

Improving Communications upon Transfers

Introduction

In collaboration with people with lived experience, caregivers, residents, primary care partners, community service providers, long-term care homes, retirement homes, Markham Stouffville Hospital, The Regional Municipality of York and The Regional Municipality of Durham, the Eastern York Region North Durham (EYRND) Ontario Health Team (OHT) has been launched. Under this new OHT plan, health care providers (including hospitals, physicians and home and community care agencies) will work as one coordinated team to meet the needs of our community.

After much engagement had with key stakeholders including long term-care homes (LTCH), retirement homes (RH), the Central & Central East Local Health Integration Network (LHIN), the Ontario Retirement Communities Association (ORCA), and hospital Emergency Department (ED) personnel, EYRND OHT is launching a new tool designed to help improve communication between resident/patient transfers between LTCH/RH and the ED.

This new communication tool will be launched by LTCH and RH within the EYRND OHT catchment area (consisting of the following neighbourhoods: Thornhill, Markham, Stouffville, Uxbridge and Brock Township).

During the pandemic, it is imperative that communication amongst health care providers is upheld for the safety of our residents and staff. LTCH/RH personnel are strongly encouraged to adhere to the processes and forms described in this document.

Upon feedback and learnings, the EYRND OHT will look to improve the processes and tools, in an effort to support and strengthen communication amongst LTCH/RH and the hospital ED.

The Form

LTCH/RH – ED Transfer Communication Form:

This form is to be completed by LTCH/RH personnel, for each resident. The form has three sections, for the following purposes:

Section 1 (Page 1) – Prefilled Resident Information

- For LTCH/RH to have this section completed for each resident and updated regularly, if resident's health status changes

Section 2 (Page 2) – Acute SBARD Assessment

- For LTCH/RH to complete upon calling 911 for resident transfer to ED

Section 3 (Page 3) – ED Transfer Back to LTC/RH

- For ED nursing staff and physician to complete upon discharge from ED

Instructions

Each resident chart should have the first of the three sections of the form completed with the resident's health information. The first section of the form should be updated if the resident's health status changes.

Support from Nurse Lead Practitioners or Central/Central East LHIN Care Coordinators can be obtained when filling out this section of the form, or for any questions related to any other part of the form.

When a resident requires emergency assessment, take the following steps:

- 1) Call Transportation Service
- 2) Complete Section 2 of the LTCH/RH – ED Transfer Communication Form
- 3) Notify the Hospital's Emergency Department that the resident is being transported there:
 - a. Markham Stouffville Hospital Emergency Department, 905-472-7003 or
 - b. Uxbridge Cottage Hospital Emergency Department, 905-852-9771, ext. 5261

These phone numbers are also captured on the LTCH/RH – ED Transfer Communication Form.

