Handoff Policy

Purpose:

The purpose of this policy is to define a safe process to convey important information about a patient’s care when transferring care responsibility from one physician to another. In the course of patient care, it is often necessary to transfer responsibility for a patient’s care from one physician to another. Hand-off refers to the orderly transmittal of information, face to face, that occurs when transitions in the care of the patient are occurring. Proper hand-off should prevent the occurrence of errors due to failure to communicate changes in the status of a patient that have occurred during that shift. In summary, the primary objective of a “hand-off” is to provide complete and accurate information about a patient’s clinical status, including current condition and recent and anticipated treatment. The information communicated during a hand-off must be complete and accurate to ensure safe and effective continuity of care.

Policy:

Whenever there is a transition in care (hand-off), adequate communication between residents and/or faculty must occur in order to ensure patient safety including:

- Adequate identifying information for any patient or case involved in the transition of care
- Sufficient details about each patient / case to ensure adequate completion or follow-up by the appropriate resident
- Any information regarding outstanding issues affecting coverage of the service

Some examples of circumstances in which a hand-off should occur include:

- Scheduled change in rotations (always for surgical pathology, hematopathology and autopsy, and as needed for pending issues/cases in other core rotations).
- Communication between the resident on rotation and the resident on call regarding any ongoing or expected issues that may arise past the end of the duty period. (Common examples may include ongoing surgeries with expected frozen sections after hours or potential shortage of blood products).
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- Communication between the resident on call and the resident on rotation regarding cases or issues arising during the on call period which require further action or follow up.
- When arranging coverage for any service (regardless of whether there are ongoing/pending issues) in the event of either planned absence (e.g., vacation, travel to conference) or unplanned absence (illness or other emergency).

While per UMMC institutional policy, verbal communication regarding hand-offs is sufficient, written communication (for example, by email correspondence) is strongly encouraged. All hand-offs occurring between the resident on rotation and the resident on call the prior week will be audited at the intradepartmental Monday morning report.