Discharge Planning Policy

GOAL

It is the goal of the Homeless Services Consortium (HSC) to inform, assist, and coordinate with various systems of care to ensure that people exiting the systems of care will have discharge plans in place that identify appropriate housing options and are not discharged into homelessness.

GUIDING PRINCIPLES

- Housing is a human right.
- Housing First is not only humane but also cost effective. Stable and permanent housing promotes recovery and reduces recidivism.
- Homelessness should be prevented whenever possible; when it can’t, it should be a rare, brief, and one time experience.
- At all systems of care, people experiencing homelessness or at risk of homelessness should be identified and every effort should be made for safe discharge including immediate shelter, permanent housing solutions, and supportive services.
- The CoC considers the publicly funded institutions and other systems of care critical partners to end homelessness. Increased awareness of and collaboration between the respective systems will help shape better outcomes for people experiencing homelessness or at risk of homelessness.
- Referral to emergency shelter should be considered the avenue of last resort.

STATUTORY REQUIREMENTS

Health Care

Under 42 CFR 482.43(b) and (6), all hospitals must have in place a discharge planning process that applies to all patients and the discharge planning evaluation must include an evaluation of the likelihood of a patient needing post-hospital services and the availability of those services. The hospital must include the discharge planning evaluation in the patient’s medical record for use in establishing an appropriate discharge plan and the hospital must discuss the results of the evaluation with the
patient or the person acting on his or her behalf. Wisconsin Administrative Code DHS 124 defines the requirements for discharge planning.

**Foster Care**

Wisconsin Statutes Ch. 48 & 938 and Wisconsin Administrative Code DCF 38 & 56 govern foster care and compliance with the Federal Program. The Wisconsin Department of Children and Families (DCF) is responsible for youth in foster care and its policies prohibit discharge into homelessness. Youth aging out of foster care may be eligible for room/board assistance if Wisconsin and Federal eligibility is met and the child welfare agency has funds to assist.

**Mental Health**

**Wisconsin Statutes Ch. 51, 35** governs the transfer and discharge policies of community mental health, development disabilities, alcoholism and drug abuse services. Part of the discharge planning process is the development of a plan for placement in the least restrictive setting in the client’s home community. The law states that a hospital director or 51.42 board discharging a person from a psychiatric hospital or unit will ensure that a proper residential living arrangement and necessary transitory services are available and provided for the patient being discharged. The provisions pertain to both voluntary and involuntary patients.

**Corrections**

The Wisconsin Department of Corrections has policies and procedures set in place to ensure planning and communication between the correctional institution and community corrections regardless of whether the inmate is being released on discretionary parole, mandatory release or maximum discharge from sentence. These procedures involve advance communication and planning between the inmate, institution staff and the assigned community corrections agent. The planning process, at a minimum addresses housing, employment, treatment and reunification with family. Because the administration of the local jails is based on a county by county system determined by the locally elected sheriff, there is no statewide policy in place to facilitate the placement of persons serving a short term in the county jail.

**DISCHARGE PLANNING PROCEDURES**

In order to inform, assist, and impact discharge planning efforts of the above identified systems of care, HSC will do the following:
• Develop and annually review a roster of key contacts who are responsible for discharge planning policy development as well as direct service at respective systems of care
• Outreach the identified contacts at least annually to establish a shared goal of preventing and ending homelessness and develop coordinated plans to improve housing outcomes of people exiting the systems of care
• Regularly provide information on the following topics to guide discharge planning: extent and nature of homelessness in our community, housing resources for low-income individuals and families, homeless services system resources such as coordinated entry, outreach, housing navigation, and economic opportunity or workforce development resources
• Develop communication plans to provide important updates to homeless services system changes
• Work collaboratively to increase grants or other sources of funding for homeless and housing resources
• Regularly extend invitation to join the Homeless Services Consortium
• Discuss coordinated discharge planning at the State Interagency Council on Homelessness level