



UCLA GME TRANSITION OF CARE POLICY

PURPOSE

To establish protocol and standards in order to ensure the quality and safety of patient care when transfer of responsibility occurs during duty hour shift changes as well as when other scheduled or unexpected circumstances occur.

SCOPE

This policy applies to all UCLA-sponsored ACGME and non-ACGME accredited residency and fellowship programs in all clinical learning environments.

DEFINITIONS

Transition of care is an interactive process involving the communication of specific and essential patient information from one caregiver to another.

POLICY

- I. Each training program must create a specific policy for transitions of care. This policy must clearly articulate an effective, structured handover process designed to facilitate both the continuity of care and patient safety. The specific policy for handoffs must be readily available and accessible for use by the program's trainees.
- II. All residents/fellows and faculty members must be knowledgeable about, and be trained in the use of the transition of care policy.
- III. Clinical assignments should be designed to minimize the number of transitions in patient care.
- IV. 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. All call schedules must be provided to the hospital operators
- V. All patients for whom a resident or fellow is responsible must be included in the handoff.

PROCEDURE

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FORMS

UCLA GME TRANSITION OF CARE POLICY TEMPLATE

REFERENCES

ACGME REQUIREMENTS (Common Program Requirements VI.B):

- Programs must design clinical assignments to minimize the number of transitions in patient care. (CR VI.B.1)
- Sponsoring institutions and programs must ensure and monitor effective, structured handover processes to facilitate both the continuity of care and patient safety. (CR VI.B.2)
- Programs must ensure that residents are competent in communicating with team members in the handover process. (CR VI.B.3)
- The sponsoring institution must ensure the availability of schedules that inform all members of the health care team of attending physicians and residents currently responsible for each patient's care. (CR VI.B.4)

CONTACT

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REVISION HISTORY

Effective Date: Review Date: Revised Date: (add approval dates for all policy updates) Approved by GMEC September 22, 2014

APPROVAL

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