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| POLICY | Manual: Clinical | Section: Interdisciplinary Clinical | Code No.: I T002 | Old Code No.: POLT2, I T2 |
|--|--|--|---------------------------------------|------------------------------|
| Title: Transfer of Inpatient - Within the Hospital | | | Original Effective Date: May 01, 1985 | |
| | | Review/Revised Effective Date: Sep 05, 2019 | | |
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| Cross Index: | Authoring Con Professional Pra | nmittee/Program/Dept: ctice | Approved B | y: SLT |

As an exception, SLT has approved the use of combined policy and procedure in this document, notwithstanding accepted practice to have policy and procedure as separate documents.

POLICY

Transfer of a Patient Within Southlake Regional Health Centre is determined by:

- The Manager/delegate in consultation with the Health Care Team, as appropriate, due to type and acuity of illness, isolation, or hospital bed flow requirements;
- Physician Order for specific care, e.g. transfer from one service to another;
- Patient request for specific accommodation. Patients requesting transfer to preferred accommodation must sign the Preferred Accommodation form;
- Bed Allocation (ext. 2205) due to bed availability or appropriate accommodation.

Note: For transfer of patients to sites located off the main campus, refer to the <u>Transfer of Patient - Interfacility</u> policy and procedure.

Orders for Patient Care

It is the responsibility of the sending and receiving units to determine whether the patient is receiving clinical interventions that are appropriate for the receiving unit and contact the Most Responsible Provider(MRP) in order to establish/continue treatment orders or determine an alternate plan of care.

At the time of transfer to/from a critical care area, or the operating room, all previous orders for treatment become null and void and new orders for treatment must be obtained. New medication orders should be reconciled with the patient's best possible medication history (BPMH) from admission and recent orders (refer to BPMH and Medication Reconciliation procedure).

Transfer of Accountability

A transfer of accountability involves both the transfer of information and primary responsibility for patient care: "Transfer of accountability is an interactive process of transferring client specific information from one care giver to another or from one team of caregivers to another for the purpose of ensuring the continuity of care and the safety of the client." (CNO, 2008).

A formal transfer of accountability must occur whenever a patient is transferred between units using the Meditech GEN Admit & Transfer intervention, or Transfer of Accountability SEND form (SL1331) as a guide (unless a unit/department/program specific form/procedure exists). Documentation of transfer of accountability is to completed by both the sending and receiving personnel.

For Post Partum patients, also refer to <u>Transfer of Post Partum Patient (Intradepartmental)</u> policy.

PROCEDURE

Purpose:

 To outline the process for the safe transferring of patients within and between units/services

Responsibility:

- Health care provider (HCP)
- Unit Clerk

Equipment:

- Department specific transfer form or Meditech Gen Admit & Transfer section or Transfer of Accountability (SEND) form (#SL1331)
- Valuables and Prosthesis Record (#SL0940)
- Patient Health Record

Method:

Ensure the patient is accompanied during the transfer in accordance with the <u>Interdepartmental Adult Patient Accompaniment within Southlake - Guidelines</u> standard of care.

| Metho | Responsibility | |
|-------|---|------------|
| 1. | Notify Bed Allocation (Ext. 2205) of ordered, requested or appropriate transfer. | Unit Clerk |
| 2. | Notify Most Responsible Provider and family physicians. Inform patient, and family as appropriate. | Unit Clerk |
| 3. | Once the MPV board indicates bed is in the process of being cleaned (displayed as brown stripes), the sending HCP will phone a verbal report to the receiving HCP, charge nurse or delegate using the Meditech GEN Admit & Transfer intervention or Transfer of Accountability (SEND) form for guidance (#SL1331) or the unit/program specific transfer form/program. • If unable to provide report, document in the Meditech GEN Admit & Transfer. Repeat with a 2nd attempt after 20 minutes. If still unsuccessful, the sending nurse will document report in the text section of the Admit and Transfer screen and arrange for transport of the patient to the unit. | Nurse/MRT |
| 4. | Determine patient transportation/accompaniment requirements as per Interdepartmental Adult Patient Accompaniment within Southlake - Guidelines standard of care. | Nurse |
| 5. | Ensure all belongings accompany patient including (also refer to Personal Belongings/Valuables policy): • Medications (labeled in transfer bag - includes all patient's own, those from the patient's drawer in the medication cart, those from the bedside i.e. inhalers, and those recently dispensed for new orders) • Medication Administration Record (MAR), if not electronic | Nurse |

| Patient Care Plan Chart Personal Belongings Note: Check in patient's locker and unit for any remaining personal items. | |
|---|------------|
| 6. Document The transfer in the Health Record Both the sending provider and the receiving provider to complete and sign the Valuables and Prothesis Record #SL0940 Complete and sign the SEND report as per #3, if not documented electronically | Nurse/MRT |
| 7. Call ext. 2000 and request patient transport. | Unit Clerk |
| Unit Receiving Patient | |
| Ensure documentation electronically or completion of the Transfer of Accountability form (SEND) #SL1331 Check patient identification armband using 2 client identifiers, and compare with health record as per <u>Identification of Patients</u> policy. Ensure all orders for treatment are reviewed and verified. Notify authorized prescriber for clarification, or updating of orders as required | Nurse/MRT |

| Transfer Within Unit: | Responsibility |
|---|---------------------|
| 1. Notify Bed Allocation (Ext. 2205) prior to any changes being made. | Unit Clerk/Nurse |
| Patient location to be updated in: Patient Care Plan; Chart backs/spine; Medication Administration Record; Medication drawers; Assignment board. | Unit Clerk |

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