



Medical-Surgical Lower Level of Care (LLOC)

Q: What is Lower Level of Care (LLOC)?

LLOC is a multi-functional collaborative effort to assist with the transfer and placement of patients with complex conditions outside of the acute care setting and into lower levels of care. The San Mateo Medical Center utilizes these weekly meetings to facilitate this transition and to also focus on clients in the community who may need to transition to higher levels of care.

Q: Who are the key participants?

Members represent the four areas of the San Mateo County Health System and several key partners: San Mateo Medical Center (SMMC), Aging and Adult Services (AAS), Behavioral Health and Recovery Services (BHRS), Community Health Advocates (CHA), the Health Plan of San Mateo (HPSM), and Burlingame Long Term Care (BLTC).

Q: How is it structured?

A call for patient cases is made each Thursday to all the departments for the upcoming Monday meeting. Each department then compiles a list of their potential clients and presents them at the Monday conference. Cases are reviewed for: length of stay, medical necessity, insurance, financial resources, patient history, and barriers to placement at a higher or lower level of care. The meetings usually last one hour, and additional cases may be added if needed.

Q: Who facilitates the meetings?

The meetings are facilitated by a designated representative from Aging and Adult Services. This individual assists with communication through the different divisions, supports with problem solving, and manages funds. The facilitator also gathers necessary patient information from each department to ensure progress towards transitioning the patients.

Q: How has LLOC impacted the health system?

The LLOC meetings have integrated expertise across all levels of the health system to discuss patient cases, see different perspectives, and share knowledge to a broad array of resources available in the community. It has identified the shifting social and demographic changes as well as potential future barriers in the community—making the health system well positioned to undertake these hurdles. LLOC has evolved over time to become more collaborative, encompass more departments, and garner more team effort. It has promoted better understanding of each department's role and limitations, fostered new relationships, and created more synergy. This consistent collaboration continues to improve patients' discharge rates that would otherwise remain unchanged.

Q: What is LLOC's future outlook?

The SMMC patient population presents with increasingly complex barriers to discharge. The knowledge of the LLOC participants is essential in developing transition plans for these patients.

Q: What is each department's individual role in LLOC?

<u>Department</u>	<u>Consultation</u>
San Mateo Medical Center (SMMC)	SMMC frequently has patients who do not meet medical necessity yet have many barriers to discharge. The staff seeks consultation and resources from other members of the committee to mitigate these barriers to discharge. In addition, SMMC provides clinical consultation in case reviews involving lower levels of care or community placement. The goal is to ensure that the discharge destination for patients preserve a high level of independence while maintaining their social support network.
Aging and Adult Services (AAS)	AAS encourages a broad discussion of the patient's history and requirements to accurately assess and formulate a patient's discharge to the community. The representative engages in each division's perspective, offers insight, and poses questions regarding the patient's psychosocial health, support system, living situation, entitlements and appropriateness for community resources. In addition, AAS voices support for the discharge plan and may authorize the use of certain funds to expedite a patient discharge.
Public Guardian (PG) (a subset of AAS)	PG represents the conservatorship office in addressing the needs of the many conserved clients at SMMC. They provide consultation on the appropriateness of a probate or Lanterman Petris Short (LPS) conservatorship and offer input from the conservatorship standpoint regarding consent and decision making authority. The Public Guardian also assists in discharge planning and care outside of the hospital by sharing knowledge of community resources.
Behavioral Health and Recovery Services (BHRS)	BHRS brings expertise and provides guidance when the case involves dual diagnosis. Patient information is shared between SMMC's medical-surgical unit and BHRS to provide a complete picture of the patient to help manage care and help support discharge plans. They address the patient's psychological issues to ensure they can be discharged and integrate successfully into the next level of care or community setting.
Community Health Advocates (CHA)	CHA provides feedback on patients who are uninsured or have pending health coverage applications. They contribute specific application information to the other departments and gather verifications and documents. CHA works very closely with BLTC Social Workers, Psychiatry, and Med-Surg Units to expedite coverage applications.
Health Plan of San Mateo (HPSM)	HPSM is a licensed health plan contracted with Medi-Cal and Medicare to provide qualified members with covered benefit coverage. It functions as a referral resource by reviewing LLOC cases by product line, benefit packages, and program requirements. HPSM also consults by appraising cases for medical necessity, level of care, and benefit options within HPSM's contracted network.
Burlingame Long Term Care (BLTC)	BLTC is a skilled nursing facility that contributes an additional perspective from healthcare professionals who specialize in post acute care. They share current information on bed availability and perform immediate response to referrals. By doing so, they improve efficiency and allow hospital based social workers and case managers to be more involved in preparing the patient and family's transition to long term care.

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