



ALL ABOUT
SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

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Discharge AASL Procedure for Speech Language Pathologists

Internal Discharge Procedures - Background

Discharge from therapy is a big step! It can be a celebration of a child's accomplishments or a decision that skilled therapy will no longer help a child in our care. These are drastically different reasons for concluding that discharge is warranted. It is essential that we always keep this in mind and how this will emotionally impact a family; everything from elation to hopelessness. And the response could be completely unexpected. We can help eliminate unexpected responses by communicating well in advance the precursors to discharge. We provide a list of items that could preempt discharge in the initial evaluation; however, every child and family circumstance and journey is different, so constant feedback and frequent reminders to the family are crucial.

Many times, we are so proud of our clients who have met their goals and no longer need our skilled therapeutic services! While this is an exciting time, it can also be a scary/overwhelming time for these families. Try to remind yourself of how long the parent has had concerns, being worried/anxious about their child's needs, navigating obtaining diagnoses, if warranted, placing their trust in you to care for their child's development, and coming to therapy since commencing services. Whether it was 6 months or years later, change is hard for anyone, and especially hard when you are part of navigating and initiating that change for someone in your care, who has grown to have strong affinity for you and their relationship with you and their child! This is why it is imperative that you have open communication with the caregiver, especially throughout the therapeutic process, and prime them for this moment before it actually takes place!

Common reasons for discharge may include:

- meeting goals
- financial burden
- seeing another specialist
- prioritizing other treatment/service
- relocation
- scheduling conflict
- parent burnout/child burnout
- plateau of a child's ability to acquire new skills
- aging out of services provided in our clinic

You can again try to imagine how the parent/caregiver may feel in this situation. More than anything, they want to help their child. These types of situations can result in the parent feeling a variety of different emotions, so we certainly want to be sensitive to those emotions and approach discharge as empathetically and tactfully as possible.

Part of our mission here at AASL is to provide optimum treatment services that foster maximizing each child's potential; discharge falls under this category as it completes a cycle of action from initiating services, to rendering them, to ceasing them! We want to be gentle and understanding with all of our families given they have had and/or are partaking in different experiences pertaining to their child's needs. We want them to be confident in us that we are



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making the right choice in supporting the “why” behind discharge, that their child is truly ready for this next step, and that we are always here for support and guidance. Perhaps you have determined that the child has met their goals in therapy or has reached a plateau, however the parent still is having difficulty with generalization and carryover in the home, school, or community setting where the child is still showing difficulty; remember, coaching, guidance, and explanation of the “why” in a sensitive way will be imperative.

It really all circles back to communication. We MUST be having an ongoing dialogue with the family throughout the therapeutic process (in daily/weekly wrap ups on goal progress, at progress note time, at re-eval time, etc.) so there are no surprises. Noting this information in a progress note/re-evaluation and simply giving that to a parent is not enough. Again, while it might not occur as surprising to you, given we are the professionals and do this day in and day out, for families this is something that in many cases they don't want to let go of because of the positive, life-changing impact it has had on their child and family, and the “letting go” of this skilled support is something they will always continue to rally for. It's like an episode of your favorite TV show, or your favorite comfort food; no matter what, you are always going to seek it out to fill that craving/need and the fond memories that come with watching that show or eating that delectable meal! Yes, you are your client's “comfort person” or “comfort team!” We've heard a parent describe discontinuing therapy in this way: that it's like removing one leg of a steady chair. It can be a worrisome time for parents to now remove one aspect of their child's success. This is why we also remind families upon discharge time that we will always be available for support. Therapy is often cyclical, especially in our younger clients; it is not a once you are done, the door is always closed. We remind families that our door is always open and we will give them our most honest feedback and recommendations, whether we encourage support elsewhere or they reinitiate support here at AASL.

When should these conversations be happening? This is where you need to use your clinical judgment to gauge when discharge may be on the horizon. Keep in mind the preparatory window a family should be given to prepare for such discharge. Progress note time is a great opportunity to communicate steps being taken toward discharge, as are re-evaluations. Additionally, as a child meets their first long term goal, or any goals thereafter, a parent should immediately be informed of such. You can do this verbally in a wrap-up session, or in an email. Email or a phone meeting may be warranted secondary to in person wrap up, especially if you feel you need to document this communication via the communication tab for record keeping purposes. This would include things like if there are any reservations about a family's current communication around their child, if they are present for the therapy process or not, or maybe causing any tentative issues. Positive connotation for all of this correspondence is essential and we trust you are keeping that at the forefront of your dialogues and correspondences with families. ***If you have questions around handling clients in these aforementioned circumstances, please reach out to management for support in handling.**



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A note to clinicians:

The intent of this procedure is not to dispute professional recommendations, rather it is to ensure that we are handling ourselves in a manner in line with AASL's mission/vision, specifically the high quality of care we provide. We want it to be known that our high quality service is just that, from start to finish.

