

ADMINISTRATIVE POLICY AND PROCEDURE

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Subject: PATIENT HANDOFF COMMUNICATION

Policy No.: B826.4

Supersedes: October 24, 2018

Review Date: October 4, 2023

Origin Date: April 1, 2006

Revision Date: October 4, 2023

PURPOSE:

The handoff communication process provides opportunity for discussion between the giver and receiver of patient information, which may include the patient's condition, care, treatment, medications, services, and any recent or anticipated changes to any of these.

POLICY:

- Rancho Los Amigos National Rehabilitation Center will ensure that appropriate information is provided and that direct communication and an opportunity to ask questions occurs for handoff processes.
- Providers/ clinicians will communicate minimum patient care information (as described in the "Procedure" section) when performing patient care "hand offs".
- Clinical assignments are designed to minimize the number of transitions in patient care.
- Appropriate interactive communication during a patient care "hand off" includes the opportunity for questions to be asked and answered by the clinicians involved.
- This policy applies, but is not limited to, the following types of patient "hand offs":
 - Nursing shift changes
 - Physicians transferring the care responsibility for a patient to another service
 - Physicians transferring on-call responsibility
 - Transfer of temporary responsibility for staff leaving the unit or work area
 - Anesthesiologist report to post-anesthesia recovery nurse
 - Nursing and physician hand off during intra-facility transfers

PROCEDURES:

1. A handoff process, which includes telephone or face-to-face communication, is required at nursing intershift reports when there is a patient interfacility discharge or discharge to another facility.
2. Interruptions during patient care "hand offs" will be minimized and the receiver of the information will have an opportunity to query, ask questions and receive answers, and repeat-back or read back the received information, as appropriate.
3. "Hand off" communication will be of appropriate detail and include, but not be limited to the following information:
 - Two Patient Identifiers
 - Patient's physician or team
 - Allergies
 - Reason for hospitalization/visit

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- Problem List
- Recent or anticipated plan of care changes or important events, if applicable
- Pending laboratory results, tests/procedures, or treatments, as indicated

NOTE: A verbal handoff/Sign-out (face to face or telephone) must be completed by the attending physician with the A, B, or C On-call physician for any patient with significant clinical issues that may require oversight by the On-call Physician.

REFERENCES:

TJC 2022 Accreditation Standards PC 02.02.01