

SUBJECT: "HAND-OFF" COMMUNICATION	REFERENCE #8102
DEPARTMENT: ORGANIZATIONWIDE	PAGE: 1 OF: 3
APPROVED BY:	EFFECTIVE:
	REVISED:

POLICY:

- "Hand-off" communication shall take place whenever there is a change in the patient's caregivers. Caregivers shall include all clinical staff and physicians.
- "Hand-off" communication shall include:
 - Accurate patient information regarding care, treatment and services
 - Patient's current condition and diagnosis
 - Recent or anticipated changes in the patient's condition
 - What to "watch for" in the next interval of care
- All information shall be presented in a clear, concise manner.
- Healthcare professionals shall be allotted the time to "hand-off" patient communication and to ask and answer questions with minimal interruption. It is hoped that this will lessen the amount of information that might be forgotten or simply not conveyed.
- Examples of patient care transitions where "hand-off" communication shall take place:
 - At the change of shift between healthcare professionals
 - Writing or tape recording report is a form of "hand-off" communication as long as the individual receiving the information can ask questions of the individual who wrote or tape recorded the information.
 - When a healthcare professional leaves the unit for a period of time, such as lunch or to accompany a patient to another unit or diagnostic department
 - Temporary responsibility of the patients, under the care of the departing nurse, is given to another licensed nurse.

SUBJECT: "HAND-OFF" COMMUNICATION	REFERENCE #8102
DEPARTMENT: ORGANIZATIONWIDE	PAGE: 2 OF: 3
APPROVED BY:	EFFECTIVE: REVISED:

- When a physician transfers complete responsibility for a patient
- When physicians are transferring on-call responsibilities
- When physicians and nurses are transferring patients to another level of care within or outside of the organization
- Anesthesiologist's report to the PACU RN and/or to the unit RN
- Rehabilitation Services staff report to unit RN, PT or OT
- Patient transfer to another healthcare facility
- Critical Clinical Laboratory and Imaging/Radiology results sent/called to physicians' offices
- Behavioral Health (24-hour care):
 - Teachers providing information to child care workers
 - Report given between clinical staff and program staff

PROCEDURE:

- Caregivers shall find a quiet area to give a verbal report (hand-off communication) to ensure accurate, clear and concise information is given with a minimum of interruptions.
- Caregivers shall give each other the opportunity to ask questions, answer questions and read-back or repeat-back information, as needed.
- The receiver of patient information shall be given the opportunity to review applicable patient historical data regarding care, treatment and services.
- Information provided during hand-off communications shall include at a minimum (this information will be discipline-specific):
 - Patient's name and location
 - Patient's physician

SUBJECT: "HAND-OFF" COMMUNICATION	REFERENCE #8102
DEPARTMENT: ORGANIZATIONWIDE	PAGE: 3 OF: 3
APPROVED BY:	EFFECTIVE: REVISED:

- Date of admission
- Diagnosis
- Summary of the patient's current physical and mental health condition including, but not limited to:
 - Current medications and when they were last given
 - IVs present: hepllock and/or IV solution, rate of infusion
 - Most recent vital signs
 - Input and output, when applicable
 - Oxygen, ventilator settings when applicable
 - Wound dressings, drains, etc.
 - Emotional status
 - Pain assessment and management
- Allergies
- Recent or anticipated changes in the patient's condition
- Pertinent past medical and surgical history
- The patient's resuscitation status
- Results of recent Clinical Laboratory and diagnostic tests
- Patient problem list
- Treatment, care and services that need to be completed (to-do list)
- Any other information which is important to the patient's care