



Call Back in 15 Minutes: Our Journey to EHandoff

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Background

Handoff is a necessary part of patient care to ensure safe and effective transitions. Delays in handoff results in increased PACU length of stays, which cause delays in other procedures beginning. It was our intent to identify the barriers to a timely, accurate, and concise handoff of patient information. When we began our journey we focused our efforts on creating an electronic handoff tool within our existing EHR software. Our goal was to reduce potential sentinel events by creating a focused handoff process for our unit that concluded with implementation throughout the entire health system.

Length of Stay

Aim of the Project

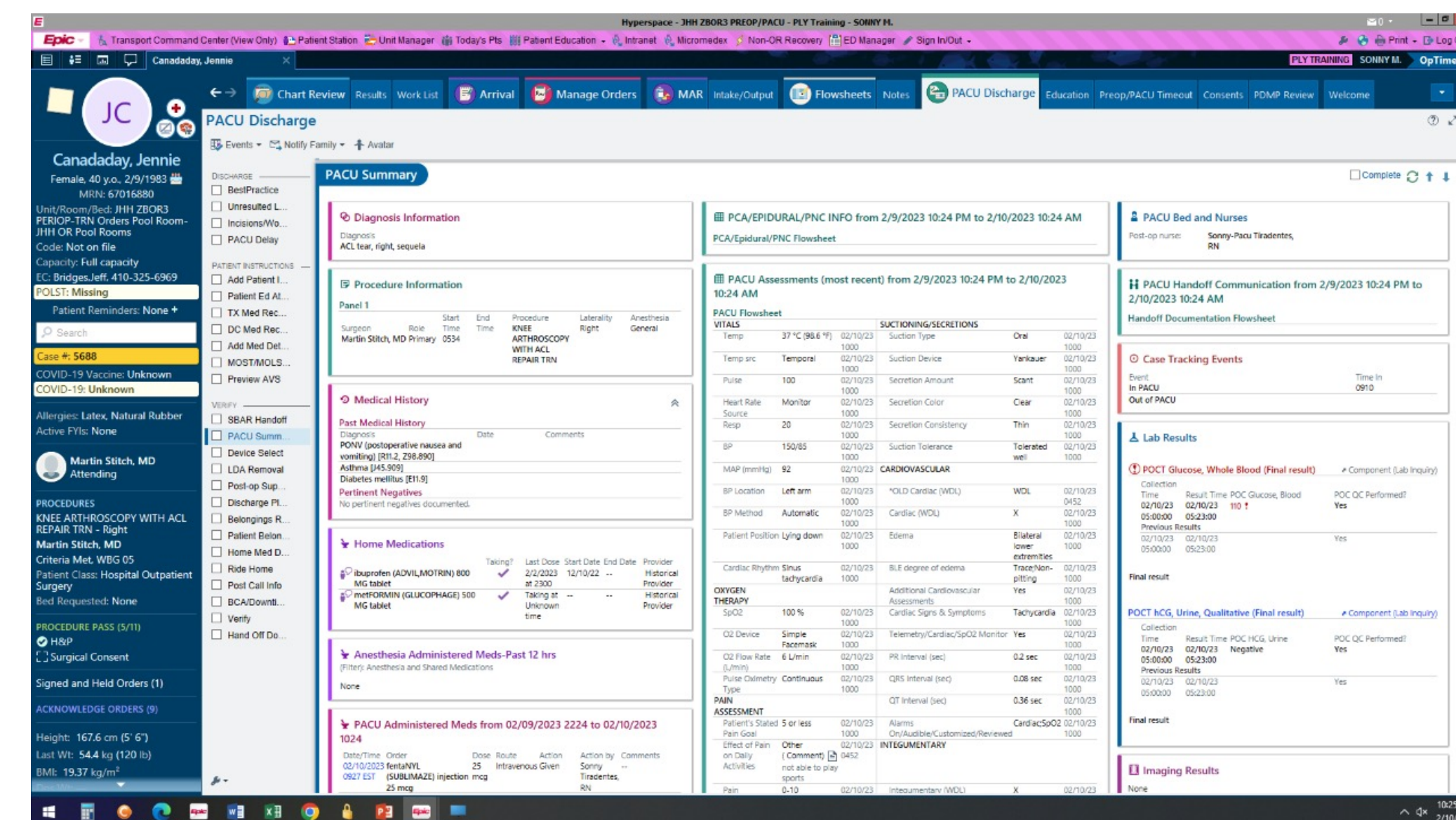
The purpose of this project was to decrease the length of time for nurses to complete patient handoff between the PACU and inpatient units once a patient met PACU discharge criteria. We hoped to create a standardized electronic handoff tool to minimize the loss of pertinent information and reduce the exchange of information that was not needed. The new process aimed at improving throughput during the post operative period.

Description of the Intervention

Baseline data was collected prior to an intervention being implemented. Then the first stage of the process was implemented creating a timeframe in which handoff should be completed between PACU and the inpatient units. Next, an electronic-only handoff tool was introduced. Then, we decreased the allocated length of time for handoff from thirty minutes to fifteen minutes. Collaboration with bed managed aided with this decrease by assigned "dirty" inpatient rooms to PACU patients. Finally, electronic only handoff within 15 minutes was implemented.

Description of Data Collection and Analysis

Baseline data was collected using a bedside tool given when patients were assigned to PACU nurses. Data was collected at the time when a patient met discharge criteria, timing of the initial phone call, the number of phone calls needed to give handoff, and when handoff to the inpatient unit was completed. Data was defined as a numeral timeframe that was timed in minutes. A timeframe exceeding fifteen minutes identified an unsuccessful attempt at the new process and evaluation of the reason for the delay was evaluated and addressed. Outliers were identified and evaluated on an individual basis.



Outcomes Measures or Results



Implications for Practice

Data collected indicated that our desired fifteen-minute timeframe for handoff was an achievable goal. Once a need for an electronic handoff tool was identified we worked with both leadership and informatics to develop a clear and concise framework of pertinent information that would allow for an effective handoff process. The electronic handoff tool did evolve throughout the process to allow for the inpatient nurses to have a buy in on what information they desired in the tool. The collaboration between the ourselves (PACU nurses) and inpatient nurses allowed for the development of a electronic handoff tool that benefits both patients and all nurses involved.

Lessons Learned

The resistance to change by nurses in both PACU and inpatient units caused delays in the progression of this initiative. However, with positive reinforcement and highlighting the benefits we were able to implement an innovative and efficient way of giving patient handoff.

References

- Beigmoradi, S., Pourshirvani, A., Pazokian, M., & Nasiri, M. (2019). Evaluation of nursing handoff skill among nurses using situation-background-assessment-recommendation checklist in general wards. *Evidence Based Care*, 9(3), 63-68.
- Galatzan, B. J., & Carrington, J. M. (2021). Examining the meaning of the language used to communicate the nursing hand-off. *Research in Nursing & Health*, 44(5), 833-843.
- Panda, S. (2020). Nursing Shift Handoff Process: Using an Electronic Health Record Tool to Improve Quality. *Number 5/October 2020*, 24(5), 583-585.