Effect of Patient Handoff Methods on Nurse Self-Efficacy

Christopher Guelbert DNP, RN, CCRN, CNML
Assistant Professor of Nursing

Barnes-Jewish Hospital, St. Louis, Missouri
Goldfarb School of Nursing
Effect of Patient Handoff Methods on Nurse Self-Efficacy

Objectives:

• Review literature surrounding patient handoffs in nursing.
• Identify which type of patient handoff creates the highest self-efficacy in nursing staff.
• Discuss future research opportunities related to patient handoffs in nursing.

I have no personal or financial interests to declare for this presentation.

I am affiliated with Barnes-Jewish Hospital and the Goldfarb College of Nursing in Saint Louis, Missouri.
Review of Literature

• Methods of Handoff
• Technology and Handoffs
• Perioperative Handoff Processes
• Handoff Failures and Process Improvement
Ford and Heyman (2017)
Taylor (2015)
Sand-Jecklin and Sherman (2014)
Holly and Poletick (2014)
Technology in Handoffs

- Chapman et al. (2016)
- Staggers and Blaz (2013)
Perioperative Handoff Processes

• Robinson (2016)
• Rose and Newman (2016)
• McMullan, Parush, and Momtahan (2015)
• Mardis et al. (2017)
• Natafgi et al. (2016)
• Small et al. (2016)
• Halm (2013)
Effect of Patient Handoff Methods on Nurse Self-Efficacy

• Studied handoff processes between the PACU and surgical floors at Barnes-Jewish Hospital.
• Utilized the Nursing Care Self-Efficacy Scale developed by Dr. Darlene Welsh at the University of Kentucky.
• At time of study, Barnes-Jewish Hospital was utilizing a written handoff tool, telephone, and face-to-face handoffs between the PACU and surgical floors.
• Performing over 41,000 surgeries annually, each handoff method presented different challenges.
• Twenty-five surgical nurses were initially surveyed that had received a PACU patient.

• Informational letter of consent was given to participants with an online link to the Nursing Care Self-Efficacy Scale (NCSES) survey.

• Survey instrument utilized select questions from the NCSES.

• Basic demographic data was collected from respondents.

Effect of Patient Handoff Methods on Nurse Self-Efficacy
After the initial data was collected, PACU nurses were educated on a structured handoff method based upon the Five P’s: Patient information, plan of care, purpose/outcomes, precautions, and problems.

A second group of fourteen surgical nurses were surveyed post PACU education intervention, using an identical survey instrument.
## Comparison of Self-Efficacy Scores Based on Type of Handoff in Each Group

<table>
<thead>
<tr>
<th>Type of Handoff</th>
<th>Pre-Education Group</th>
<th>Post-Education Group</th>
</tr>
</thead>
<tbody>
<tr>
<td>Received:</td>
<td>n=25</td>
<td>n=14</td>
</tr>
<tr>
<td>Face-to-Face</td>
<td>8.51</td>
<td>No Data Available</td>
</tr>
<tr>
<td>Telephone</td>
<td>8.35</td>
<td>8.82</td>
</tr>
<tr>
<td>Written</td>
<td>No Data Available</td>
<td>No Data Available</td>
</tr>
<tr>
<td>None</td>
<td>No Data Available</td>
<td>8.00</td>
</tr>
</tbody>
</table>
## Comparison of Cumulative Self-Efficacy Scores in Pre- and Post-Education Groups

<table>
<thead>
<tr>
<th>Degree of Confidence to:</th>
<th>Pre-Education Cumulative Self-Efficacy Score:</th>
<th>Post-Education Cumulative Self-Efficacy Score:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collaborate effectively with the interprofessional team.</td>
<td>8.36</td>
<td>8.78</td>
</tr>
<tr>
<td>Intervene to minimize patient pain and suffering.</td>
<td>8.44</td>
<td>8.92</td>
</tr>
<tr>
<td>Safely perform the technical skills required for patient care.</td>
<td>8.52</td>
<td>8.78</td>
</tr>
<tr>
<td>Prioritize interventions to address changing patient needs.</td>
<td>8.48</td>
<td>8.71</td>
</tr>
<tr>
<td>Implement interventions to effectively treat patient problems.</td>
<td>9.00</td>
<td>8.78</td>
</tr>
<tr>
<td>Interpret patient data from a variety of sources.</td>
<td>8.28</td>
<td>8.50</td>
</tr>
<tr>
<td>Evaluate patient response to care.</td>
<td>8.40</td>
<td>8.85</td>
</tr>
</tbody>
</table>
Handoff processes between the PACU and receiving nurse on surgical floors has not been studied previously.

Results from the NCSES questions in this project indicated increased self-efficacy scores among the face-to-face handoff participants.

Data suggested that the use of the Five P's as a guide for PACU staff during patient handoff increased the receiving nurse self-efficacy scores.
Future Research

Technology driven patient handoffs between divisions.

Use of telepresence robots for patient handoffs.

Combining EHR with telepresence.
References


References


References


Questions?