Resident/Patient's Name:	Date of Birth:	
NHS Number:	Hospital Number:	
TRANSFER	R OF CARE BUNDLE; Care Home	
- tick and	d initial all 5 points when complete	
 Has the patient been transf Does the patient EPR/paper 	transfer form; care home to hospital. Therefore with the right documents? Therefore include verbal information from LAS & escort? Therefore include transfer form; ED to care home.	
 Has information exchange of involved in patient's care in 	und to confirm that the patient is a care home resident. occurred with care home manager, ward nurse, professionals cluding relatives and carer? n of the patient's current condition?)
 informed 2-4 days prior to Has the pre-assessment present that the care home been in Has the discharge co-ordin Does the patient require an HNA and DST PEACE document Has a discussion taken pla outcome been finalised? 	greed to the discharge plan and date? (care home to be discharge) rior to discharge been arranged by care home and supported? Informed of discharge date and agreed? Inator had a conversation with patients and relatives? It is a conversation with patients and relatives?)
Has transport been arrangeHave all the required docur		
CALL TO FOLLOW UP Has a follow up call been ma Have any discharge issues ic	ade with 24-48 hours? dentified by the care home been follow up?	
	this Discharge Bundle is filed in the patient notes in the discharge Co-ordinator keeps a copy.	