

## *Policies and Procedures*

<i>Section:</i> <b>School of Medicine</b>		<i>NO.</i>				
<i>Chapter:</i> <b>Gastroenterology Fellowship</b>	<i>Issued:</i> <b>12/14/2017</b>	<i>REV. A</i> <b>10/17/2019</b>	<i>REV. B</i>	<i>REV. C</i>		
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### **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 **Gastroenterology fellows**.

### **POLICY**

#### ***Transition-of-care/Handoff policy:***

We always strive to meet the guidelines and to establish measures that ensure excellent patient care and follow-up. Poor communication represents a very important root cause of sentinel events, medical misses, and near-misses. With that in mind, our GI department started a systematic approach to enhance our communication and help in the handoff process. This should reflect positively both in continuity of care and patient safety.

This process occurs on daily, weekly and monthly bases as follow:

A team member, usually a fellow or an attending, would send daily secure email per campus to all staff members (including mid-levels and the Gastroenterology Office nurse manager) of the GI department who are involved in patient's care at a specific campus. Typically, this is followed by a direct phone call to the on-call person to discuss selected patients who might need special attention.

While on call, a team member, usually a fellow or an attending (who is on call), would send weekly (on Sunday evening) secure email per campus to all parties involved in patient's care. This email is directed to the patient care team members who would assume their care on Monday morning. Typically, this is followed by a direct phone call on Monday morning to the assigned person to discuss selected patients who might need special attention.

Fellows rotate at different campuses on monthly basis. At the end of each month, handoffs occur between fellows by using the secure email and followed by phone calls to discuss each case.

The patient's information that should be sent and discussed at hand off includes:

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Patient demographics

Concise summary of past medical history

The reason for the admission, reason for the consult, hospital course, the anticipated clinical course and plans of care

Pending labs/radiographic studies and other pending results

Other important patient information not listed above that affects the patient's well-being.

In addition to the above, a list with the names and location of all patients being seen by our inpatient GI service is available to all GI staff in our electronic system, EPIC. Secure staff messaging through EPIC is done between providers when an inpatient is being transitioned to outpatient care so that pending lab results and radiology can be followed up. For unassigned patients who need follow up, the fellow or attending physician follow up with them in their clinic and appointments are made at the time of discharge. The primary care physician is also notified of patient's progress and updated on critical test results.

### **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 residents needing to leave due to excessive fatigue or illness or family emergency.

#### Process for routing 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, residents/fellows needing time off for these appointments should give the program 7 days' notice to their program.

### **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**

Crichton 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.*