If discharge is not handled with the utmost care and concern, it can result in clients and parents being left with a bad taste in their mouth. We want each and every person who enters this clinic to leave satisfied and validated. Should we abruptly end services and not confirm all concerns have been addressed, this can lead to families leaving with misaligned expectations, disappointment, frustration, and discontentment. Consequently, this can be detrimental to our reputation, but more so than that, has the potential to inhibit our ability to be able to help other families in the future given how a family proceeds to communicate their experience about their time at AASL (i.e. word of mouth, social media, online reviews, etc.). We've all seen how negative reviews and feedback sway and influence our choices and impressions as consumers.

This procedure is in line with team members keeping the core mission and vision of AASL at the forefront of their clinical practice as well as in the owner's desire to provide each and every clinic division team member a supportive platform around handling discharge with clients, especially when we have more challenging circumstances. We truly want to support families through "every life stage", setting them up for growth and success not just in our setting, but beyond. Goals and how discharge is handled should reflect such!

Internal Steps We are Taking Within the Clinic Division When Discharge Conversations Are Being Had:

1. When you begin to anticipate discharge for a client, you will communicate this information to your CM during your CM meeting. You will also communicate to the family what goal has been met/skill has been mastered. Ideally, these conversations with parents/caregivers are to take place in person. Communication with the parent should be ongoing, regardless of anticipated discharge or not. If you are not able to have an in person conversation, you may email or set up a call. The purpose of this email is to keep them informed, as well as present the opportunity to address any other concerns. Please see template below:

"Hi xx,

I hope you are having a great day! I am so excited to share with you that xx has already met one of his short-term goals. (YOU MAY ELABORATE ON THAT SKILL/GOAL HERE). I am so proud of his hard work. Please let me know if you have any other speech or language/occupational] concerns you would like to bring to my attention.

Sincerely,
Therapist"



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2. As the child continues to progress, you will continue to update your CM as well as the parent. Again, these conversations SHOULD be taking place in person as time and logistics allow, but if you must communicate via phone or email, please use the template below:

"Hi XX,

I am reaching out to follow up regarding xx's progress. He is doing great! He has met most of his short-term goals, and some of his long-term goals as well. **(YOU MAY ELABORATE ON THAT HERE)**. I want to be sure that we are addressing all of your concerns, so please do not hesitate to reach out with any questions. Should you feel that xx has additional areas of need, I would be more than happy to take a look at these areas in our next session. If not, we may soon be looking at graduation from [speech/occupational] therapy!"

Sincerely,

Therapist"

3. If a client situation warrants reaching out to upper management, such communication will take place, with appropriate follow up and scheduling a care plan meeting if necessary.
4. Consultation with CM will be ongoing to ensure that this child is truly ready for discharge and/or graduation. Things to consider/prepare to communicate to CM are:
 - All areas of concern have been addressed (reference any re-evaluation surveys!)
 - Mastery of skill at highest level of independence
 - Plan for qualitative or standard assessment to further confirm WNL
 - Functional application/generalization of learned skills outside of treatment session environment
 - Is the primary caregiver on board with discharge? Have we comprehensively addressed/assessed ALL of their concerns? (they may have new since re-eval!)
5. As the time gets closer (approximately 4-6 weeks out), you'll communicate to the parent a third time, providing a discharge date. You may verbally communicate something along the following:

"Hi X"

I know we have discussed some of the goals xx has already met, and I am so excited to share with you that xx is very close to meeting ALL of their long- and short-term goals! xx's hard work, and your additional work with him/her at home, has made all of the difference in helping to make this possible. Your time and attention to working with xx is so appreciated and shows! With that being said, we are nearing graduation from [speech language/occupational therapy]. Based on developmental milestones for xx's age, he/she is currently achieving these expectations. In the coming weeks, I will provide you with the date of our last session and home practice resources. If you have any additional questions or concerns, please do not hesitate to reach out to me! I would be more than happy to correspond via email, or if you prefer, we can set up a call. I hope you have a great rest of your day! I will see xx at our next scheduled session.

Sincerely,

Therapist"



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6. Once this verbal communication has taken place you can follow up in email confirming the discharge date. PLEASE BCC Patient Scheduler, Finance Division, PCC and your CM on this written communication. You will confirm this information with your CM including home program ideas/plan and qualitative/formal assessment you will be completing to justify discharge from therapy.
7. Leading up to discharge date, you are to be compiling materials you will be sharing with the family for a home program/home resources. Again, this should not be something that is taking up much of your time. Communicate with your CM around this or use your cohorts for ideas if you don't have particular ideas or materials in mind to share with the family on the final date of discharge.
8. Follow Steps for Marketing Collaboration Procedure for additional information on capturing necessary information for client discharge as well as communicating with PCC and asking for reviews.
9. Ensure family has received marketing materials/request for reviews, home program materials, and discharge note.

