Introduction

Ineffective ED handoff can lead to adverse events and near misses for inpatients during transitions of care. It has been demonstrated that a standardized handoff process can lead to a reduction in errors and improvement in patient safety. We determined that variation exists throughout the Children’s system in the content and quality of ED to hospitalist verbal handoffs and sought to improve this process.

Objective

- To implement a standardized handoff checklist between pediatric ED and admitting hospitalist clinicians
- Demonstrate improvement in handoff satisfaction among providers
- Demonstrate use of handoff tool in at least 85% of admission by 2019

Context

- 2-campus, 430-bed, tertiary children’s hospital (~15,000 inpatient and 92,000 ED visits annually)
- 2 hospitalist teams
- ED handoffs occur between an ED provider (MD, NP, fellow, or resident) and an admitting hospitalist MD
- Project team: 4 hospitalists, 2 ED physicians, 4 resident physicians
- Team incentives: MOC part 4 credits, financial incentive

Interventions

Four plan-do-study-act (PDSA) cycles:
1. 20-item checklist implemented
2. Placard on ED computer
   - Educating staff at meetings and via e-mail
3. Revision of checklist placard (addition of primary clinic)
4. Electronic surveys to clinicians
5. Summary page with run chart posted in hospitalist workrooms

Outcomes/Measures

1. Checklist item adherence – 20 core elements
2. Provider satisfaction and awareness of checklist

Results

- 382 handoffs assessed
- Pre-implementation: average of 8.6 checklist elements
- Post-implementation: adherence increased to an average of 11.3 checklist elements on (Figure 2)

Challenges

1. Differing perspectives and buy-in of ED providers vs. hospitalists
2. Low overall provider awareness
3. Limited trainee orientation to checklist

Conclusions/Next Steps

- Survey response rate: 44% of hospitalists (28/64) and 44% of ED providers (31/71)
- Checklist Awareness:
  - 56% (14/25) of hospitalists
  - 63% (19/30) of ED providers
- Handoff Quality as “good” or “very good”:
  - 96% (29/30) ED providers
  - 64% (16/25) of hospitalists

References and Acknowledgements


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