

NORWOOD HEALTH CENTER  
POST-DISCHARGE PATIENT CONTACT #1

Patient Name: \_\_\_\_\_ NHC #: \_\_\_\_\_

Contact phone number: \_\_\_\_\_ Discharge Date: \_\_\_\_\_

Directions: Make phone contact with the patient on the following date: \_\_\_\_\_. Document patient's responses to your questions, and include the date and time of each attempted phone contact and the completed contact.

At the beginning of the call, introduce yourself, and explain your reason for calling to check on how their discharge from the hospital went for them. (Example: Hi, I'm (name) social worker (or social services) from Norwood Health Center and I'm calling just to check on how your discharge went and how you are doing. May I ask you a few questions that will only take a few minutes?).

Questions:

1. I see that you are on the following medications (list them from the nursing aftercare plan). Have you been able to take them as the doctor recommended?  
Patient's response:

\_\_\_\_\_

2. Are you having any difficulties with your medications since you were discharged?  
Patient's response:

\_\_\_\_\_

3. I see on our discharge papers that you have appointments with (name the providers, their agency, date and time of appointments). Are you planning on attending those appointments?  
Patient's response:

\_\_\_\_\_

4. Will there be any problems for you getting to those appointments?  
Patient's response:

\_\_\_\_\_

5. On your safety plan you completed here at Norwood, you noted (describe/read what patient listed on their safety plan). Can you still follow your safety plan if you feel unsafe?  
Patient's response:

\_\_\_\_\_

6. Do you have any questions about your recent treatment at Norwood?  
Patient's response:

\_\_\_\_\_

Thank you for letting us check in with you. We hope things are going better for you. A social worker may check back in again with you in another 3-4 days just to see if any concerns arise.

Contact Log

Date and Time Contact Made or Attempted  
(if not reached, note that)

Social Services staff who contacted patient

_____	_____
_____	_____
_____	_____
_____	_____