

Policy of the Graduate Medical Education Committee
Section: Educational Administration
Subject: Transition of Care and Handoff
Number: 3.800
Date Developed: 1/14/2013
Last Review/Revision: 5/2014, 5/2017; Legal Review: June 13, 2017
ACGME Requirements: Institutional III.B.3¹; Common VI.E; VI.E.3. (a- e)² CLER Care Transitions Pathways 1 through 6³

Purpose and Scope:

To support the continuity and safety of patients by providing a standard framework for care transitions occurring during duty hour shift changes, location or service transfers, or other scheduled or unscheduled circumstances when the patient moves from one stage of care to another stage with new care personnel. This policy applies to all Residents and Fellows practicing medicine within the University of Arkansas for Medical Sciences Graduate Medical Education programs.

Policy:

Residency and fellowship programs (“programs”) must:

- Work with clinical sites to optimize hand-offs while being mindful of the site’s handoff policies.^{2,3}
- Design clinical assignments with clinical sites to optimize hand-offs overall.^{2,3}
- Maintain a schedule of attending physicians and residents responsible for care.^{2,3}
- Ensure hand-offs meet the essence of SBARC (See below)
- Teach and assess housestaff on safe hand-off practices.¹
- Document the evaluation of handoff procedures in the Annual Program Evaluation.^{1,2,3}
- Ensure continuity of care in case a resident becomes fatigued or ill.^{2,3}

The institution offers professional development on these standards as part of Institution for Healthcare Improvement mandatory training modules, PS104, Lesson 3.^{1,2,3}

Procedure:

At each transition or handoff, a resident or fellow should seek to meet the *essence* of SBARC as follows:

<u>SITUATION</u>	<u>BACKGROUND</u>	<u>ASSESSMENT</u>	<u>RECOMMENDATION</u>
Patient name Medical record number Admitting physician Overall situation	Recent procedures Changes in condition Changes in treatment Current medication Current Status Current Vitals Allergies Recent lab tests	Diagnosis Status Level of acuity Code status	Next Actions Anticipated procedures Outstanding tasks Outstanding tests Anticipated changes
<u>CLARITY</u>			
Receiver asks questions, repeats handoff information Face-to-Face in a Quiet Place (PREFERRED). No texting.			

Definitions:

Clinical Sites: CAVHS, UAMS Medical Center, Children's Hospital, Baptist Hospital

Clinical Learning Environment (CLE): The intersection of organized patient care and organized medical education together with their respective shared functions, goals and strategies. Typically the CLE is where residents learn to be independent physicians and/or surgeons with real patients in a real clinical setting.

Handoff - the communication of information to support the transfer of care and responsibility for a patient/group of patients from one provider to another.

SBAR – Situation Background Assessment Recommendation is the handoff framework adopted by GME to standardize handoff and improve transitions in the CLE.

Transitions of care - A daily event in the clinical setting including change in level of patient care, admission from the ED, outpatient clinic, or outpatient procedure area, discharge to home or another facility, and at housestaff rotation or shift changes.