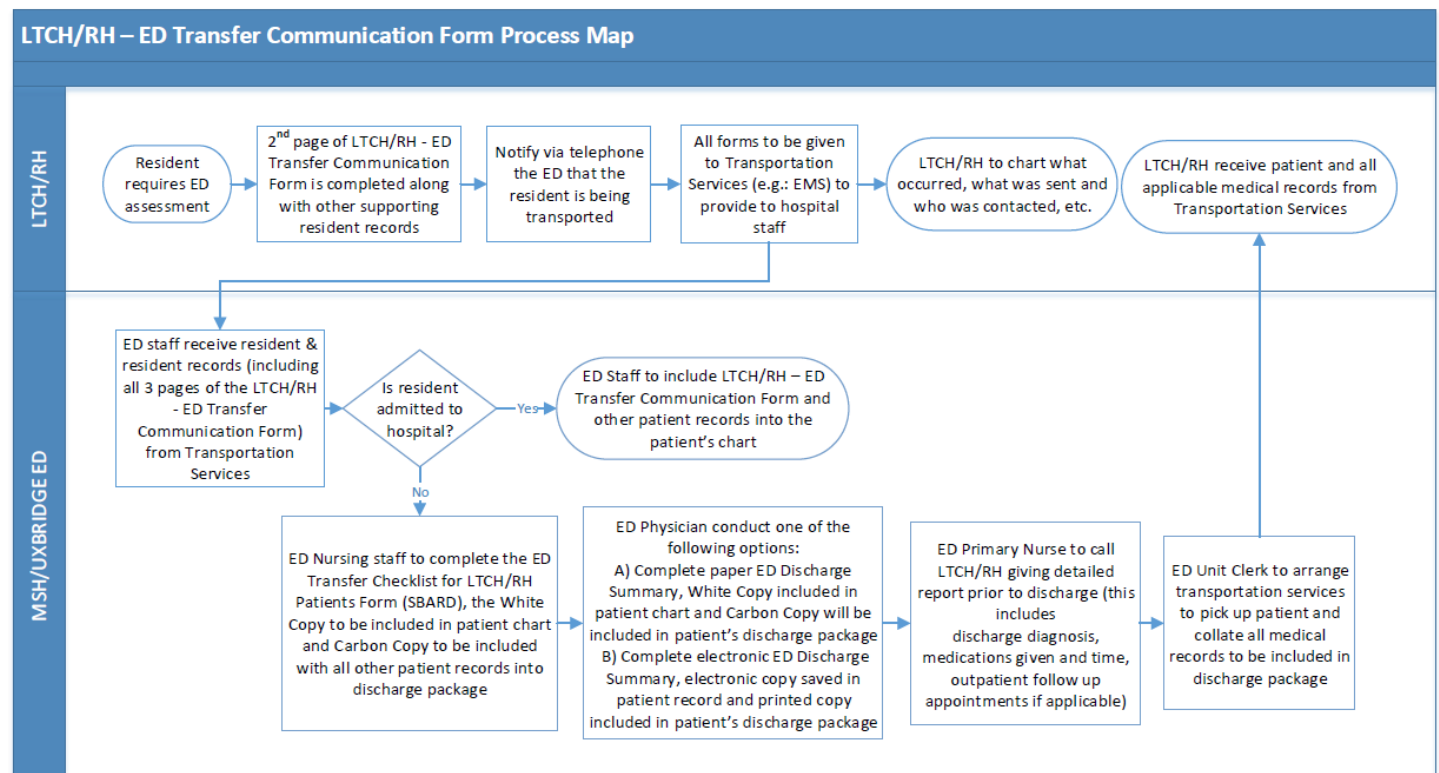
- 4) Make photocopies of the completed LTCH/RH – ED Transfer Communication Form, and give original copies, along with any other relevant documentation to the Transportation Service upon resident pick up

Once resident is transported back to their respective LTCH/RH, the following steps will be taken by the hospital ED:

- 1) The hospital ED will call the LTCH/RH to let them know that the patient is being discharged
- 2) A discharge package will be prepared that includes the following key documents:
 - a. ED Transfer Checklist for LTCH/RH Patients Form
 - b. ED Discharge Summary Form
 - c. Possible Dictation from Physician

For more information, please review the Process Map on next page.

Process Map



*LTCH/RH must complete the first page of the LTCH/RH – ED Transfer Communication Form for each resident and place in their chart.

*Physicians may choose to provide the LTCH/RH, the patient resides in, with a Priority Dictation.

Resources

Please visit the EYRND OHT Website to access: www.EYRND.ca – Community Partners Tab

- The LTCH/RH – ED Transfer Communication Form, for replenishing purposes
- Training Video

Feedback/Questions

Any process questions or feedback can be directed to:

- LTCH – Nurse Lead Outreach Team support
- RH – Central/Central East LHIN Care Coordinators support
- Parisa Mehrfar, Markham Stouffville Hospital - Manager, Integration and Planning, pmehrfar@msh.on.ca and (905) 472-7373 ext. 6394