Drafting Discharge Note

10. Once a client is getting ready for discharge after meeting goals in your outlined plan of care or a family informs you they are stopping due to relocation, school, other reason, a discharge note must be completed to close them out of the EMR system.
11. Inform your CM, Front Desk (Scheduling), and the Patient Care Coordinator (PCC) of the upcoming date of discharge and if you have current clients that can fill the day/time that will be opening up on your schedule, communicate that accordingly via email so they know for scheduling new clients or other families that need additional days/times.
12. If a client is discharging without a valid reason (i.e., relocation, finances, meeting goals), please disregard Step 4 and inform your Clinical Manager. If necessary, this will be communicated by your CM to the Clinical Director. Following this, necessary steps will be taken to retain the client. This is done on a case by case basis therefore there is no set procedure.
13. If a client is discharging after meeting goals outlined in your plan of care, or because they are relocating (i.e. Tricare Military orders, etc), also reach out and communicate with the PCC with email notification. Please follow the internal steps listed above.
14. As a part of informing your CM and Front Desk of upcoming client discharge, also include the PCC in the email notification of the upcoming discharge date.
 - The PCC will note this and follow up with Front Desk to gather appropriate documents for follow up with Referral Source.
 - **For this reason, it is crucial you close out discharge notes as close to the discharge date as possible.** Not doing so is going to impact the PCC in a follow up visit to the referral source to hand deliver the discharge note and follow up items.
 - As a part of this visit back to the referral source, the PCC is also going to get with the clinician directly in order to obtain any examples of the client's work, progress in structured activities, and/or pictures. Treating therapists, please be the ones to check picture and media consent using EMR system and/or help of the Front Desk to



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know if a client can have their picture taken as a part of sharing on social media as well as back to the Referral Source.

- Use Milestone Moments and "I Did It!" Success Story Photo boards for pictures to use when meeting goals and/or at time of discharge.
- Coordinate with PCC to help you obtain these photos so that the appropriate follow-up can take place with the referral source as a means of continuing to foster our professional relationship, continued referrals, and thanking them.

15. If completing a Discharge Note outside the treatment session, go into the patient chart and hit A to add under Visit History, then select Long-Term Therapy Note. When it populates the note going forward on the upper right hand side you will then need to change the Note Type to discharge note and then under that make sure you add from the dropdown SLT Standard.

All About Speech & Language RPM - dat User: JGraepel Station: 8 allaboutspeech.raintreeinc.com:10056
 Test, Clayton All Providers

< Save Cancel Add Edit Delete Print Relink >

Patient Chart - 0001839 Clayton Test DOB: 03-01-2010 Age: 11 yrs 0 mos
 Case < Menu Picture Waiting List

Visit Info Therapy Tracking Documents/Tasks Communication Admin All Records

Case Information

#	Type	Case Name	Start	End	DOI	Primary Diagnosis	Primary Payor
ST001	LTERM	Speech Therapy	07-22-20			Other developmental disor...	A Tricare East Region - TRICA

☐ Hide Closed / Discharged Cases Active Expired On Hold

Visit History

Date Range < - < Provider < Location < Template < Note Type < Clear Filters

Date	Time	Template	Description	Case Name	Provider Name	Loc	Case	Signed	Posted	Post Rev	Amended
07-22-20	03:00p	INOTE	Interim Note			VALFL	00000		NV		
07-22-20	02:59p	INOTE	Interim Note			VALFL	00000		NV		

Add Print Relink

Print Notes Fax/Email Notes Not Signed Signed Off Amended / Cosigned Canceled / No Show

Visit Report Role Records

1:31 PM 3/2/2021



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Discharge AASL Procedure for Speech Language Pathologists

Test, Clayton | All Providers | User: JGraepel | Station: 8 | allaboutspeech.rainreinc.com:10056

Patient Chart - 0001839 Clayton Test DOB: 03-01-2010 Age: 11 yrs 0 mos

Case [] Menu Picture [v] Waiting List

Visit Info | Therapy Tracking | Documents/Tasks | Communication | Admin | All Records

#	Type	Case Name	Start	End	DOI	Primary Diagnosis	Primary Payor
ST001	LTERM	Speech Therapy	07-22-20			Other developmental disorder...	A Tricare East Region - TRICA

☐ Hide Closed / Discharged Cases

Visit History

Date Range [] Provider [] Location [] Template [] Note Type [v] Clear Filters

Date	Time	Te	Provider Name	Loc	Case	Signed	Posted	Post Rev	Amended
07-22-20	03:00p	INC		VALFL	00000		NV		
07-22-20	02:59p	INC		VALFL	00000		NV		

Select Type of Note

- Agent based service ticket
- Group Attendance
- Group Attendance Ticket
- Group Member Visit
- Group Periodical Posting Ticket
- Group Visit
- Interim Note
- Long Term Therapy Note
- Service Ticket

Print Notes | Fax/Email Notes

Not Signed | Signed Off | Amended / Cosigned | Canceled / No Show

Visit Report | Role Records

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- Assign charges only if you made the final treatment session the Discharge Note via your weekly scheduler; if you did it separately via accessing the client chart there will be no visit/no service ticket selected so charges are not enabled.





