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Introduction:

Every new admission to the Intensive Care Unit (ICU) prompts a handover from the referring department to the ICU staff. This step in the patient pathway provides an opportunity for information to be lost and for patient care to be compromised.

Mortality rates in Intensive Care have fallen over the last twenty years, however, 20% of patients admitted to an ICU will die during their admission¹. Communication errors contribute to approximately two-thirds of notable clinical incidents; over half of these are related to a handover².

NICE have concluded that structured handovers can result in reduced mortality, reduced length of hospital stay and improvements in senior clinical staff and nurse satisfaction³.

Methods:

A checklist was created with doctors and nurses to review the information shared and to score each handover. This was relevant for handovers between all staff members. Information was gathered prospectively by directly observing 17 handovers on the ICU.

Results:

There is a notable discrepancy in the quality of handovers of new patients. This is true of handovers between doctors, nurses and a combination of the two. It is also true of all staff grades. Whilst a doctor may have reviewed the patient prior to their arrival, 41% (n=7) of patients weren't handed over to a doctor. The most commonly missed pieces of information were the patient's weight (96%, n=16), their height (100%, n=17), whether they had previously been admitted to an ICU (78%, n=15) and whether they had any allergies (71%, n=12).

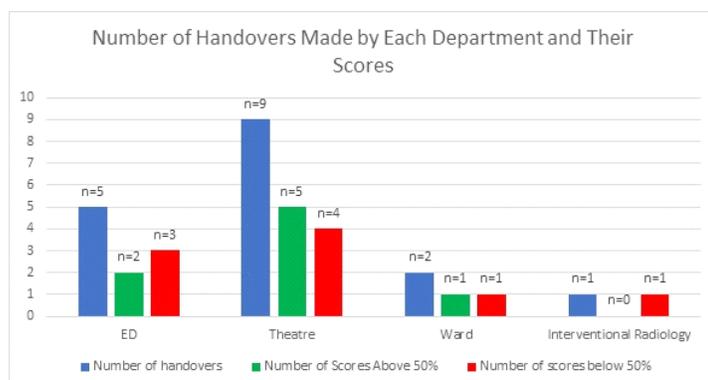
Conclusion:

The handover of new patients to the ICU is often unstructured and information is missed. This is true for all staff members and grades, and for handovers from all hospital departments. Standardising handovers could improve their efficiency and effectiveness.

References:

1. ICS. Guidelines for the Provision of Intensive Care Services, Version 2. ICS; 2018.
2. Starmer AJS, et al., I-PASS, a Mnemonic to Standardize Verbal Handoffs. Pediatrics. 2012;129(2).
3. Chapter 32, Structured Patient Handovers, (2018).

Image :



A graph showing the score various departments achieved with their handovers