Dr. King plans to design a related resident curriculum, which will incorporate multidisciplinary teams and structured time for handoffs to occur during a patient’s clinic visit.

The risk identification system combines information from the VA electronic medical record, risk assessment scores, and clinical acumen. Empowered with this information, resident clinicians can arrange in-person transfer of high risk patients to new providers. Surveys of resident participants indicate this initiative improved resident satisfaction with the continuity clinic hand-off process.

As a primary care provider at VA Puget Sound, Dr. King observed that transition of patients from graduating residents to incoming interns was rarely done in person. She noted that much of the prior work to improve patient handoffs was focused on inpatient settings.

With the goal of improving the transition of care for patients and providers alike, King and her collaborators developed a system that helps senior residents identify patients at-risk for adverse events resulting from care transitions.