

Principles for safe, high-quality transitions of care



Person-centred

Transitions of care are based on shared decision making, informed consent and goals of care.



Multidisciplinary collaboration

There are established systems for collaboration and communication amongst the multidisciplinary team, including the person's regular general practitioner to support them in the coordination of their care.



Documenting and accessing information

There is an enduring comprehensive and secure record system to document and access information about the person's previous and ongoing care, at transitions.



Ongoing continuity of care

There is coordination and continuity of care, that relies on responsibility and accountability between the treating team, the person, their family/carer, and the receiving service.

