



## Transition of Care

gme-adm-0032

### About This Policy

**Effective Dates:**

01-15-2014

**Last Updated:**

08-31-2022

**Responsible University Administrator:**

Senior Associate Dean for GME

**Policy Contact:**

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### Scope

This policy applies to all Indiana University School of Medicine (IUSM) Graduate Medical Education (GME) resident physicians.

### Policy Statement

Transition of care or handoff is defined as the communication of information to support the transfer of care and responsibility for a patient or group of patients from one provider to another. The transition of care process is an interactive communication process and involves the communication of specific and essential patient information from one caregiver to another.

Transition of care occurs under the following conditions:

1. Change in level of patient care, including inpatient admissions from an outpatient procedure or diagnostic area or transfer to or from a critical care unit.
2. Temporary transfer of care to other healthcare professionals within procedure of diagnostic areas.
3. Discharge to home or another facility such as an extended skilled nursing care facility.
4. Change in provider or service change including shift change for nurses, resident sign-out or rotation changes for residents.

The requirements for transition of care include:

1. Programs must design clinical assignments to minimize the number of transitions in patient care, including their safety, frequency, and structure.
2. Programs, in partnership with their Sponsoring Institutions, must ensure and monitor effective, structured hand-over processes to facilitate both continuity of care and patient safety.
3. Programs must ensure that residents are competent in communicating with team members in the hand over process.
4. Programs and clinical sites must maintain and communicate schedules of attending physicians and residents currently responsible for care.

5. Each program must ensure continuity of patient care, consistent with the program's policies and procedures referenced in ACGME Common Program Requirement VI.C.2, in the event that a resident may be unable to perform their patient care responsibilities due to excessive fatigue or illness, or family emergency.

The Sponsoring Institution must:

1. Facilitate professional development for core faculty members and residents/fellows regarding effective transitions of care; and,
2. Ensure that participating sites engage residents/fellows in standardized transitions of care consistent with the setting and type of patient care.

## **Reason For Policy**

The purpose of this policy is three-fold:

1. To define transition of care (hand-offs, handovers, sign-out, or changeover) within a graduate medical education program;
2. To establish criteria to ensure the quality and safety of patient care when transfer of responsibility occurs;
3. To define the standards for program assessment of the transition of care protocol within individual programs.

## **Procedure**

Please see "Procedures for Transitions of Care" in the Related Information section.

## **Definitions**

ACGME is the Accreditation Council for Graduate Medical Education.

A resident is an IUSM resident or fellow, or a non-IUSM resident or fellow electively rotating through IUSM and provides clinical care as part of a GME program.

## **Implementation**

The Designated Institutional Official (DIO) for GME is responsible for implementation of this policy.

## **Oversight**

Policy authority for this document resides with the Graduate Medical Education Committee. The DIO and the Graduate Medical Education Committee are responsible for oversight. This policy will be reviewed every three years or more often if deemed necessary.

## **History**

1. Policy gme-adm-0032 approved by GMEC and published on 15 January 2014.
2. Policy reviewed, updated, and approved by GMEC on 27 November 2017.
3. Policy updated for formatting 05 March 2018.
4. Reapproved by GMEC on 18 April 2018.
5. Policy updated for formatting 27 June 2018.
6. Policy updated 31 August 2022.
7. Policy updated for formatting 04 November 2022.