

USF Health – Morsani College of Medicine
GRADUATE MEDICAL EDUCATION POLICY & PROCEDURE

Title: Transitions of Care	No.: GME-231
Effective Date: 9/2014	Approved: 2/2019

Scope:

The Office of Graduate Medical Education and all accredited post-graduate medical training programs (i.e., residency or fellowship) and non-accredited clinical fellowship programs at the University of South Florida Morsani College of Medicine.

Background:

As required by Section III.B.3 of the ACGME Institutional Requirements, the Sponsoring Institution must facilitate professional development for core faculty members and residents/fellows (hereinafter “Resident(s)”) regarding effective transitions of care. Additionally, the Sponsoring Institution, in partnership with its ACGME-accredited programs, must ensure and monitor effective, structured patient hand-over processes to facilitate continuity of care and patient safety at participating sites.

Definition:

Hand-over (or hand-off) refers to the transfer of information and of responsibility for patient care from one practitioner to another.

Policy:

Each training program must have a policy that addresses transitions of care that is consistent with the ACGME institutional and common program requirements and the USF GME policy.

Each training program must document and monitor a structured hand-over process(es) that promotes patient safety and care continuity and is consistent with the setting and type of care being transitioned [CPR VI.E.3.b].

All residents and faculty members must be knowledgeable about and be trained in the use of the program’s transition of care policy [IR III.B.3].

Each training program must design clinical assignments that optimize transitions in patient care with respect to safety, frequency, and structure [CPR VI.E.3.a].

Each training program must maintain, communicate, and make accessible schedules of attending physicians and residents responsible for patient care [CPR VI.E.3.d]. All members of the health care team of attending physicians and residents currently responsible for each patient’s care must have access to one another’s schedules and contact information.

Each training program must ensure that residents are competent in communicating with team members in the hand-over process [CPR VI.E.3.c].

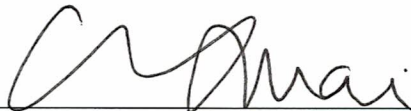
All written or electronic hand-over documents must be compliant with HIPAA and hospital policy.

Procedure:

Key safety practices for hand-overs include:

- Providing up-to-date information regarding the patient's care, treatment and services, condition, and any recent or anticipated changes.
- Using clear language and avoiding the use of abbreviations or terms that can be misinterpreted.
- Using interactive communication, which provides the opportunity for the receiver of the information to ask questions or clarify specific issues.
- Utilizing effective communication techniques. Implement and utilize read-back and check-back techniques. Limit interruptions.
- Utilizing technology, such as electronic records, to enhance communication and support the timely and efficient transmission of patient information.

APPROVED:



Senior Associate Dean, Graduate Medical Education/DIO

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Revised: 2/2019