



The purpose of this Health and Welfare Alert is to promote effective transition planning. Effective transition planning includes coordination, communication and information to best serve the individual with changing needs. Our system serves individuals with diverse needs in a variety of settings which can make transition planning challenging.

All DD Employees are required to be trained annually, on identification and reporting of Major Unusual Incidents (MUIs) and Unusual Incidents (UIs) prior to direct contact. This training includes the review of any Health and Welfare Alerts released since the previous calendar year's training.

For questions or comments, please contact the MUI/Registry Unit at (614) 995-3810.  
[www.dodd.ohio.gov](http://www.dodd.ohio.gov)

The purpose of this Health and Welfare Alert is to focus on situations where individuals change providers, services, or settings that could impact their health and safety. It is critical for providers, county boards, and families to understand the importance of completing thorough transitions. Not tending to the important details and poor communication can ultimately lead to serious harm.

With any major transition, health and safety needs must be given top priority. Plan ahead for changes in an individual's life that may create a risk. It is important to ask questions to see if a review or assessment should be completed.

#### Some of the changes that readily impact individuals are:

- Admission or discharge from hospital/out-patient surgery/E.R.
- New diagnosed medical/psychiatric condition
- Move to a different residence
- New roommate or housemate
- Move to a nursing facility, mental health facility, developmental center, licensed facility or rehabilitation center
- Change in support provider
- New medication, dose or system of receiving it
- Death or illness of the family member, caregiver or a loved one
- Change in support needs
- Change in diet/texture
- Placement of a feeding (enteral) tube
- Change in services provided to the individual
- Job change/workshop change/retirement
- Change in Service and Support Administrator (SSA) or QIID

The receiving provider must implement the services, monitor for concerns, and notify the county board. **Important things to know/share:**

- Reason for transfer/change
- Current symptoms (medical, psychiatric)
- Safety issues (PICA, choking hazards)
- Supervision/support needs
- Medical diagnosis
- Current Medication list-dose and route from pharmacy
- Past surgeries/hospitalizations
- Allergies (medications, food or other)
- Presence of metallic foreign body (plate, pacemaker, and other implants make some test, like Magnetic Resonance Image, extremely dangerous)
- Best mode of communication
- Likes and dislikes
- Last menstrual cycle (rule out pregnancy)
- Diet texture, special diet considerations
- Lifestyle choices: smoking, drug/alcohol use
- Adaptive equipment (walker, hearing aids, dentures, glasses and dining ware)
- Financial status/access to funds

#### Priority Considerations

- Any medical conditions, medications or health related activities such as insulin, blood thinner needs, glucometer checks, blood pressure readings, allergies or special nutritional requirements should be clearly outlined. *Note: It can be unsafe practice to give oral medications to individuals with dysphagia, difficulty swallowing.*
- Environmental impact of the new setting on the individual – example, more traffic on the street in this area of town, any access problems presented by the new setting such as a second story if mobility is a concern, etc.
- Mental health or behavioral concerns— develop a list for caregivers of triggers, what works, what makes things worse, etc.

## Ineffective transitions can lead to poor outcomes for those we serve including:

- Death
- Unnecessary hospitalizations
- Medication errors/Wrong treatment
- Missed appointments (medical and psychiatric and following ER and hospitalizations)
- Lack of monitoring post-hospitalization
- Incorrect diet textures which can lead to choking

## Four important steps in transition process:

1. Ensuring that the receiving provider, including the direct support professionals, is **clearly apprised of and ready to meet the individual's needs.**
2. The transferring provider must emphasize how they have managed **potential health and safety risks**; this should also include important historical information about the individual.
3. **The assigned SSA/QIPD must actively facilitate the transition** to the receiving provider or setting. This includes a review of the plan to assess any new circumstances and determine potential risks. It is important for the SSA/QIPD to ensure the receiving provider has the current plan in sufficient time to train the direct support professionals.
4. The receiving provider must implement the services, monitor for concerns, and **notify the county board/medical professionals/team/other supports when there are problems with the transition.**

## How do we improve transition planning between individuals, providers, and families?

- Have the team evaluate if there are immediate steps needed to protect the health and welfare of the individual;
- Standardize procedures for medication changes, new orders, and hospital discharges;
- Use check lists so all team members are aware of action plans, timelines, and responsible parties;
- Expand the role of pharmacists in transitions of care in respect to medication reconciliation;
- Learn what the new orders mean and why medications are prescribed; possible side effects;
- Train staff on changing needs;
- Evaluate if an individual is re-hospitalized within 30 days if it could be prevented ;
- Schedule a follow up meeting or call to touch base on individual's progress ; and,
- When feasible try not to make numerous changes at once.



## Process Breakdown Points

- A. Is the information clearly communicated and clearly understood?
- B. Does the new staff know and understand the service plan?
- C. Have supervision/support levels been addressed?
- D. Has appropriate training occurred on behavior support strategies, restrictive measures, etc.?
- E. Does staff understand the potential problems or risks with their new responsibilities? Has all of the information been shared to properly prepare the receiving team?
- F. Does the change create new risks for the individual?
- G. Does the county board and agency have a good plan for monitoring services and providing oversight following the transition?
- H. Does staff know what to do when problems arise?

## Resources:

### National Transitions of Care Coalition

### Joint Commission-Transitions of Care

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## Helpful Hints:

- *Most pharmacies will print a medication record for you free of charge*
- *DODD added a transition checklist for your use on our website*  
[www.dodd.ohio.gov](http://www.dodd.ohio.gov)
- *There are many forms and resources on providing quality health care for individuals with developmental disabilities*  
<http://vkc.mc.vanderbilt.edu/etoolkit/>