



Transitions in Patient Care

October 15, 2012

Objective: To ensure that all residents and fellows gain the knowledge, skills, and attitudes necessary to ensure that patients safely transition from one provider to another and from one clinical setting to another.

Policy:

1. Each program will develop standardized procedures for transitions in patient care that are used throughout the department or division for the safe hand-off of patients between providers and between locations in care; *as are relevant to the specialty.*
2. All residents will receive education in the elements of safe patient transitions and in the program procedure for safe transitions.
3. Each program will design their educational experiences and clinical coverage schedules to minimize patient hand-offs while still respecting all Duty Hours Requirements.
4. Assessment of the hand-off communication skills of each resident will be part of the comprehensive evaluation process for the resident.
5. The program will have procedures in place that allow for faculty to monitor the hand-off process at least intermittently.
6. Each program will have a Transitions in Patient Care policy or procedure that outlines its approach to the above expectations.

Oversight: It will be the responsibility of the GME Council to ensure that each sponsored program meets the expectations of this policy. Further, the GME Council will undertake a comprehensive, critical review of institutional adherence to the Transitions in Patient Care policy and the residents' abilities to provide consistent, safe patient hand-offs at a minimum frequency of annually.

References:

ACGME Common Program Requirements, July 2011.

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A blue ink signature of Jill Moormeier, M.D. is written over a circular stamp.

JILL MOORMEIER, M.D.
Associate Dean,
Graduate Medical Education

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