

STANDARD

Safe and effective handover of patient information will be used to provide continuity of care and reduce risk of error when a patient is referred or transferred between acute hospital care and ARC facilities.

OBJECTIVE

To ensure safe and effective communication of patient information, in order to support the safety, quality, and continuity of patient care.

STANDARDS TO BE MET

STEP	DESCRIPTION	RATIONALE
1	<ul style="list-style-type: none"> During discharge planning process the information in the Yellow Envelope will be used to: <ul style="list-style-type: none"> Discuss impending discharge with the ARC facility Notify Next of Kin Initiate transport arrangements as requested by facility, if an ambulance transfer is required, use the guideline “How to request an ambulance” and ensure ambulance Coordinator is aware of facility preference of provider Fax prescription to facilities preferred pharmacy and ensure original prescription is delivered to the community Pharmacy 	<ul style="list-style-type: none"> To ensure all relevant health providers and family / whanau are aware and can plan for patients safe discharge to an ARC facility and enable continuity of care
2	<ul style="list-style-type: none"> On discharge from hospital to an ARC facility, the information in the Yellow Envelope will be updated by: <ul style="list-style-type: none"> Adding a copy of the electronic discharge summary Document if prescription has been faxed to community pharmacy Enclose original prescription and document if original prescription has been posted directly to community pharmacy Enclosing a completed copy of a nursing handover / transfer form – copy to be retained in patient’s health record. Checking patient has all property and medications brought into hospital with them and document 	<ul style="list-style-type: none"> To ensure safe, effective communication on discharge to all healthcare providers to enable continuity of care Original copies of prescriptions must be given / sent to community pharmacy dispensing medication Document all actions taken in patient’s health record
3	<ul style="list-style-type: none"> Yellow envelope and contents will accompany patient on discharge Staff will notify ARC facility of time patient has left the hospital 	<ul style="list-style-type: none"> To ensure all relevant patient information is available to be utilised to in the continuity of care for all patients transferred to

 <p>BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI</p> <p>PATIENT TRANSFER PROTOCOL</p>	<p>PATIENT TRANSFER –AGED RESIDENTIAL CARE (ARC) FACILITIES – YELLOW ENVELOPE</p>	<p>Policy 6.4.1 Protocol 13</p>
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STEP	DESCRIPTION	RATIONALE
		ARC facilities from BOPDHB acute care facilities

ASSOCIATED DOCUMENTS

- Bay of Plenty District Health Board policy 6.4.1 Patient Transfers
- Bay of Plenty District Health Board policy 6.1.4 Advanced Directives
- Bay of Plenty District Health Board policy 6.1.4 protocol 1 Advanced Directives - Standards
- Bay of Plenty District Health Board Mental Health & Addiction Services protocol MHAS.A1.18 Mental Health & Addiction Services Advanced Directives Guideline
- Bay of Plenty District Health Board Advance Directive Form

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<p>Protocol Steward: Clinical Nurse Specialist Older persons</p>	<p>Authorised by: Director of Nursing</p>	