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17. Then go through the tabs and update across the following:
 - Progress Note
 - Treatment Plan
 - Discharge
 - Charges: (if applicable, refer to step 16)
18. For the Treatment Plan tab, you do not need to go through each goal area and comment like you do for a progress note UNLESS they are continuing services at another facility (whether it is due to preference, insurance, relocation, etc.)
19. At the time of discharge, if a plan of care is completed all goals will be met so you would change the status of the short-term goals to Met. If they are not, status remains "Ongoing" with changes made to "Updated" or "Discontinued" as appropriate.

Discharge Note for Clayton Test - Visit: 1 Payor: TRICA 10002 Tricare East Region

Patient Information
 Patient: Clayton Test
 DOB: 03-01-10 Age: 11y 3d Case: ST001
 MR #: 0001839

Record Information
 Date: 03-04-21 Time: 11:41a
 Therapist Assigned: JEGR
 Loc: VALFL Ref: 00011
 Type: Discharge Note
 SLT Standard

Goals

#	Goals	Revised	Start	End	Status	Progress	CPT	Duration
001	Demonstrate improved articulation skills by producing prevocalic and vocalic /r/ across all word positions in 80% of trials given fading verbal, visual, and tactile cues	03-04-21	03-04-21	Ongoing	0%			

Select Goals to Include
☐ Unselect All ☐ Show met goals

Outcome
 Goals Met: %
 Goals Partially Met:
 Goals Not Met:



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Test, Clayton

Save Cancel

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

Patient Information
Patient: Clayton Test MR # 0001839 Case # ST001 Time 11:41a Revised 03-04-21

Category / Progress
LT Goal # ST001-001 Category ST004 Speech and Phonological Development

Long Term Goal (Alt L for List)
Demonstrate improved articulation skills by producing prevocalic and vocalic /r/ across all word positions in 80% of trials given fading verbal, visual, and tactile cues

Effective Dates / Status
Start Date 03-04-21 End Date Status Ongoing

Daily Progress / Activity
Progress 0% CPT Duration

Short Term Goals

Status	Short Term Goal	Comments	Start Date	End Date	Ad...
Ongoing	Produce prevocalic /r/ in simple syllable...		1/1/20	3/8/21	Yes
Ongoing	Produce vocalic /r/ in simple syllable...		1/1/20	3/8/21	Yes
Ongoing	Produce prevocalic /r/ in blends, initial...		1/1/20	3/8/21	Yes
Ongoing	Produce vocalic /r/ across initial, med...		1/1/20	3/8/21	Yes

Goal that has been discontinued
Show discontinued/met goals

1:18 PM 3/8/2021

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Test, Clayton

Save Cancel Add Edit Delete

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

Patient Information
Patient: Clayton Test MR # 0001839 Case # ST001 Time 11:41a Revised 03-04-21

Category / Progress
LT Goal # ST001-001 Category ST004 Speech and Phonological Development

Long Term Goal (Alt L for List)
Demonstrate improved articulation skills by producing prevocalic and vocalic /r/ across all word positions in 80% of trials given fading verbal, visual, and tactile cues

Effective Dates / Status
Start Date 03-04-21 End Date Status Ongoing

Short Term Goals

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Ongoing	Produce prevocalic /r/ in simple syllable...		1/1/20	3/8/21	Yes
Ongoing	Produce vocalic /r/ in simple syllable...		1/1/20	3/8/21	Yes
Ongoing	Produce prevocalic /r/ in blends, initial...		1/1/20	3/8/21	Yes
Ongoing	Produce vocalic /r/ across initial, med...		1/1/20	3/8/21	Yes

Goal that has been discontinued
Show discontinued/met goals

1:20 PM 3/8/2021



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Test, Clayton

Save Cancel Add Edit Delete

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

Patient Information
Patient: Clayton Test MR #: 0001839 Case #: ST001 Time: 11:41a Revised: 03-04-21

Category / Progress
LT Goal #: ST001-001 Category: ST004 Speech and Phonological Development

Long Term Goal (Alt L for List)
Demonstrate improved articulation skills by producing prevocalic and vocalic /r/ across all word positions in 80% of trials given fading verbal, visual, and tactile cues

