

Provider Checklists to Support Care Transitions

The purpose of this checklist is to give providers and clinicians a simple way to confirm that you have considered the key issues affecting patient success during care transitions, prior to discharging patients from the hospital to home or hospital to facility-based care.

The Care Transition Process

Care transitions are the most important part of the process, yet often the most difficult part of the process for patients. When patients move from one environment to another environment, they are exposed to new risks. The checklist is intended to mitigate these risks.

PAC Planning Process

The purpose of this checklist is to provide providers with a simple checklist to support the best post-acute care planning process.

#	Questions to Consider During the Planning Process	Check
1	Has the team established a person-centered care planning process?	<input type="checkbox"/>
2	What are the patient's needs and goals? Does the team understand the patient's goals, needs, values, and social needs and family context? Does the patient have an advanced care directive (POLST form), and is it up to date?	<input type="checkbox"/>
3	Has the team discussed the options for PAC services?	<input type="checkbox"/>
4	Does the patient understand the full range of PAC options?	<input type="checkbox"/>
5	Has the team reached internal consensus about the PAC recommendation?	<input type="checkbox"/>
6	Has the patient been engaged throughout the process?	<input type="checkbox"/>
7	Has the team discussed time frames, duration of care, and potential obstacles with the patient and family?	<input type="checkbox"/>
8	What will the patient's insurance cover in terms of services and costs?	<input type="checkbox"/>
9	Is the family caregiver aware of and in agreement with the plan for PAC?	<input type="checkbox"/>
10	Does the patient know who to contact for follow up questions or concerns?	<input type="checkbox"/>