



Clinical Handover

All aspects of a patient's healthcare must be transferred in an accurate and timely manner. It is important that systems are in place and notes are kept to trace all information shared with other health care professionals, thus ensuring comprehensive continuity of care. Patients need to be kept up-to-date with any changes regarding who is responsible for their wellbeing and for the transfer of their health information from one medical professional to another.

4th Edition RACGP Standards

1.5.2A *Our practice team can demonstrate how we ensure an accurate and timely handover of patient care.*

Assessment methods

- Interview with practitioners

Surveyors will interview the GPs, nurses and any other healthcare professionals in the practice to determine if there is transfer of professional responsibility and accountability in the event of a patient being transferred internally to another member of the clinical team or externally to an outside care provider. Additional GPs may need to be interviewed in larger practices to ensure a consistent approach across the team.

- Document review of written policy

Surveyors will look for evidence in the Practice's policy manual of standard requirements and procedures for managing clinical handover.

- Document review of health records

Surveyors will look for evidence in the health records of documentation of the transfer of clinical responsibility and of the transfer of patient health information.

Meeting the standards

Clinical handover may involve a variety of professionals including other members of the practice team, medical deputising services, emergency departments, pathology services, specialists and other medical practices. There should be a rigorous system of arrangements and documentation to ensure that clinical handover is accurate and efficient.

Examples of clinical handover in general practice include:

- A GP covering for a GP colleague who is on leave or unexpectedly absent
- A GP covering for a part time colleague
- A GP handing over care to another health professional, such as a nurse or physiotherapist
- A GP referring a patient to a service outside the practice
- A shared care arrangements (eg. team care of a patient with mental health problems)

GPs and other clinical staff, to ensure continuity of care in case of their unexpected absence, should routinely maintain adequate clinical records, including a health summary. In addition, Practitioners should routinely read the patient's preceding records for the past few clinical consultations.

If for any reason the care of a patient who is involved in multi-practitioner care ceases (e.g., a practitioner stops seeing the patient, or the patient stops seeing a practitioner), then this should be communicated to the other members of the treating team. Whenever patients have shared in the decision-making around clinical handover, this should be recorded in the consultation notes.

Instances of inadequate or failed transfer of care should be reported using de-identified data, and team members should be encouraged to re-appraise any errors in order to minimise the potential for repeat occurrences.