Transitions of Care

Each Baylor College of Medicine GME program must educate its residents/fellows on effective care transitions in an effort to ensure that care transitions occur in a consistently well-coordinated manner and to facilitate continuity of care and patient safety. Care transitions refer to the movement patients make between health care practitioners and settings as their conditions and care needs change during the course of a chronic or acute illness.

Residents/fellows must be educated to use approved, standardized, context-specific transitions of care tools or instruments, as relevant. Residents/fellows must also be educated to communicate effectively with team members in the hand-over or hand-off process as responsibility for a patient shifts from one team to another or from one individual to another.

Faculty must observe and assess resident/fellow participation in patient care transitions and give feedback to improve care transitions as appropriate.

Optimally, residents/fellows and faculty will practice care transitions through simulated or real-time interprofessional training.

Residents/fellows and faculty should be informed of mechanisms for reporting concerns about site-specific transitions of care tools, instruments, policies or procedures.

The Graduate Medical Education Committee (GMEC) will monitor program compliance with transitions of care requirements (institutional (III.B.3.), common (VI.B.) and specialty-specific requirements.)