

Policy Name: Transitions of Care	
Originating Officer (Title), Council, or Committee: Shelly Monks, Vice President and Chief Academic Officer, Designated Institutional Official	Effective Date: 07/23/2024
Approved By: Graduate Medical Education Committee (GMEC)	Last Reviewed Date: 07/23/2024
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1.0 Scope:
1.1 Applicable Entities:

This policy applies to Texas Health Resources.

1.2 Applicable Departments:

This policy applies to all Texas Health Graduate Medical Education residents and fellows (hereafter referred to as Trainees) employed by Texas Health Resources (“Institution”).

2.0 Purpose:

- 2.1 To provide guidelines and define the Graduate Medical Education policy for Transitions of Care at Texas Health sponsored training programs. The aim is to ensure the quality and safety of patient care when transfer of responsibility occurs during shift changes, transfer of the patient from one level of acuity to another and other scheduled or unexpected circumstances. This policy is in line with the most up-to-date ACGME requirements.

3.0 Policy Statements:

- 3.1 At Texas Health, we are committed to creating a workplace where diversity is celebrated, and inclusion exists at all levels. As such, Texas Health does not tolerate discrimination in any form or any behaviors that are incompatible with our core values – Respect, Integrity, Compassion, and Excellence and Our Texas Health PromiseSM.

4.0 Policy Guidance:

- 4.1 Texas Health, as the sponsoring institution, will:
- 4.1.1 Facilitate professional development for faculty members and Trainees regarding effective transitions of care.
 - 4.1.2 In partnership with its sponsored ACGME-accredited program(s), ensure and monitor effective, structured patient transitions of care processes to facilitate continuity of care and patient safety.

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- 4.2 Each ACGME-accredited program (“Program”), sponsored by Texas Health, must have a policy addressing transitions of care, that is consistent with the ACGME institutional, common, and program-specific requirements as well as Texas Health Discharge/Transition Planning Policy.
- 4.2.1 Each Program must design clinical assignments to optimize transitions in patient care, including their safety, frequency, and structure.
- 4.2.2 Each Program, in partnership with Texas Health, must document and monitor a structured transitions in care process(es) that promotes patient safety and care continuity and is consistent with the setting and type of care being transitioned.
- 4.2.3 All Trainees and faculty members must be knowledgeable of the transitions of care processes. Trainees must demonstrate competence in communicating with team members in the transition of care process. Trainee competence may be evaluated through:
- a. Direct observation by supervising faculty during the transitions of care process;
 - b. Formal evaluation by the supervising faculty; and/or
 - c. Multi-source evaluation by the other participant in the transitions of care process.
- 4.2.4 Each Program and clinical sites must maintain and communicate schedules of faculty and Trainees currently responsible of care.
- a. Supervising faculty will be scheduled in a way that ensures availability for appropriate level of supervision for the scheduled Trainees.
- 4.2.5 Each Program must ensure continuity of patient care, consistent with the program’s standard operating procedures in the event that a Trainee may be unable to perform their patient care responsibilities due to excessive fatigue or illness, or family emergency.
- a. There are circumstances in which Trainees may be unable to attend work, including but not limited to fatigue, illness, family emergencies, and parental leave. Each Program must allow an appropriate length of absence for Trainees unable to perform their patient care responsibilities.

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- b. Each Program will have and maintain a standard operating procedure for the transitions of care process to ensure coverage of patient care.
- c. This policy must be implemented without fear of negative consequences for the Trainees who is or was unable to provide the clinical work.

4.3 All transition in care documents, written and/or electronic, must be compliant with both HIPAA and Hospital policy.

5.0 Definitions:

5.1 Transitions in care - The relaying of complete and accurate patient information between individuals or teams in transferring responsibility for patient care in the health care setting.

5.2 DIO - Designated Institutional Official

5.3 ACGME - Accreditation Council for Graduate Medical Education

5.4 Graduate Medical Education Committee (GMEC) - Responsible for policy and oversight Graduate Medical Education.

5.5 Resident/Fellow - Trainee in a sponsored Graduate Medical Education program.

6.0 Responsible Parties:

6.1 Graduate Medical Education Committee

6.1.1 Implementation and oversight of the policy is the responsibility of the Program Director and the Graduate Medical Education Committee.

7.0 External References:

7.1 [Current ACGME Policies and Procedures](#)

7.2 [Discharge Transition Planning Policy](#)

8.0 Related Documentation and/or Attachments:

Not Applicable

9.0 Required Statements:

Not Applicable