

Name  
Address

Date

Re: Resident

Dear,

I am writing to advise you that the Care Plan Team has determined that \_\_\_\_\_ no longer requires the specialized treatment provided by this facility, and that \_\_\_\_\_'s needs could be met in a private nursing home setting or community based services. The attending physician and psychiatrist have been consulted and agree with this assessment.

Please find enclosed a notice of transfer or discharge form. This will serve as noticed that \_\_\_\_\_ will be transferred or discharged within thirty days, or as soon thereafter as a suitable placement has been found. We will not discharge \_\_\_\_\_ until we are agreed on the placement. If you wish to assist in the transfer process, please feel free to contact me. If you disagree with this decision, you may request a hearing by following the instructions on the enclosed form.

Sincerely,

Social Worker