

Improving the handover process in the emergency medicine department

St Nicolas Hospital / St Marc, Haiti

D. St Juste, RMF, J.P. Docteur, RMF, R. St Jean, MD, C. Mérisier, Inf., C. Charlemagne, RSS, W. Semé, MD, R. Casimir, MD, O. Saintérant, MD



Description

Fragmentation of health care increases transitions and results in omission or poor information transmission that can lead to serious clinical consequences. The standardized approach for communication during the award SBAR method proves to reduce the adverse effects of communication.

An evaluation made in the emergency department in August 2017 showed that there was a gap of communication within the team because of the lack of the handover process.

Aim

Optimize the handover process in emergency department

Objectives

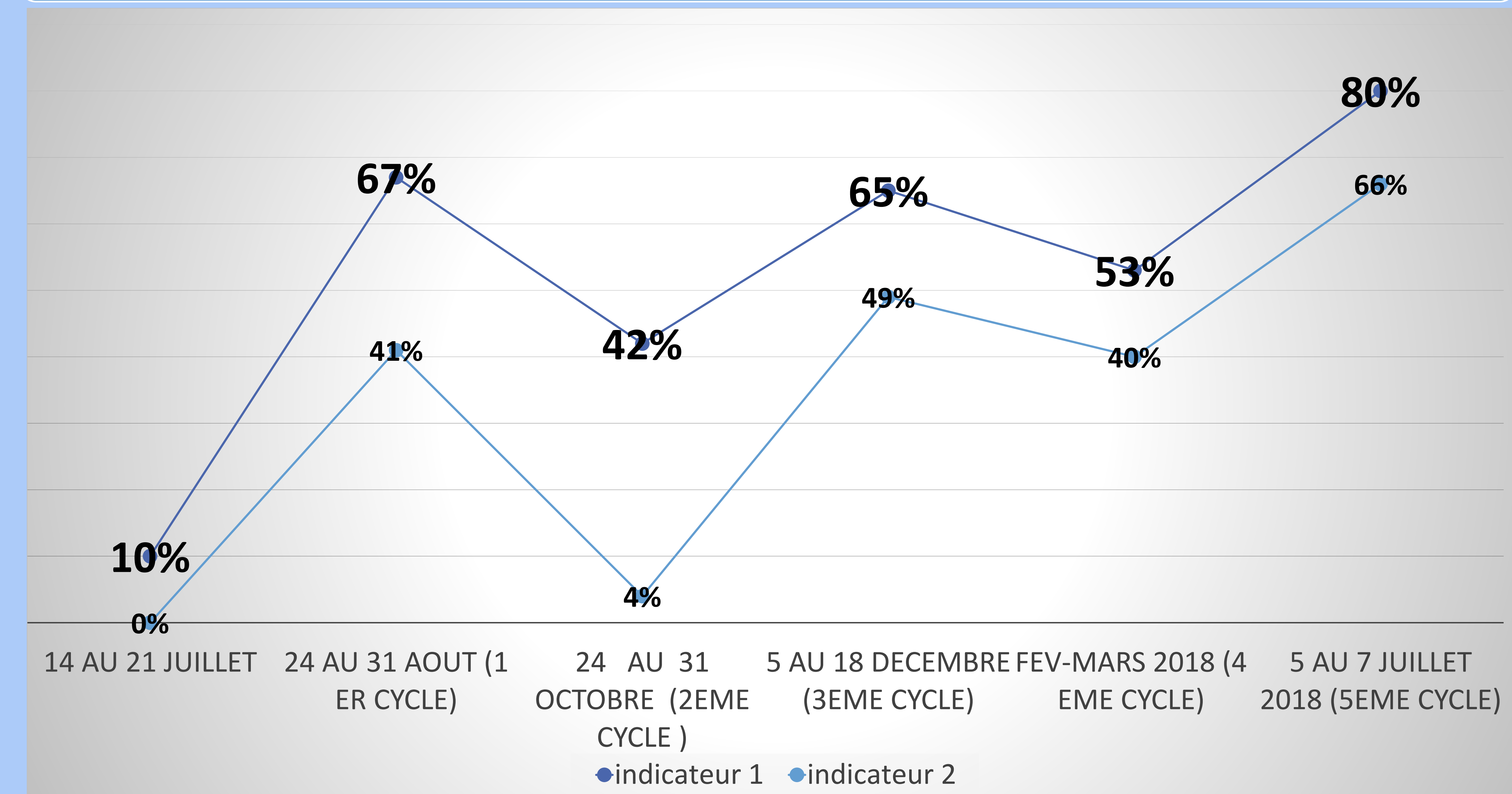
- 1- Increase to 50% the number of patient records where the handover process were documented
- 2- Increase to 20% the number of patient records where the handover process using the SBAR method were documented

Methodology

Continuous Quality Improvement Method has been used to investigated the root causes analysis and process strategies.

The QI project team decided to use the SBAR method as handover process. Trainings were made for the emergency medicine team.

Results



July 2017 : The initial measure showed that only 10% of patient medical records had a documented handover and none of them had used the SBAR method.

August 2017: We introduced and handover form using the SBAR method for each patients

October - December 2017 : Using a global handover form containing the informations of the overall patients in the ward to facilitate the communication within the team and to decrease the workload.

March – July 2018 : Continuing evaluation

Lessons learned

- Change strategies when the situation require it
- Infrastructure is an important part in improvement
- Perseverance and will are necessary in the process of improvement