# COVID ACS & SWING BED DOCUMENTATION FLOW

**PATIENT DISCHARGED FROM IP STATUS/LOCATION TO ALTERNATE CARE SITE (ACS) or SWING BED STATUS UNDER WAIVER**

**BH COVID-19 WORKFLOW**

**ED**

Patient to DC/admit to ACS or swing bed?

Provider Plan of Care – BPA fires on days 12 & 28 to order re-certification by days 14 & 30

MD intervals DCS to complete new admission H&P; re-verify allergies, problem list, and history

RN copy forward and complete admission navigator flowsheets and care plans; answers “yes” in discharge/readmit query

MD writes DCS, reviews current orders, med rec, and enters SB order set/other new orders (including Plan of Care Certification order)

ALTERNATE CARE SITE

SWING BED

MD writes DCS, reviews current orders, med rec, and enters LOC order and other new orders

Patient Access or RN discharges and re-admits

RN copy forward and complete admission navigator flowsheets and care plans; answers “yes” in discharge/readmit query

MD intervals DCS to complete SB H&P; re-verify allergies, problem list, and history

CM obtains forms and provides resident notifications, i.e. consent, patient rights & responsibilities, and financial notifications

SB DCS = diagnoses, course of stay, pertinent results, summary of RAI/MDS, reconciliation of post-discharge meds, post-DC plan (includes where patient plans to reside, arrangements made for follow up care, post-DC services)

MDS – sent to HIM to scan at discharge on SB HAR/CSN (Profile/Plan of Care with “MDS” description)

Patient Access discharges and re-admits

CM obtains forms and provides resident notifications, i.e. consent, patient rights & responsibilities, and financial notifications

All other documentation follows standard IP workflows