

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.

#	Questions: When Patient is Going from the Hospital to a Facility	Check
1	Is discharge from the hospital premature?	
2	What are the patient's individuals needs and goals?	
3	Does the patient have a signed Health Care Proxy and/or POLST form? Have the documents been shared with the facility? Is it in their electronic medical record?	
4	Are facility staff ready to care for the patient? Has transportation been arranged?	
5	Do facility staff have complete clinical information on the patient? Do facility staff understand functional status and cognitive needs of the patient?	
6	Does your patient meet the qualifying hospital stay requirements for a facility?	
7	Have you spoken to admissions staff at the facility to ensure that the facility has received all necessary information and paperwork? Have you provided the information? Is a call warranted? Has a nurse-to-nurse report been completed?	
8	Will your patient need post-acute care upon discharge from the facility?	

