

Policies and Procedures

<i>Section:</i> School of Medicine		<i>NO.</i>				
<i>Chapter:</i> Cardiovascular Disease Fellowship	<i>Issued:</i> 10-18-2019	<i>REV. A</i>	<i>REV. B</i>	<i>REV. C</i>		
<i>Policy: Transitions of Care</i>		Page 1 of 2				

PURPOSE

To promote continuity of care and patient safety in residents' learning and working environment, the Accreditation Council for Graduate Medical Education (ACGME) requires that programs and sponsoring institutions minimize the number of patient care transitions, implement a structured and monitored handoff process, train residents for competency in handoffs, and make schedules readily available that list residents and attending physicians responsible for each patient's care. In addition to resident-to-resident patient transitions, residents must care for patients in an environment that maximizes effective communication among all individuals or teams with responsibility for patient care in the healthcare setting.

SCOPE

This policy applies to all Creighton University **Cardiovascular Disease Fellows**.

POLICY

This policy applies to all situations where there is hand-over of responsibility for patient care from one trainee/provider to another. This includes check-out to on-call fellow from the rounding, invasive lab (EP/Cath lab) fellows on a daily basis (4.30-5.00 PM), check out from on call fellow to the rounding teams in the morning (7-7.30 AM), transfers between one clinical care setting to another (clinic to hospital or vice versa), scheduled change of fellows (e.g. end-of-rotation switches), transfer of patient from procedure lab to a different floor. This policy also applies to situations where fellows are unable to perform or complete their duties due to fatigue, sickness or other emergencies.

Definition: A handoff is defined as the communication of information to support the transfer of care and responsibility for patient/patients from one provider/trainee to another.

- All trainees are required to provide appropriate hand off to team/fellow/faculty assuming care of the patients in all situations where there is a transition of care between 2 trainees (most commonly but not exclusively the above situations).
- While a face to face or verbal check out (phone) is preferred, an electronic check out via the Creighton/CHI secure email is acceptable.
- Trainees are encouraged to hand off at times where interruptions are minimum and encouraged to ask questions or seek clarifications on electronic check out where necessary.
- All rounding fellows are required to generate an EPIC discharge letter to the primary care team at sign off or discharge of patient from hospital.
- The information should include patient identifiers, diagnoses and acuity, recent major events, outstanding tasks, and anticipated changes that may require specific interventions.
- All written or electronic Hand-over documents must be compliant with institutional HIPAA policy.

Policies and Procedures

<i>Section:</i> School of Medicine		<i>NO.</i>				
<i>Chapter:</i> Cardiovascular Disease Fellowship	<i>Issued:</i> 10-18-2019	<i>REV. A</i>	<i>REV. B</i>	<i>REV. C</i>		
<i>Policy: Transitions of Care</i>		Page 2 of 2				

Health Care appointments

Process for urgent/emergent health care appointments.

The process for ensuring patients safety and continuity of care for urgent/emergent health care appointments should follow the same hand off process as for fellows needing to leave due to excessive fatigue or illness or family emergency.

Process for routine health care appointments

It is recognized that many routine health care appointments need to occur during the work day. In recognition of the primacy of patient welfare in these situations and the impact on the program's other fellows needing time off for these appointments should give the program 30-days notice to their program.

Program responsibilities

- Provide education on patient safety, effective transition of care practices and monitor processes to improve trainee competence and patient safety
- Design clinical assignments to minimize the number of transitions in patient care
- Communicate schedules of attending physicians and fellows currently responsible for care (daily email, master schedules, call list on amion, Qgenda and cardio on call links)
- Provide reasonable alternate coverage in the event of unavailability of trainees due to sickness, fatigue or other emergencies.

REFERENCES

GMEC Transition of Care Subcommittee, Draft/working document, May 2013

<http://www.acgme.org/Portals/0/ResidentSurveyKeyTermsContentAreas.pdf>

AMENDMENTS OR TERMINATION OF THIS POLICY

Creighton University reserves the right to modify, amend or terminate this policy at any time.

The GME policy supersedes all program level policies regarding this area/topic. In the event of any discrepancies between program policies and the GME policy, the GME policy shall govern.