Effective Dates / Status
Start Date: 03-04-21 End Date: Status: Ongoing

Daily Progress / Activity
Progress: 0% CPT: Duration:

Short Term Goals

Status	Short Term Goal	Comments	Start Date	End Date	Ad...
Met	Produce prevocalic /r/ in simple ...		1/1/20	3/8/21	Yes
Ongoing	Produce vocalic /r/ in simple syllable ...		1/1/20	3/8/21	Yes
Ongoing	Produce prevocalic /r/ in blends, initia...		1/1/20	3/8/21	Yes
Ongoing	Produce vocalic /r/ across initial, med...		1/1/20	3/8/21	Yes

Goal that has been discontinued
Show discontinued/met goals

1:21 PM 3/8/2021

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Test, Clayton

Save Cancel Add Edit Delete

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

Patient Information
Patient: Clayton Test MR #: 0001839 Case #: ST001 Time: 11:41a Revised: 03-04-21

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Effective Dates / Status
Start Date: 03-04-21 End Date: Status: Ongoing

Daily Progress / Activity
Progress: 0% CPT: Duration:

Short Term Goals

Status	Short Term Goal	Comments	Start Date	End Date	Ad...
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Goal that has been discontinued
Show discontinued/met goals

1:21 PM 3/8/2021



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Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

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Long Term Goal (Alt L for List)
Demonstrate improved articulation skills by producing prevocalic and vocalic /r/ across all word positions in 80% of trials given fading verbal, visual, and tactile cues

Effective Dates / Status
Short Term Goals

Status: Met
Short Term Goal: Produce prevocalic /r/ in simple syllable comb
Comments: Goal Met
Start Date: 1/1/20
End Date: 3/8/21
Addressed: Yes

Start Date	End Date	Ad...
1/1/20	1/1/20	Yes
1/1/20	1/1/20	Yes
1/1/20	1/1/20	Yes

Goal that has been discontinued
Show discontinued/met goals

20. Once changing short-term goals to "Met", be sure to put the overall progress and change the status of the Long-term goal to "Met". This should automatically populate an end date for the long term goal, but you can manually type in as well.



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Test, Clayton

Save Cancel

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

Patient Information
Patient Clayton Test MR # 0001839 Case # ST001 Time 11:41a Revised 03-04-21

Category / Progress
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Effective Dates / Status
Start Date 03-04-21 End Date Ongoing Status Ongoing

Daily Progress / Activity
Progress 0% CPT Duration

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Goal that has been discontinued
Show discontinued/met goals

Test, Clayton

Save Cancel

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

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Met	Produce prevocalic /r/ in simple sylla...	Goal Met	1/1/20	3/8/21	Yes

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Effective Dates / Status
 Start Date 03-04-21 End Date
 Status Ongoing

Daily Progress / Activity
 Progress Met

Short Term Goals

Status	Short Term Goal	Comments	Start Date	End Date	Ad...
Met	Produce vocalic /r/ in simple syllable ...	Goal Met	1/1/20	3/8/21	Yes
Met	Produce prevocalic /r/ in blends, initia...	Goal Met	1/1/20	3/8/21	Yes
Met	Produce vocalic /r/ across initial, med...	Goal Met	1/1/20	3/8/21	Yes
Met	Produce prevocalic /r/ in simple sylla...	Goal Met	1/1/20	3/8/21	Yes

Goal that has been discontinued
Show discontinued/met goals

1:25 PM 3/8/2021

All About Speech & Language RPM - dat User: JGraepel Station: 10 allaboutspeech.raintreinc.com:10056

Test, Clayton

Save Cancel

Long Term Goals - DOB: 03-01-2010 Age: 11 yrs 0 mos

Patient Information
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Category / Progress
 LT Goal # ST001-001 Category ST004 Speech and Phonological Development

Long Term Goal (Alt L for List)
 Demonstrate improved articulation skills by producing prevocalic and vocalic /r/ across all word positions in 80% of trials given fading verbal, visual, and tactile cues

Effective Dates / Status
 Start Date 01-01-20 End Date 03-04-21
 Status Met

Daily Progress / Activity
 Progress 0% CPT Duration

Short Term Goals

Status	Short Term Goal	Comments	Start Date	End Date	Ad...
Met	Produce vocalic /r/ in simple syllable ...	Goal Met	1/1/20	3/8/21	Yes
Met	Produce prevocalic /r/ in blends, initia...	Goal Met	1/1/20	3/8/21	Yes
Met	Produce vocalic /r/ across initial, med...	Goal Met	1/1/20	3/8/21	Yes
Met	Produce prevocalic /r/ in simple sylla...	Goal Met	1/1/20	3/8/21	Yes

Goal that has been discontinued
Show discontinued/met goals

1:26 PM 3/8/2021



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

21. For the Discharge Tab: if a client is discharging before a plan of care is completed for the other reasons indicated above, we leave the goals as is in the treatment plan and do not comment on them, unless warranted, and then in the Discharge reason state the reason provided to us why the client is discharging and that it is recommended to continue with speech and/or occupational therapy for the frequency and duration as specified for the current plan of care (i.e. 2x/week for 30-minutes etc.) and what our continued recommendations are.

