

Policies and Procedures

<i>Section:</i> School of Medicine		<i>NO.</i>				
<i>Chapter:</i> Family Medicine Obstetrics Fellowship	<i>Issued:</i> 7/1/2019	<i>REV. A</i>	<i>REV. B</i>	<i>REV. C</i>		
<i>Policy: Transitions of Care</i>		<i>Page 1 of 2</i>				

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 **Family Medicine Obstetrics Fellows**.

POLICY

TRANSITION OF CARE RESPONSIBILITIES

1. Receive sign out from the OB/Gyn attending at 7 am at the start of their shift.
2. Give sign out to the OB/Gyn attending at the end of their shift.
3. Attendings and the Fellow will use ipass to standardize transitions in care.
4. 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 residents needing to leave due to excessive fatigue or illness or family emergency.
5. 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 residents/fellows needing time off for these appointments should give the program 3 days' notice to their program.

Call Responsibilities

Primary Call

Residents/Fellows who are asked to work more than 24 + 4 hours per shift, are approaching the 80 hour work week, or risk other potential violations are to notify the PD prior to exceeding the Duty Hour limits.

Emergency Back Up

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To provide back-up support in the event an attending assigned to call is unable to fulfill his/her duties or a code victory is called for a mass casualty, each night there will be a FM Resident/Fellow on Emergency Back Up.

Guidelines for Emergency Back Up:

1. The Fellow on home call must be available to come to the hospital if needed within one hour
 - a. No duty hours are logged unless a fellow is called in to work.
2. If a Resident/Fellow is unable to fulfill their call, he/she must notify the attending immediately.

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.