HAND-OVER AND TRANSITIONS OF CARE POLICY

Policy Title: WSU College of Medicine GME Hand-over and Transitions of Care Policy

Applies to: WSU Elson S. Floyd College of Medicine Graduate Medical Education (GME) Sponsoring Institution and all accredited post-graduate medical training programs (i.e. residency or fellowship) and non-accredited clinical fellowship programs sponsored by the College of Medicine.

Date: December 20, 2022

1.0 Policy Statement:
It is the WSU College of Medicine GME policy to establish standards for effective hand-overs and transitions in care for sponsored residency and fellowship programs that complies with applicable accreditation guidelines to facilitate both continuity of care and patient safety.

2.0 Definitions
Attending physician: The single identifiable physician ultimately responsible and accountable for an individual patient’s care, who may or may not be responsible for supervising Trainees.

Transitions of care: Also referred to as a hand-over, the relaying of complete and accurate patient information between individuals or teams in transferring responsibility for patient care in the health care setting. This includes:

- Change in level of patient care, including inpatient admission from the ambulatory setting, outpatient procedure, or diagnostic area
- Temporary transfer of care to other healthcare professionals within procedure or diagnostic areas
- Transfer of a patient to or from a critical care unit
- Transfer of care to other healthcare professionals within procedure or diagnostic areas
- Discharge, including discharge to home or another facility such as skilled nursing care
- Change in provider or service change, including resident or fellow sign-out, inpatient consultation sign-out, and rotation changes for residents or fellows

3.0 Responsibilities
GMEC through the DIO
GME Hand-over and Transitions of Care

4.0 Procedures

Each training program must design schedules and clinical assignments to maximize the learning experience for residents and fellows as well as to ensure quality care and patient safety while adhering to general institutional policies concerning transitions of patient care within the context of other clinical and educational work hour standards.

All training programs must have a specific policy for hand-overs and transitions of care that clearly articulate an effective, structured hand-over process to facilitate both continuity of care and patient safety and must provide instruction to their residents and fellows in the conduction of safe and effective handoffs. Programs must systematically monitor the hand-over process to ensure competency in the transition of care process.

Each program must develop components ancillary to this institutional transition of care policy that integrate specifics from their specialty field. All sponsored training programs must:

- provide education in safe and effective transitions of care in the program’s curriculum for both attending physicians and residents and fellows
- design clinical assignments to optimize transitions of patient care, including their safety, frequency, and structure
- ensure and monitor effective, structured hand-over processes to facilitate both continuity of care and patient safety.
- ensure that residents and fellows are competent in communicating with team members in the hand-over process and provide the information needed for timely, accurate, complete and effective transitions
- maintain and communicate schedules of attending physicians and residents and fellows currently responsible for care
- ensure continuity of patient care, consistent with the program’s policies and procedures in the event that a resident or fellow may be unable to perform their patient care responsibilities.
- provide an opportunity for residents and fellows to both give and receive feedback from each other or attending physicians about their handoff skills.

5.0 Related Policies

6.0 Revision History

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<th>GMEC Approval:</th>
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<td>Revision/Review Date(s)</td>
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Responsible Office: WSU College of Medicine Sponsoring Institution

Policy Contact: Designated Institutional Official

Supersedes: N/A