

Transitions in Care and Services

What is a transition in care?

A transition in care happens when a person moves from one setting where they are receiving care or services to another. For example, you or a loved one may be moving from one unit in a hospital to another unit, or from home to a long-term care residence. This Fact Sheet focuses on transitions when moving from one setting to another.

What may change?

These transitions often involve new routines, new health or social service providers involved in your care, and changes to medications or care needs.

Before the transition, your health-care team should ask about:

- your goals for the transition
- family or friends you would like to involve
- how the team can support you

You should be involved every step of the way.



Your health-care team should provide information about:

- **Medications**, including:
 - changes to medications and why any changes were made
 - how to take your medications (dose, frequency and route)
 - side effects to be aware of
- **Medical equipment**, if needed, and how to pay for it
- **Community resources or services**
- **Follow-up appointments**, including:
 - where, when and with whom you will meet
 - transportation options
- **Symptoms or other changes** to watch for
- **Who to contact** if you have questions or concerns

Transitions in care may be unexpected or unsettling.

Getting information from your health-care team can help you manage the transition and cope with common challenges. See the list of important information on the other page of this document.

If your health-care team doesn't give you this information, ask them to do so.

Tell your health-care team if you:

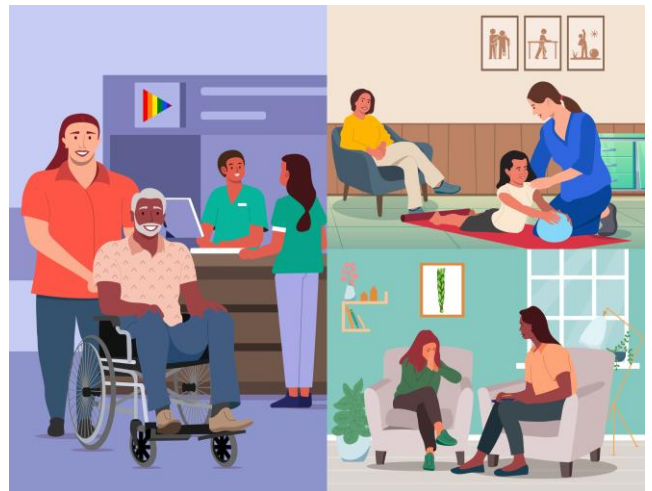
- don't understand the information being shared with you
- need help with transportation to appointments
- need a place to stay after the transition
- are worried about how to pay for medications or medical equipment
- don't have a primary health-care provider to follow up with
- need support to cope with the transition

How can you be involved in planning for a transition in care?

- learn about the health and care needs of yourself or your loved one
- request regular updates from the health-care team and ask questions so you have the most current information
- ask for a copy of your transition plan so you can keep track of changes to medications, treatments, tests or appointments

Tip!

It can be helpful to have a family member or friend take notes to help record important information when planning for the transition.



If you are caring for someone experiencing a transition in care, the health-care team should ask about your care needs too. Let them know if you have concerns about managing care at home and what types of support you need. The team is there to help.

This health education fact sheet was developed using content from the RNAO best practice guideline (BPG) *Transitions in Care and Services, Second Edition* (2023). All of RNAO's BPGs are free to download at [RNAO.ca/bpg](https://www.rnao.ca/bpg). For more information about this guideline, scan the QR code or visit [RNAO.ca/bpg/guidelines/transitions-in-care](https://www.rnao.ca/bpg/guidelines/transitions-in-care)

