



Bylaw Policy

Requirement for Continuity of Care

PURPOSE

The Non-Hospital Medical and Surgical Facilities Accreditation Program (NHMSFAP) Committee is responsible for establishing accreditation standards for non-hospital facilities and ensuring that facilities meet required standards for the quality and safety of service delivery in an accredited non-hospital facility.

This policy addresses the requirements for ensuring continuity of care for medical staff at non-hospital facilities.

POLICY

1. All medical staff practising in a non-hospital facility must ensure continuity of care for their patients, including those patients who require admission to a hospital following a procedure at the facility.
2. Registrants of a facility who hold active or admitting privileges at a hospital local to the facility must:
 - a. be available by telephone and be able to attend the non-hospital facility to assess and/or treat the patient as appropriate to the patient's condition
 - b. admit to hospital and manage the patient as appropriate to the patient's condition
3. Registrants of a facility who do not hold active or admitting privileges at a hospital local to the facility must:
 - a. be available by telephone and be able to attend the non-hospital facility to assess and/or treat the patient as appropriate to the patient's condition
 - b. for any patient requiring admission to hospital, first have a registrant designate of the same specialty who holds active privileges at a hospital local to the facility who agrees to take responsibility for the management of the patient
 - c. be available by telephone to provide consultation and patient information to the hospital medical staff and designate
4. Other medical staff who do not hold active or admitting privileges at a hospital local to the facility must:
 - a. be available by telephone and be able to attend the non-hospital facility to assess and/or treat the patient as appropriate to the patient's condition
 - b. be available by telephone to provide consultation and patient information to the hospital medical staff

Exemptions to the requirement for a registrant designate include:

- anesthesiologists (excluding those performing interventional pain management procedures)
- ophthalmologists performing refractive eye surgery only
- dental surgeons
- podiatric surgeons
- oral maxillofacial surgeons

DEFINITIONS

continuity of care Coordination of patient care, provision of follow-up patient care and the sharing of patient information to ensure proper care.

RESPONSIBILITY

Role	Responsibility
Medical Director	<ul style="list-style-type: none"> • Ensure compliance with the continuity of care policy • Ensure medical staff practicing in the facility meet the expectation for continuity of patient care as outlined in the policy • Provide the College with copies of all reportable patient safety incident forms
NHMSFAP Committee	<ul style="list-style-type: none"> • Establish standards, rules, policies and guidelines respecting continuity of care • Review patient safety incidents to ensure the standards, rules, policies and guidelines respecting continuity of care were followed
NHMSFAP	<ul style="list-style-type: none"> • Maintain records of all reportable patient safety incidents and complaints
College of Physicians and Surgeons of BC	<ul style="list-style-type: none"> • Ensure that registrants comply with the bylaws, standards, rules, policies and guidelines respecting continuity of care