Test, Clayton | All Providers | Save | Cancel | Discharge Note for Clayton Test - Visit: 1 Payor: TRICA 10002 Tricare East Region

Patient Information
Patient: Clayton Test | MR #: 0001839 | DOB: 03-01-10 | Age: 11y 3d | Case: ST001

Record Information
Date: 03-04-21 | Time: 11:41a | Therapist: JEGR | Assigned: JEGR | Loc: VALFL | Ref: 00011 | Type: Discharge Note | SLT Standard

Discharge Summary
Discharge Date: [Dropdown] | Primary Discharge Reason: [Dropdown] | Reason for Discharge: [Text Area] | Discharge Reason: [Text Area] | Comment: [Text Area]

Services Recommended Post Discharge (S)
[Text Area]

Referral Action Taken to Support Transition (S)
[Text Area]

Right Panel: 3-08-21 - 03-08-21 | List by Group | [Table with columns: e, Description]



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

All About Speech & Language RPM - dat User: JGraepel Station: 10 allaboutspeak.raintreinc.com:10056

Test, Clayton All Providers

Save Cancel Add Edit Delete

Discharge Note for Clayton Test - Visit: 1 Payor: TRICA 10002 Tricare East Region

Patient Information
Patient Clayton Test MR # 0001839 DOB 03-01-10 Age 11y 3d Case ST001

Record Information
Date 03-04-21 Time 11:41a Therapist JEGR Loc VALFL Type Discharge Note Ref 00011 SLT Standard

Load Template Save

History Progress Note Treatment Plan Discharge Charges Tracking

Discharge Summary
Discharge Date 03-08-21 Primary Discharge Reason Met Goals Update POC to cover today's visit

Reason for Discharge

Discharge Reason	Comment

Add row Recommended Post Discharge (S)

Referral Action Taken to Support Transition (S)

3-08-21 - 03-08-21

Description
Daily Note
Daily Note
Daily Note
Daily Note
Daily Note
Daily Note
Daily Note
Re-Evaluation
Daily Note
Daily Note

List by Group

1:08 PM 3/8/2021

All About Speech & Language RPM - dat User: JGraepel Station: 10 allaboutspeak.raintreinc.com:10056

Test, Clayton All Providers

Save Cancel Add Edit Delete

Discharge Note for Clayton Test - Visit: 1 Payor: TRICA 10002 Tricare East Region

Patient Information
Patient Clayton Test MR # 0001839 DOB 03-01-10 Age 11y 3d Case ST001

Record Information
Date 03-04-21 Time 11:41a Therapist JEGR Loc VALFL Type Discharge Note Ref 00011 SLT Standard

Load Template Save

History Progress Note Treatment Plan Discharge Charges Tracking

Discharge Summary
Discharge Date 03-08-21 Primary Discharge Reason Met Goals Update POC to cover today's visit

Reason for Discharge

Discharge Reason	Comment

Add row Recommended Post Discharge (S)

Referral Action Taken to Support Transition (S)

3-08-21 - 03-08-21

Description
Daily Note
Daily Note
Daily Note
Daily Note
Daily Note
Daily Note
Daily Note
Re-Evaluation
Daily Note
Daily Note

List by Group

1:09 PM 3/8/2021

Discharge Reason

Quick find:

- ☒ Met all goals, completed treatment
- ☐ Patient directed discharge
- ☐ Patient was discharged by therapist for too many no show
- ☐ Physician discharge
- ☐ Relocation out of state
- ☐ Too many absences



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

The screenshot shows the 'All About Speech & Language RPM' application window. The title bar indicates the user is JGraepel at Station 10. The main window displays a 'Discharge Note for Clayton Test - Visit: 1 Payor: TRICA 10002 Tricare East Region'. A red circle highlights the 'Save' button in the top left. The left sidebar contains a 'Main Menu' with options like Dashboard, Scheduler, Patient Files, Daily Ledger, Reports / Forms, Engagement Cer, Tables, Utilities, What's Up, and Exit. The main content area is divided into several sections: 'Patient Information' (Clayton Test, MR # 0001839, DOB 03-01-10, Age 11y 3d, Case ST001), 'Record Information' (Date 03-04-21, Time 11:41a, Therapist JEGR, Assigned JEGR, Loc VALFL, Ref 00011), and 'Discharge Summary' (Discharge Date 03-08-21, Primary Discharge Reason Met Goals). The 'Discharge Summary' section includes a 'Reason for Discharge' table and a 'Services Recommended Post Discharge (S)' section with a text box containing a discharge summary. The 'Referral Action Taken to Support Transition (S)' section also contains a text box with a note about documentation sharing. The bottom of the window shows a Windows taskbar with various application icons and a system clock indicating 1:12 PM on 3/8/2021.

