Department of Psychiatry and Behavioral Sciences
Transition of Care Policy
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Emory University Hospital Psychiatry – Guide to shift hand-offs

The importance of shift hand-off is to communicate essential knowledge to oncoming providers so that errors are eliminated and relevant information is communicated in an efficient manner. The ultimate goal is to prevent mistakes and potential errors that may be avoided.

At the inpatient psychiatric services at Emory Wesley Woods Hospital, the major hand-off instances happen on Fridays and Mondays. Overnight call is taken from home, with residents coming in if they have admissions to the inpatient adult or geriatric psychiatry units or urgent psychiatric consults on med/surgical patients in Emory University Hospital. That is the reason why there is no “face-to-face” sign out except for Monday mornings, as the resident, who is many times at other sites (ie-elective rotations or consult service at EUH) does not need to be present at 5:00 PM when his/her call begins.

On Monday mornings, the resident who was on-call through the weekend (Friday, Sunday shift) presents new patients and gives updates on all patients during Interdisciplinary Treatment Team. The on-call resident will communicate any major medical or psychiatric issues that occurred in the inpatient unit (e.g. – patient placed in restraints, patient transferred to medicine) to the regular weekday staff. The entire unit staff including nursing director, nurses, social workers, therapists, doctors (attending and residents) and medical and PA students attend this Treatment Team meeting. If the weekend resident is not able to attend morning report on Monday am, they must send a sign-out on every patient with weekend events to the inpatient residents, the chief resident, and the attendings.

On Fridays, residents that are working in the inpatient unit write a sign out with a detailed description of patients that are in their care, with to-do lists and precautions. This is sent via e-mail to the on-call attending, on-call residents, and the chief resident.

On weekday mornings, patients that were admitted the previous day are presented in the Interdisciplinary Treatment Team. Residents who were on-call overnight transmit immediate care needs via email to chief resident. Information from floor consults in the main hospital that were seen overnight is transmitted to the C/L team.

On weekend mornings, there is a brief meeting with the nursing staff to assure that issues that came on over the previous day, as well as assessments and behaviors observed are transmitted for better case and treatment formulation.

The weekend sign out is forwarded w/ daily updates to the subsequent resident- e.g., the Saturday resident updates the sign out for every patient w/ the day’s events, then sends it to the Sunday resident who adds their updates (or summarizes) and then sends it to the entire team for Monday morning.
Grady Memorial Hospital Psychiatry – Guide to shift hand-offs

The importance of shift hand off is to communicate essential knowledge to oncoming providers so that errors are eliminated and relevant information is communicated in an efficient manner. The ultimate goal is to prevent mistakes and potential errors that may be avoided.

I. Morning (AM) hand-off: weekdays

All residents meet for morning sign-out each weekday morning at 7:45 am. The on call resident reports to the dayshift residents on any cross-cover medical or psychiatric issues that occurred overnight on the inpatient units. The on call resident also discusses the patients seen overnight in the Crisis Intervention Service (CIS) as well as any patients in the observation area or waiting for evaluation in the waiting room or detention cells. This hand-off is both verbal and written.

II. Evening (PM) hand-off: weekdays

Each resident rotating on the inpatient unit does a written sign-out for the patients they are covering on the inpatient unit in the electronic medical record. They also then do a verbal sign-out with the on-call resident in the CIS before leaving the hospital. The dayshift resident in the CIS updates the written sign-out for all patients in the CIS and provides a copy of the updated report and does a verbal sign-out for the night float resident each night at 8 pm.

III. Weekends

The inpatient unit is covered by attendings on the weekends. On Friday evenings, in addition to providing a written sign-out to the on call resident, residents rotating on the inpatient service also provide a copy of a written sign-out for the weekend attending. The dayshift and night float CIS residents continue to update the written CIS sign-out at the end of each shift (8 am and 6 pm) in addition to also doing a verbal signout.
The importance of shift hand off is to communicate essential knowledge to oncoming providers so that errors are eliminated and relevant information is communicated in an efficient manner. The ultimate goal is to prevent mistakes and potential errors that may be avoided.

At the VAMC there are two major hand-off periods: AM and PM

I. Morning (AM) hand-off: weekdays

At the VAMC, the first hand off occurs at the Administrative meeting during the week. The point of this meeting is to account for the patients that were seen overnight. This helps staff understand the disposition for all of the patients that were evaluated, arrange any follow up that is appropriate, and to highlight any systems issues. Additionally, if there are patient care concerns for the next shift, these should be communicated to the oncoming teams.

- At this meeting, the resident will communicate information on all patients that were seen in the ED Annex or as a consult (either in the ED or on med/surgical floors).
- Next, the resident will communicate any major medical or psychiatric issues that happened in the ED Annex or on the inpatient unit. (ie – patient placed in restraints, patient transferred to medicine for shock)
- Finally, any issues that need follow up during the day should be communicated to one of the physicians starting the day shift (Chief of service, chief resident, or one of the inpatient residents). An example would be, I ordered a head CT for Mr. X due to a fall, but the result is not back yet. Serial cardiac enzymes are pending.

II. Evening (PM) hand-off: weekdays

The evening hand-off begins at the beginning of the shift for the oncoming POD (16:00). At the VAMC, all patients on a level 4 will need sign-out and any patient who is on a lower level, but has new issues that are significant will also need sign-out. The key information to sign out on the patients are:

- Reason for admission
- Concerns for any monitoring above Q15 minute checks
- Any risky or concerning behaviors
- Medication initiations or changes that could cause problems
- Restricted medications – are there medications the patient should not receive.
- F/U labs, imaging that may be important overnight
- Any medical conditions that may likely become unstable overnight

For patients that are on lower level, an example of a sign-out would be:

Patient X had an episode of syncope yesterday. BP has been stable. If episode returns, will need to contact MOD and check orthostatics.

Admissions: if there is an admission to your team (transfer patient from another service or outside hospital) that has not arrived on your shift, sign-out the patient to the POD since they will have to do the admission. If you have any paperwork, be sure to pass that on to the POD.

As a backup, information on all patients on the inpatient unit will be entered into the shift-hand off tool in the medical record and updated on a daily basis to reflect clinical changes. This will be available to the POD overnight should issues arise.
III. Weekends

On the weekend, there is one major sign out period at 08:00 AM. This should occur with the attending physician, the outgoing POD, the incoming POD, a nursing representative, and sometimes a moonlighting physician.

The resident beginning the Saturday shift should print out the census for 4PSY. This census should be passed along on Sunday at hand off and again at the Administrative meeting to the chief resident.

During the sign-out, all relevant issues will be communicated by both the verbal and written (shift hand-off tool) to the oncoming physicians. Any pending testing or evaluations will also be communicated at this time, similar to the hand off during the week.

IV. Morehouse residents

When an upper level Morehouse resident assumes the role of POD, this may occur at a later time than 16:00. At this designated time, both a verbal and written hand-off will occur similar to the PM hand off during the week.