

'Back to Basics' A Structured Handover

Aim Statement – By March 2024, 95% of nursing staff coming onto an early shift in Ettrick and Nithsdale wards Midpark Hospital will have a structured handover within 15 minutes to enable them to start the shift safely.

Background

It had been recognised in both mental health adult acute wards that the nursing handover at the start of the shift had lost structure with variation in both delivery and content with several contributing factors. It was noted staff were not always getting a verbal handover before starting shift and were taking time away from clinical contact to read clinical notes for information.

To enable staff confidence in having the right information to start the shift safely we used QI Methodology to help us understand the problem and collaboratively develop a comprehensive handover.

Conclusions

Gathering staff views evidenced our prediction that verbal handovers did not have enough information. A checklist was welcomed by the team as outlines who, where and when a handover should occur. Guidance on the content of handover was tested in both wards on the early shift. Feedback and rapid cycles of testing allowed us to move to implementation, with staff reporting they feel handover has improved and feel safe to commence the shift.

Handovers are a key point of communication, sharing valuable information, in a consistent and structured format enables a well informed & confident team & underpins planning to provide safe, effective and person-centered care for the shift ahead.

How Will We Know A Change Is An Improvement?

There will be consistency in the delivery & content of the handover and staff will feel confident & safe to start their shift. Staff will have increased time for clinical contact.



Next Steps

Scale up to include all handovers in pilot wards, nightshift will be straight forward, backshift handover will be more challenging due to variety in shift patterns and the differing start & finish times, additional testing will be required. Share with other wards in Midpark Hospital

Understanding current handovers: what works & what could be improved, team engagement was crucial to understand the problem & gain a shared vision



Ettrick and Nithsdale Shift HANDOVER PROTOCOL

WHO will be present?

The Nurse in Charge is the designated leader of the shift handover. Key personnel who must be present are:

Nurse in charge | Registered nurses | HCSW | Student nurses

WHAT

The handover will follow a structured format

The handover process will include the following components where relevant:

Reason for admission (within 1st 72hrs of admission)
Diagnosis
Legal status (if detained or any change to detention status)
PDD – (only if due in the next week)
Summary of identified risks
Improvement/ deterioration of mental health
Observation level (if on observations/enhanced intervention or any change to level)
Time out
Physical health needs (if applicable)
Actions for next shift

WHEN

Handover commences promptly at 07.30 hours. Only person giving handover to be in office with incoming staff, if there is a admission to handover the admitting nurse can hand that person over

WHERE

Nursing Office

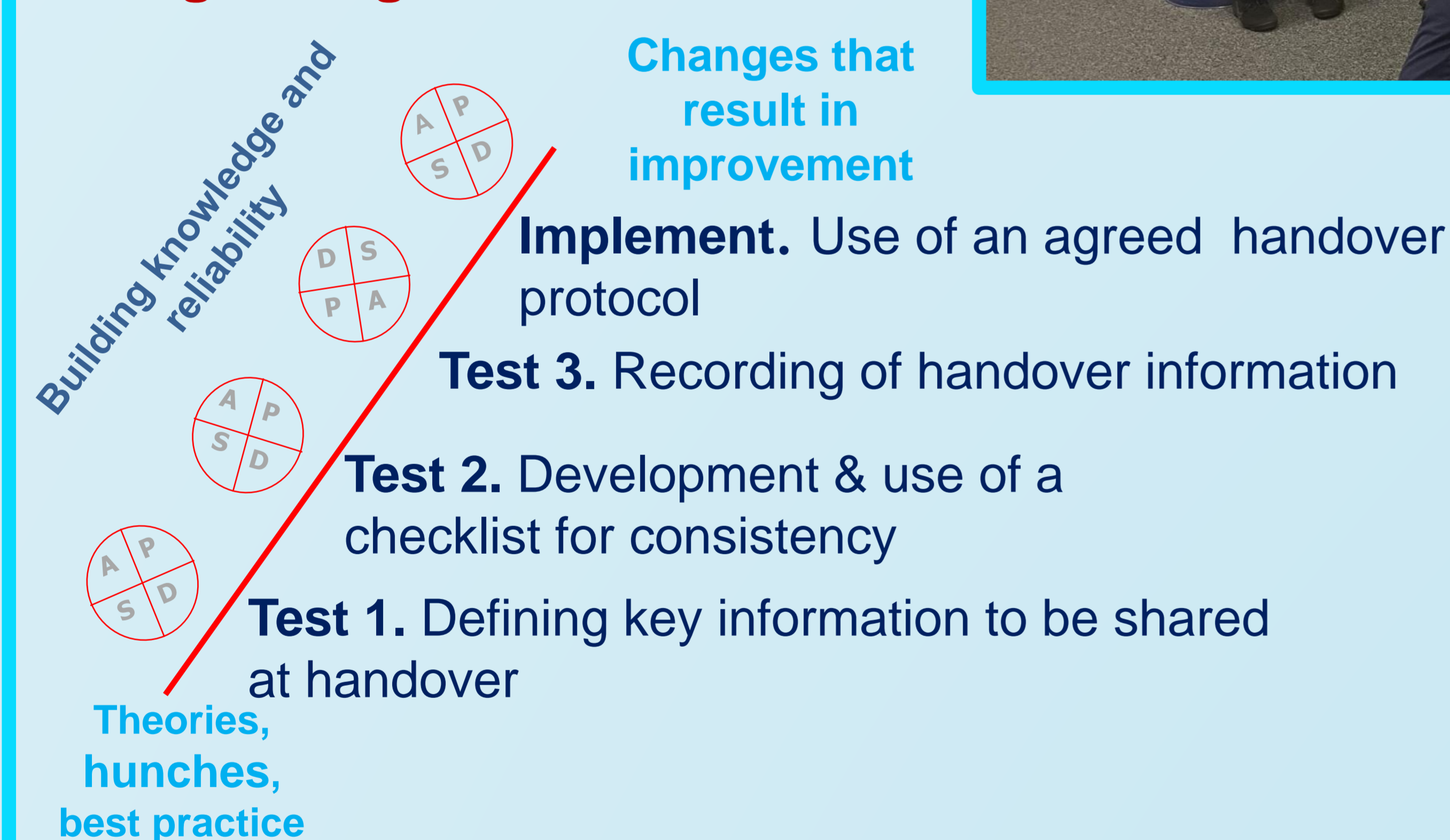
HOW

- o Patient at a glance board
- o The use of morse

Lee Hannah & Kerry Smith testing Nov 2023

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Testing Change Ideas



Learning Through Testing

- Did you feel safe to start your shift?
- Was there enough content to new style handover?
- Was there too much information to new style handover?
- Does handover nurse feel they handed over key information?
- Did it take longer than 15 minutes?

Nursing Handover								
Name	Diagnosis	Legal Status	PDD	Risks	Obs Level	Time Out	Physical Health Needs	Actions for next Shift

Results

Following the changes, we can now say

All staff have the right information to start shift safely

A structured handover has been implemented

Staff feel more confident in the information they are expected to handover

Timely handovers, has increased time available to spend with patients

Key Learning Points

- Completing this project as part of the SIFS program allowed us to consolidate the theory learned.
- Its important to pause and review routine practice as getting these right can have a big impact
- QI methodology, made us feel more confident to test change ideas & we liked seeing progress in the PDSA cycles
- Use the tools you find most helpful
- Successful change comes from building good relationships & getting people involved