22. Can look at other current clients as examples, just ask your CM or other team members.
23. Save and Exit and/or Save and Sign off on the note as you would for the Initial Evaluation; be sure to give the note a read-through to ensure no glaring typos or errors before signing off on the document. This is a last impression a doctor, family, or insurance reviewer will be seeing from us, so take care in your review.



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Discharge AASL Procedure for Speech Language Pathologists

All About Speech & Language RPM - dat User: JGraepel Station: 10 allaboutspeak.raintreinc.com:10056

File Edit Insert Format Paragraph View Tools Help

Discharge Note

Date of Visit:	03-04-21	Therapist:	Jenna Graepel
Patient Name:	Test, Clayton	Referring MD:	Christopher Wilke
Patient #:	0001839		
Date of Birth:	03-01-2010		
Age:	11 years, 3 days	Certification Period:	07-22-20 to 07-22-21

Diagnosis:
F80.89 Other developmental disorders of speech and language

PROGRESS NOTE:

Strengths	Comment
Attention	
Cooperative	
Happy	
Highly Motivated	

Family Strengths	Comment
Comforts Child	
Good Carryover	
Involved	
Observant	
Supportive	

Clayton Test, an eleven year old boy, continues to present with delays across articulation, receptive language, expressive language, and pragmatic language skills. Based on formal and informal assessment, the need for therapeutic support is warranted at this time.

TREATMENT PLAN:
DISCHARGE PLAN:
Discharge date: 03-08-21

Based on informal assessment, parent report, and clinical observations/documentary evidence, skilled speech therapy is no longer warranted at this time. Clayton has made excellent progress over the course of treatment, meeting

Save and Sign Off Save and Mark Reviewed Save and Return to Note Save and Exit

1: 1 Shortcut Alt+S (Alt+S)

All About Speech & Language RPM - dat User: JGraepel Station: 10 allaboutspeak.raintreinc.com:10056

< Save Cancel >

← Enter Password

User ID User Name
JEGR Jenna Graepel

Password
•••••

Signature Comment

✓ Save and Sign Off

Clayton Test, an eleven year old boy, continues to present with delays across articulation, receptive language, expressive language, and pragmatic language skills. Based on formal and informal assessment, the need for therapeutic support is warranted at this time.

TREATMENT PLAN:
DISCHARGE PLAN:
Discharge date: 03-08-21

Save and Sign Off Save and Mark Reviewed Save and Return to Note Save and Exit



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

24. Be sure to give the note a read-through to ensure no glaring typos or errors before signing off on the document. This is a last impression a doctor, family, or insurance reviewer will be seeing from us, so take care in your review.
25. If a parent/caregiver requests to have a note sent to them or another professional, please inform the Front Desk. Please do so by providing client name, parent name, and specific request. They will send documentation to parents or other professionals as requested, ensuring necessary releases of information are on file.

Asking for Reviews:

Positive reviews are what helps grow AASL through internet and social media platforms. In this digital age, people often search out and seek services based on reviews they first read online. Reviews drive continued business to AASL and they are a crucial and influential part of every business' success; given a client's documented experience at our office, this is a firsthand testament that shapes a potential future client's desire to seek services with us. As a part of your direct working relationship with clients and families in the clinic division, we will be working to gather continued reviews for AASL. This is also going to occur alongside the PR and Marketing Division. As clinicians, you know the clients who are compliant, willing, motivated, and pleased with your treatment services, so these are the ideal candidates to ask for a review! Please use the verbiage below as a guide, with subsequent links!

We will also be working across other divisions of the company to also ask for reviews. While the clinic division is the most obvious, given the direct working relationship with a client and family, a client's experience starts when they first call us, so we will be working to gather reviews across all divisions of the company going forward. The mission and vision of the owners and leadership and training they provide is reflected in each individual team member, therefore, while reviews capture one component of a client's experience at AASL, it is reflective of their overall experience at our offices, which the owners take very seriously. By maximizing each child's potential in every life stage, the owners strive to live out the mission and vision of AASL in everything they do.

