LEHIGH VALLEY HEALTH NETWORK System Manual

GME - TRANSFER OF PATIENT CARE - DEPARTMENT OF EDUCATION (DOE)

SCOPE:

Lehigh Valley Health Network (LVHN) adopts this policy for the following selected licensed entities:				
\boxtimes	Lehigh Valley Hospital		LVHN Surgery Center – VNA Road	
	Lehigh Valley Hospital – Dickson City		Lehigh Valley Home Care	
	Lehigh Valley Hospital – Hazleton		Lehigh Valley Hospice	
	Lehigh Valley Hospital – Pocono		Pocono VNA / Hospice	
	Lehigh Valley Hospital – Schuylkill		Lehigh Valley Home Care – Schuylkill	
	LVHN Children's Surgery Center		Lehigh Valley Home Care – Hazleton	
	LVHN Surgery Center – Tilghman		Transitional Skilled Unit	
Medical and Dental Posident and Fallows Physicians				

Medical and Dental Resident and Fellows Physicians

LINKS TO ATTACHMENTS: N/A

LIST OF ASSOCIATED FORMS: N/A

DISCLAIMER:

This policy and the implementing procedures are intended to provide a description of recommended courses of action to comply with statutory or regulatory requirements and/or operational standards. It is recognized that there may be specific circumstances, not contemplated by laws or regulatory requirements that make compliance inappropriate. For advice in these circumstances, consult with the Departments of Risk Management and/or Legal Services, as appropriate.

REVIEW:

Origination: 12 / 2015 Review / Revision: 12 / 2018

Approved by the Graduate Medical Education Committee

Approved by: Joseph Patruno (Physician)	Approval Date: 09/20/2022
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I. POLICY:

To guide the practices of patient transfer of care to optimize patient safety and quality of care. Transfers include shift change, end of rotation team transfers, change of services, admissions and discharges as well as other transfers of patient care.

Each program may create specific policies that supplement this institutional policy to adapt it to their specific program needs that are consistent with ACGME and LVHN GME policy.

- Elements of patient care transfer include identification of the patient, attending physician, current condition, actions to be taken, and areas for heightened observation that might require intervention.
- Planning for transfer of care must incorporate adequate time to complete the transfer, allow for questions and ensure adherence to duty hour regulations.
- Programs must define specific methods to communicate this information which may include verbal sign out, written communication, or utilization of the functions within the EMR and may involve two-way communication with the opportunity for clarification.
- Programs should develop methods of education to teach these skills. Faculty supervision of the handover process may be direct or indirect after the graduate trainees have been observed and deemed competent in handoff procedures.

II. DEFINITIONS: N/A

III. PROCEDURE: N/A

IV. REFERENCES: N/A

V. ATTACHMENTS: N/A