



- **Capture the essence of Transitional Care**
- **This is a healthcare *system* issue**
- **Reinforce and drive safe and high quality care**
- **Community level of agreement on the data elements**
- **Foster a culture of cooperation**
- **Sending and receiving teams communicate and coordinate care**
- **Assist the receiving team to effectively address the resident's/patient's need**

Development of the UTF

- **2007 – Task Force**
- **NJHA, HCANJ, Leading Age, DoH, NJ HHA, NJ Hospice and Palliative Care Association, HQSI, facility and provider representatives.**
- **Rutgers, the State University of New Jersey – pilot**
- **2009 – Final report**
- **Workgroup reassembled to refine the tool**
- **2011 Final Rule**

- **A minimal set of standardized data elements that should always be part of the form**
- **Comprehensive and complete**
- **Documents a clear picture of the resident/patient**

Regulatory History

- **Proposed July 19, 2010 in the *New Jersey Register* at 42 N.J.R. 1462(a)**
- **Adopted August 1, 2011 in the *New Jersey Register* at 43 N.J.R. 1875(a)**
- **Operative Date, i.e., the date use is required by healthcare facilities or programs was October 30, 2011**

N.J.A.C. 8:43E-13.1 - Scope

- **UTF use is required for all health care facilities or programs licensed by the Department of Health when transferring a patient to another facility or program**

- **Provide pertinent, accurate clinical patient care information at the time of a transfer between healthcare facilities or programs**
- **Include information that a physician and/or nurse needs to begin caring for a patient upon the patient's arrival at a facility or program**

N.J.A.C. 8:43E-13.3

Definitions

- **"Patient" means patient, resident, client or the terminology used by a specific licensed healthcare facility or program to refer to the individuals to whom a licensed healthcare facility or program is providing care.**

8:43E-13.4 (a) - Mandatory use of UTF

- **A licensed healthcare facility or program shall use the Universal Transfer Form, HFEL-7, Appendix to as N.J.A.C. 8:43E-13, available on the Department's website at <https://healthapps.state.nj.us/forms/subforms.aspx?pro=healthfacilities>, in either paper or electronic version, whenever a patient is transferred to another licensed healthcare facility or program.**

8:43E-13.4 - Mandatory use of UTF

- **Emergency departments are exempt from mandatory use of the Universal Transfer Form, but shall follow hospital procedures regarding documentation.**

8:43E-13.4 (b) - Mandatory use of UTF

- **A licensed healthcare facility or program shall complete all sections of the UTF, to the best of the licensed healthcare facility or program's ability.**
- **UTF is not complete if medication information is not attached.**

8:43E-13.4(c) and (d) - Mandatory use of UTF

- **A licensed healthcare facility or program shall send a completed, paper copy of the Universal Transfer Form with a patient when a patient is transferred.**
- **A licensed healthcare facility or program shall retain a completed copy of the Universal Transfer Form sent with a patient when a patient is transferred as part of the patient's medical record.**

8:43E-13.5 - Policies and procedures regarding the use of the UTF

- **A licensed healthcare facility or program shall develop and implement written policies and procedures addressing:**
 - 1. The required use of the Universal Transfer Form by a licensed healthcare facility or program's staff;**
 - 2. Method of transportation; and**
 - 3. Procedures for security of the resident and all personal belongings or other items that accompany or immediately follow a transferred resident.**

Sections 1 – 8

- **Demographic Information**
- **Code Status**
- **Physician Information**
- **Contact Information**
- **Reason for Transfer**
- **5 Vital signs**

Sections 9 – 14

- **Diagnoses**
- **Restraints**
- **Respiratory needs**
- **Isolation/Precaution**
- **Allergies**
- **Sensory**

Sections 15 – 19

- **Skin Condition**
- **Diet**
- **IV Access**
- **Personal Items Sent with Patient**
- **Attached Documents**

Sections 20 – 26

- **At Risk Alerts**
- **Mental Status**
- **PASRR Level 1 Completed**
- **Function**
- **Immunization/Screening**
- **Bowel/Bladder**

Sections 27 – 29

- **Sending Facility Contact/Receiving facility Contact**
- **Form Prefilled By**
- **Form Completed By**

When is a UTF reviewed:

- **During Standard Licensure surveys as part of closed record review if the patient/resident was transferred/discharged from one licensed provider to another**
- **During a complaint investigation if the allegation of non-compliance pertains to transfer/discharge from one licensed provider to another**

Common Deficiencies with the UTF:

- **Not using the UTF at all**
- **Incomplete/inaccurate UTF**
- **Failure to retain a copy of the UTF in the medical record**