

Policies and Procedures

<i>Section:</i> School of Medicine (Phoenix)		<i>NO.</i>				
<i>Chapter:</i> Diagnostic Radiology Residency	<i>Issued:</i> 10/1/2020	<i>REV. A</i>	<i>REV. B</i>	<i>REV. C</i>	<i>REV. D</i>	<i>REV. E</i>
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PURPOSE

In compliance with the ACGME Institutional and Common Program Requirements, it is the goal of Creighton University to outline the process for performing transitions of care for the residents in the Diagnostic Radiology Residency Program at Creighton University School of Medicine (Phoenix).

SCOPE

This policy applies to all residents in the Diagnostic Radiology Residency Program at Creighton University School of Medicine (Phoenix).

POLICY

The departmental policy is outlined below, along with a link to access Creighton University GME policy.

The policy intent is to ensure seamless transition in physician coverage in the radiology department. The radiology residents understand the importance of continuous physician presence/availability for effective, high quality patient health care delivery. The covering radiology resident shows up on-time or prior to start of their shift.

At the change of shift, residents and supervising faculty in the department are expected to follow the procedure below when transitioning care:

PROCEDURE

The resident to be relieved of duty remains available until the following shift staff/resident arrives within the department. Hand-off typically is resident-to-resident, however occasionally will be resident to attending or attending to resident. The same process is utilized regardless.

1. With all hand-offs for call shifts with residents there is at both sites completion of a **“Transitions-of-Care (TOC), form”**
 - This is reviewed by the provider who is going off shift, with the incoming provider, and all parameters are checked off. Both providers sign/initial the form for that day.
 - The clipboard containing TOC forms is left in a central location that is designated for it within the department.
 - These forms are collected monthly and batched in a scanned report that allows for documentation and tracking of the hand-offs at both institutions and will be placed on the internal drive in the department by the designated department administrator. This allows for review of our internal processes and data to analyze for success rate and possible improvement as needed.
 - Parameters included on the TOC form are for pending procedures, “stat” exams, protocols, pending communications with clinicians or other personnel.
2. At each shift and rotation transition the oncoming radiology resident will call or meet in person with the supervising faculty to confirm they are on site, have been informed of any necessary

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patient care information from the outgoing resident and confirm their expected duties and priorities for that shift with the supervising faculty.

3. Specific only to Valleywise Health Radiology rotations, there is always a hand-off of the AZCOM phone to the arriving resident/staff so that at all times radiology can offer consults and communicate for any necessary trauma or questions from other internal health care management teams.

CHANGES IN COVERAGE/SCHEDULE

1. If there is a change in coverage, the arriving resident will alert the general radiology control desk, CT department, and hospital operator as to their reading location and contact number. The coverage change must be documented on the resident call schedule.
2. In the circumstance of a resident running late, telephone communication must take place between that resident and the current covering resident they would be relieving and the supervising faculty, and arrangements for continuous coverage **MUST** be made.
3. In the event of an emergency, excessive fatigue, sudden illness or other unexpected circumstances, the scheduled on-call resident must contact the chief resident to decide for alternative coverage and may be required to cover on alternative dates.
4. Health Care appointments: Residents must be given the opportunity to attend medical, mental health, and dental care appointments, including those scheduled during their working hours. The intent of this requirement is to ensure that residents have the opportunity to access medical and dental care, including mental health care, at times that are appropriate to their individual circumstances.
 - Process for routine health care appointments. It is recognized that many routine health care appointments need to occur during the workday. In recognition of the primacy of patient welfare in these situations and the impact on the program's other residents needing time off for these appointments, a resident should give the program as much advance notice as possible but a minimum of one-week notice is required.
 - 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, illness, or family emergency.

REFERENCES

Creighton University GME Policy link:

https://medschool.creighton.edu/sites/medschool.creighton.edu/files/toc_policy_gmec_approved_8.13

AMENDMENTS OR TERMINATION OF THIS POLICY

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

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