

ADMITTED PATIENT LEAVE POLICY®

DOCUMENT SUMMARY/KEY POINTS

- The management of admitted patient leave is underpinned by the NSW Health Admission Policy [PD2017_015](#).
- Admitted Patient Leave is:
 - Also referred to as day leave or overnight leave (ONL) and is defined as temporary absence from Sydney Children's' Hospitals Network (SCHN) with the intent to return for further treatment.
 - Managed by the Nurse Manager Patient Flow (or Hospital Coordinator after-hours) in consultation with the treating team.
 - All types of leave granted from SCHN Mental Health Inpatient Units, must have written approval from the designated treating doctor and be granted in accordance with the conditions set out in both NSW and SCHN Policy Documents as follows:
 1. [Discharge Planning and Transfer of Care for Consumers of NSW Mental Health Services](#) (NSW Health PD2019_045) and
 2. In respect of their prescribed levels of observation as defined in [Engagement and Observation in Mental Health Units](#).
 3. [Assessing Inpatient Mental Health Care for Children and Adolescents](#) (NSW Health IB2023_001)
 4. [Admission to Acute Mental Health Unit \(SCHN\)](#)

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

| | | |
|------------------------|--|---|
| Approved by: | SCHN Policy, Procedure and Guideline Committee | |
| Date Effective: | 1 st January 2024 | Review Period: 3 years |
| Team Leader: | Nurse Manager | Area/Dept: Patient Flow unit [CHW & SCH] |

CHANGE SUMMARY

- Policy review, minor changes.

READ ACKNOWLEDGEMENT

- All clinical managers / staff should read this policy.
- Patient Administration Officers should read and acknowledge they understand the contents of this policy.

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

| | | |
|------------------------|--|---|
| Approved by: | SCHN Policy, Procedure and Guideline Committee | |
| Date Effective: | 1 st January 2024 | Review Period: 3 years |
| Team Leader: | Nurse Manager | Area/Dept: Patient Flow unit [CHW & SCH] |

Introduction

The purpose of this policy is to outline the process of allowing admitted patients to leave a SCHN facility for short periods during the day and overnight for up to 3 nights as part of their treatment at SCHN.

Leave may be granted to assist with discharge planning, as part of a treatment plan for long term patients or for compassionate reasons. Consideration for admitted patient leave should only occur if it is consistent with best practice and if it is possible to do in a safe manner.

Admitted Patient Leave Definitions

SCHN must ensure that every available bed is open and ready for patient use but recognises temporary absence from a ward or unit is necessary periodically for treatment or transition purposes.

Types of Admitted Patient Leave

Admitted Patient Leave is also referred to as day leave or “over night leave” (ONL) and is defined as temporary absence from SCHN with the intent to return for further treatment. Admitted patient leave is managed by the Nurse Manager Patient Flow (or Hospital Coordinator if after hours) in consultation with the Treating Team.

Day leave

With day leave the patient leaves and returns leave the same day. Day leave patients should be placed on leave for the period they are out of the ward. Examples of reasons for day leave include, but are not limited to: patients requiring medical procedures in other facilities, therapeutic recreational leave etc.

The leave must be documented in Patient Management System (PMS) and the Nurse Manager Patient Flow (or Hospital Coordinator if after-hours) should be notified by the Treating Team/ward.

Overnight leave

Overnight leave is used when an absence from the hospital is required overnight. Overnight leave is considered where there is therapeutic value for the patient in the context of continuing inpatient care.

- Requests for overnight leave must be authorised by the Nurse Manager Patient Flow (or Hospital Coordinator if after-hours) and documented in PMS.
- Patients returning from leave within 72 hours do not require a full medical and nursing admission.
- **Escorted Leave (Mental Health Units only):** A young person may be granted leave in the company of staff from the Unit. Escorted Leave is an opportunity to assess how a patient manages away from the unit, to build rapport with the clinical staff, practice skills to prepare them for discharge as well as to assess the patient’s readiness for discharge.

Please refer to the following policies for information regarding leave management for mental health unit inpatients:

1. [Assessing Inpatient Mental Health Care for Children and Adolescents](#) (IB2023_001)
2. [Admission to Acute Mental Health Unit \(SCHN\)](#)

Procedure

Preparing for admitted patient leave

The Treating Team must contact the Nurse Manager Patient Flow (or Hospital Coordinator after hours) to request authorisation for leave.

When a patient has been identified as clinically eligible for admitted patient leave:

- Parents/carers are to be advised that no guarantee can be given that the child will return to the same bed space or ward on their return to SCHN. NB: Mental health unit inpatients will return to the mental health unit.
- The Treating Team must document in the patient notes if the leave is 'day leave' or 'overnight leave'.

Prior to leaving SCHN grounds

A parent/carer must complete a Patient leave Form.

The Patient Leave Form must be witnessed by nursing or medical staff and then placed on the front of the patients notes when the patient commences the leave.

Document in the patient's medical record:

- i. the patient has gone on leave and
- ii. notification to the Nurse Manager Patient Flow/Hospital Coordinator (if day leave) or authorisation by the Nurse Manager Patient Flow [or Hospital Coordinator after hours] if overnight leave.

Document in Patient Management System (PMS) the type of leave (day or overnight).

NB: An updated EDD is required to be entered into the Patient Flow Portal prior to the request for overnight leave.

Should there be any patient related risk identified associated with the requested leave these must be communicated to the Patient Flow Manager or Hospital Coordinator after hours.

Patient valuables must be removed from the hospital when the patient leaves.

Returning from leave

Document "returned from leave" in PMS.

Document in the patient's medical record the child has returned from leave.

NB: Admitted patients on leave who present to the ED of the hospital to which they are currently admitted is not to be discharged and readmitted. The patient should have an ED type visit of "current admitted patient presentation" and, if required, a care type change. A patient on leave from one hospital who presents to the ED of another hospital and is admitted to that hospital must be discharged from the first hospital. The second hospital must inform the first that they have admitted the patient (as per [NSW Health Admission Policy](#)).

Copyright notice and disclaimer:

The use of this document outside Sydney Children's Hospitals Network (SCHN), or its reproduction in whole or in part, is subject to acknowledgement that it is the property of SCHN. SCHN has done everything practicable to make this document accurate, up-to-date and in accordance with accepted legislation and standards at the date of publication. SCHN is not responsible for consequences arising from the use of this document outside SCHN. A current version of this document is only available electronically from the Hospitals. If this document is printed, it is only valid to the date of printing.