

Name of Policy: Transitions of Care		 Review/Revision date: 09/05/23 Original Effective date: 06/07/11	
Policy Number: 3364-86-042-00			
Approving Officer: Dean, College of Medicine and Life Sciences			
Responsible Agent: DIO (Designated Institutional Official)			
Scope: UT College of Medicine Residents			
	New policy proposal	<u>X</u>	Minor/technical revision of existing policy
	Major revision of existing policy		Reaffirmation of existing policy

POLICY

Residency and Fellowship programs sponsored by The University of Toledo must design clinical assignments to optimize transitions in patient care. This should include instruction on how transitions are structured, when they should occur and the culture of safety surrounding these events.

PURPOSE

Transitions of care are critical elements in patient safety and must be organized such that complete and accurate clinical information on all involved patients is transmitted between the outgoing and incoming teams/individuals responsible for that specific patient or group of patients.

PROCEDURE

1. Programs must design clinical assignments to optimize transitions in patient care.
2. Sponsoring institutions and programs must ensure and monitor effective, structured hand-over processes to facilitate both continuity of care and patient safety at participating sites. Pertinent elements evaluated should include exam findings, laboratory data, any clinical changes, family contacts, and any change in responsible attending physician.
3. Programs must ensure that residents are competent in communicating with team members in the hand-over process.
4. Programs and clinical sites must clearly specify the mechanisms and scheduled intervals for structured transitions at each site.
5. Scheduling of on-call shifts should be optimized to ensure a minimum number of transitions, and there should be documentation of the process involved in arriving at the final schedule. The specifics of these schedules will depend upon various factors, including the size of the program, the acuity and quantity of the workload, and the level of resident education.
6. Each program must have policies and procedures in place to ensure coverage of patient care and ensure continuity of patient care. Programs must make certain that residents are educated in the importance of structured transitions to ensure both patient safety and resident well-being.

7. All residents and faculty members must demonstrate responsiveness to patient needs that supersedes self-interest. This includes the recognition that under certain circumstances, the best interests of the patient may be served by transitioning that patient's care to another qualified and rested provider.

Approved By: <u>/s/ Shaza Aouthmany, M.D.</u> Chair, Graduate Medical Education Committee <u>/s/ Imran Ali, M.D.</u> Dean, College of Medicine and Life Sciences <i>Review/Revision Completed by:</i> <i>Graduate Medical Education Committee</i>	Policies Superseded by This Policy: • None Initial effective date: 6/7/2011 Review/Revision Date: Reviewed 6/4/13, Reviewed 6/2/15, Revised 6/6/17, Revised 9/5/23 Next review date: 6/2026
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