Reviews are feedback, and while we always aim for a 5-star experience, it may not always occur or be perceived that way by a client, and it's those reviews/experiences that provide continued feedback for AASL to continually strive to be better and live into our ideal scene. As a part of our vision shares: We created AASL because we desire to provide something more to our clients than what is just traditionally provided inside the 4 walls of a therapy room. We created AASL because we desire to provide a level of care where our clients feel like an extension of our family, knowing they are getting the best, skilled, compassionate support for their child. We are dedicated to being a premier therapy company offering a unique approach to therapy that is reflective of the needs of our clients and families; to provide quality and highly skilled speech-language and occupational therapy services, reflecting our passion for the work we do and the personal investment we dedicate to our client's and their families; maximizing each client's potential in a supportive, loving environment throughout each and every life stage.



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

If at the end of the day we are meeting the above, every part of a client's experience at AASL will reflect this, therefore a family should be able to capture this in their feedback and review of us when all is said and done. Reviews close this loop, capturing that completed experience of their time at our office, something we want to capture and share with others so that we can continue to help more amazing children and families! A review from a happy family is one of the greatest compliments we can get and one of the greatest ways they can help us in return, while they are still under our care or when their care concludes. Many families are more than happy and glad to share their experiences, but it does require us to ask them!



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

Email Verbiage to Ask for Reviews

Dear _____,

Hope this email finds you well! (Insert something positive from therapy with their child. A win or milestone as examples. "I am so proud of _____ for graduating from therapy, they have come so far with their _____").

We wanted to ask, given your firsthand experience with our company and the positive feedback we have received from you, would you be able to take a few minutes to share your thoughts by reviewing our company and therapy experience on Google, Facebook, and Yelp.

You can access a Google review by simply googling "All About Speech & Language" (clarify which office to search for S. Tampa vs. Valrico) and then on the right-hand side of the browser window where the company name and maps comes up, you can click on "write a review" and then leave one there. You are also able to add a star rating here as well!

For direct access, please click the links below:

[South Tampa Google Review Link](#)

[Valrico Google Review Link](#)

You can find us on Facebook by searching us if you already follow us, or by clicking here: <https://www.facebook.com/AASLTherapy>

You can also find us directly on Yelp here: <https://www.yelp.com/biz/all-about-speech-and-language-riverview>

Please let me know if you have any questions! We would greatly appreciate you sharing your experience with our company and your therapist(s) on our team. We know it means so much to families searching for therapy providers as they relocate or are beginning their own journey with finding a therapy provider for occupational and/or speech therapy. It means so much to us and we are so grateful for the positive feedback. Your public review is one of the greatest compliments we could get as we strive daily to make a difference in the lives of as many children and families as possible in our local community!

Thank you so very much again!

<Your name>



ALL ABOUT SPEECH & LANGUAGE

Discharge AASL Procedure for Speech Language Pathologists

Closing Client Records Clarification

Following the completion and sign-off of a discharge note, therapists will receive the following prompt:

Patient Chart - 0001839 - Clayton Test - DOB: 03-01-2010 Age: 11 yrs 6 mos

Case Close

Do you want to close related records to case ST001 - Speech Therapy?
Patient 0001839 - Clayton Test.

Roles will be closed.

Yes No

Date	Time	Template	Description	Case Name	Provider Name	Loc	Case	Signed	Posted	Post Rev	Amended
09-01-21	11:35a	LTNOT	Discharge Note	Speech Therapy	Jenna Graepel, MS CCC-S...	VALFL	ST001	NV			
08-24-21	01:41p	INOTE	Interim Note		Madison Jackson, M.S., C...	VALFL	00000	NV			
05-12-21	10:08a	INOTE	Interim Note			VALFL	00000	NV			
03-10-21	09:00a	LTNOT	Initial Evaluation	Speech Therapy	Jenna Graepel, MS CCC-S...	VALFL	ST001	NV			
07-22-20	03:00p	INOTE	Interim Note			VALFL	00000	NV			
07-22-20	02:59p	INOTE	Interim Note			VALFL	00000	NV			

Case Close

Do you want to close related records to case ST001 - Speech Therapy?
Patient 0001839 - Clayton Test.

Roles will be closed.

Yes No

Please continue for instructions on when to select "Yes" versus "No"



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Discharge AASL Procedure for Speech Language Pathologists

1. **When to select “Yes”:** This means the patient is finished with treatment at AASL and will not be returning. Common reasons include but are not limited to the following: meeting goals, relocation, insurance changes, changing facilities, scheduling conflict.
2. **When to select “No”:** This means the patient is finished with treatment at AASL at this time, but there is a possibility they will return. Common reasons include but are not limited to the following: seeking other services, taking a break, long term absence, scheduling conflict. If the parent has made any indication of resuming services, DO NOT close the record. This creates a headache for the administrative/billing departments, and also does not most accurately reflect the child’s long term course of treatment should they return.



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Discharge AASL Procedure for Speech Language Pathologists

PROCEDURE AGREEMENT LOG

Sign and date with your name if you are required to know this policy. By signing you are attesting that you have received, read, and understand the policy, and will apply it as required

(Name)

(Date)