAL AND SURGICAL FACILITIES ACCREDITATION PROGRAM

### **Accreditation Standards**

Discharge



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#### DISC1.0 DISCHARGE

DISC1.1	All	All patients are appropriately prepared for discharge from PACU and/or overnight stay.	
DISC1.1.1	M	An order for discharge is written by the most responsible physician.  Guidance: In accordance with the National Association of PeriAnesthesia Nurses of Canada, a written directive by a physician is required for patient discharge. Therefore, the most responsible physician (e.g. anesthesiologist, surgeon) is responsible for writing a discharge order. The decision to discharge, using an objective discharge scoring system, may be delegated to the RN.	
DISC1.1.2	M	Other patient specific discharge criteria are met prior to discharge.  Guidance: Examples of other discharge criteria include obstructive sleep apnea, voiding. Patients who possess one or more at-risk-criteria must void post-operatively prior to discharge. Patients who do not possess any of the at-risk criteria are not required to void prior to discharge. At-risk criteria includes history of urinary retention, following a gynecological, spinal, rectal or urological procedure, post-spinal/epidural anesthesia, older male patients.	
DISC1.1.3	M	Discharge instructions are reviewed with the patient.  Guidance: Discharge teaching/instructions include but are not limited to: general instructions (e.g. pain, fever, driving restrictions), patient specific instructions (e.g. type of surgery, anesthesia, drain/catheter care, awareness of potential complications (e.g. bleeding, fever, urinary retention) and steps to take), management of post-operative pain, nausea and vomiting, medication instructions (e.g. resuming medications), follow-up care (e.g. appointments, telephone calls), accessing emergency care (e.g. name and telephone number of surgeon and/or designate, non-hospital facility, hospital, other), notifying the facility of any reportable incidents as per the College Bylaws.	
DISC1.1.4	М	Written discharge instructions are provided to the patient.	

DISC1.1.5	M Patients are accompanied from the facility by a responsible adult and if not accompanied by a responsible adult are assessed for discharge suitability by the most responsible physician (e.g. anesthesiologist, surgeon).  Guidance: It is recommended that patients be accompanied from the facility by a responsible adult. However, there may be circumstances when this is not always possible. In circumstances where patients are unable or unwilling to arrange accompaniment from the facility by a responsible adult, additional measures are taken. These additional measures include but are not limited to an assessment by the most responsible physician (e.g. anesthesiologist, surgeon) to determine whether the patient's cognitive and physical parameters exceed minimum discharge requirements and that the patient can function independently and whether the transportation method chosen by the patient is acceptable. The decision to discharge the patient without a responsible adult may not be delegated to the RN.	
DISC1.2	Policies and procedures contain all the information necessary for the safety of patients, staff and visitors.  Intent: Policies and procedures ensure that activities/procedures are performed consistently and accurately by all personnel within the non-hospital facility.	
DISC1.2.1	M There is policy and procedures for patient discharge home.  Guidance: Discharge policy and procedures outline discharge criteria, post-operative instructions and accompaniment from the facility.	



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