(A) Policy Statement

All patients receive routine Admission Office processing, whether admission occurs from within or outside the hospital. Each patient and family member is treated with dignity and concern throughout the admission process.

(B) Purpose of Policy

To assure that all admissions meet the admission criteria as established and to provide an efficient and timely admission process.

(C) Procedure

Pre-admission Process

1. Admissions to the program are initiated by either a face-to-face pre-screening with the patient or by a phone assessment where pertinent information is obtained from the referral source, patient or family to determine if the patient meets eligibility admission requirements.

2. After all pertinent information is obtained the attending physician for child division is consulted to obtain final approval for the admission.

3. Upon MD approval, the unit is contacted to advise of the patient status and to assign a room.

4. If the patient has a legal representative, the representative must sign all required consents. If the legal guardian is not available at time of admission, papers may be faxed and telephonic permission witnessed by two staff is required. Documents are to be signed as soon as possible.

5. Consents which must be signed include the following:
   a. General Consent
   b. HIPAA
   c. Consent for Release of Information
   d. Notification of Photo

When obtaining verbal consent, the person obtaining consent shall document this consent on the admission consent treatment form. Documentation for verbal consent shall include: employee’s signature, date, time, from whom consent was obtained, and signature of additional witness. The family member, guardian or health care representative should be instructed to provide written signature for consents.

Unit Admission Process
1. Admission to the program may occur at any time.

2. When the attending physician directs admits a patient to the unit, the unit is notified as to a tentative time of arrival. If a direct admit occurs Monday – Friday 8am to 4:30pm, a family therapist or SWA will assist in the admission process and make the necessary arrangements to expedite the admission. This process involves contacting the referral source for additional information. After hour direct admits and admits on Holidays and weekends also require a contact with the patient, family, or referral source and are handled by the resident. Direct admissions are highly desirable but the patient must be medically stable.

**Admission from the Emergency Department**

1. Patients presenting in the ED are evaluated by the ED physician and the psychiatric resident or family therapist. After the evaluation, the attending physician of the unit is consulted for final approval of the admission. To the extent available, all consents for voluntary admission are signed by the patient in the ED before the patient is admitted to the unit. If the appropriate legal representative cannot be contacted the unit is advised and staff assists in the process of obtaining consents, verbal consent as stated above. Approval of the admission must occur before the patient is transported to the unit.

**Documentation**

The nurse writes detailed admission notes in the interdisciplinary progress note section of the electronic chart, including but not limited to the following:

- Exact time of admission
- Age, gender and race of patient
- Mode of admission
- Location of patient prior to arrival on unit
- Notification of any special medical or behavioral problems.
- Narrative description of patient's symptoms, presenting behavior, and reasons for hospitalization.

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