

Implementing a Structured, yet Flexible Tool for Critical Information Handover

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Abstract : An effective process for transmitting patient critical information is essential for patient safety and for improving communication among healthcare staff. Previous studies have discussed handover tools such as SBAR (Situation, Background, Assessment, Recommendation) or SOFI (Short Observational Framework for Inspection). Yet, these formats lack flexibility, and require special training. In addition, nurses and physicians have different procedures for handing over information. The objectives of this study were to establish a universal, structured tool for handover, for both physicians and nurses, based on parameters that were defined as 'important' and 'appropriate' by the medical team, and to implement this tool in various hospital departments, with flexibility for each ward. A questionnaire, based on established procedures and on the literature, was developed to assess attitudes towards the most important information for effective handover between shifts (Cronbach's alpha 0.78). It was distributed to 150 senior physicians and nurses in 62 departments. Among senior medical staff, 12 physicians and 66 nurses responded to the questionnaire (52% response rate). Based on the responses, a handover form suitable for all hospital departments was designed and implemented. Important information for all staff included: Patient demographics (full name and age); Health information (diagnosis or patient complaint, changes in hemodynamic status, new medical treatment or equipment required); and Social Information (suspicion of violence, mental or behavioral changes, and guardianship). Additional information relevant to each unit included treatment provided, laboratory or imaging required, and change in scheduled surgery in surgical departments. ICU required information on background illnesses, Pediatrics required information on diet and food provided and Obstetrics required the number of days after cesarean section. Based on the model described, a flexible tool was developed that enables handover of both common and unique information. In addition, it includes general logistic information that must be transmitted to the next shift, such as planned disruptions in service or operations, staff training, etc. Development of a simple, clear, comprehensive, universal, yet flexible tool designed for all medical staff for transmitting critical information between shifts was challenging. Physicians and nurses found it useful and it was widely implemented. Ongoing research is needed to examine the efficiency of this tool, and whether the enthusiasm that accompanied its initial use is maintained.

Keywords : handover, nurses, hospital, critical information

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