A Healthy Work Environment Endeavor

Postoperative Handover from the OR to CTICU

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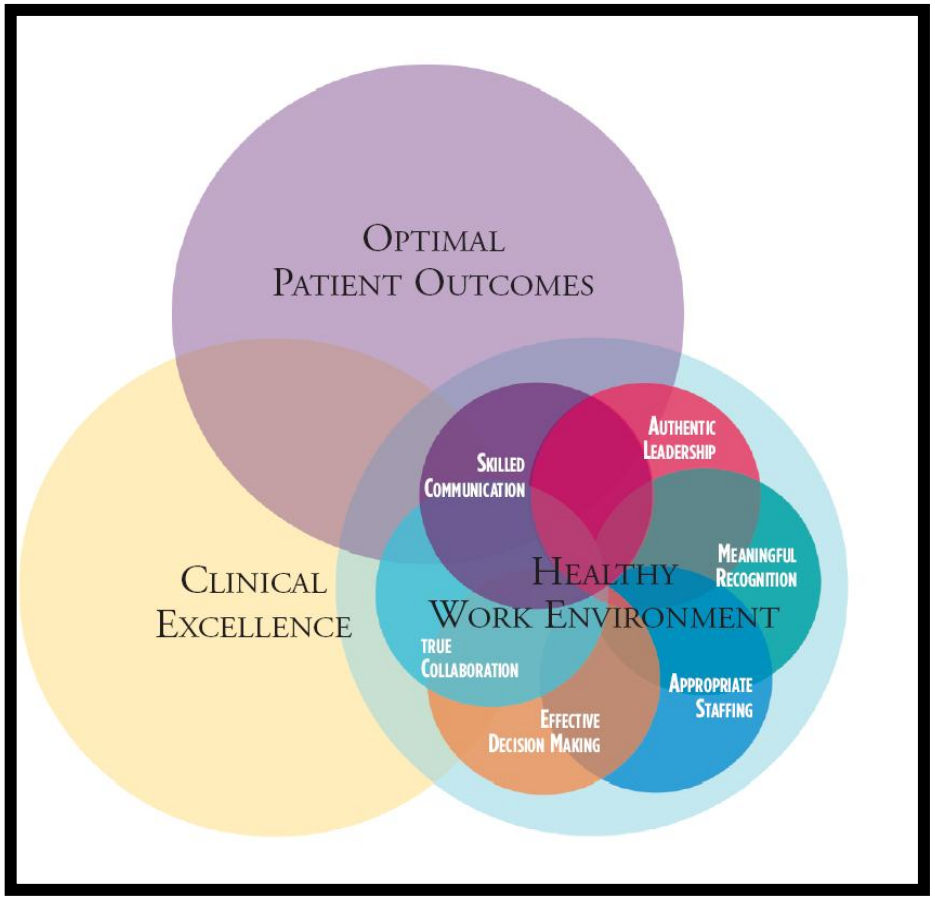
Learner Objectives

- List the essential ingredients of the Healthy Work Environment Standards and how they relate to the postoperative handover process.

- Identify how a structured tool and process enhances communication, collaboration and decision-making among health care providers during the postoperative handover.

The American Association of Critical-Care Nurses (AACN)
Standards for Establishing & Sustaining Healthy Work Environments



"There are essential & non-negotiable elements found in every healthy work environment no matter what, when, where and why."

Dave Hanson

RN, MSN, CNS, CCRN

AACN Standards for Establishing and Sustaining Healthy Work Environments

- **Authentic Leadership** - Leaders must fully embrace the imperative of a healthy work environment, authentically live it and engage others in its achievement.
- **Meaningful Recognition** – Nurses must be recognized and must recognize others for the value each brings to the work of the organization.
- **Appropriate Staffing** - Staffing must ensure the effective match between patient needs and nurse competencies.

AACN Standards for Establishing and Sustaining Healthy Work Environments

- **Skilled Communication** – Nurses must be as proficient in communication skills as they are in clinical skills.
- **True Collaboration** – Nurses must be relentless in pursuing and fostering collaboration.
- **Effective Decision Making** – Nurses must be valued and committed partners in making policy, directing and evaluating clinical care and leading organizational operations.

Purpose

To share an evidence-based practice project showing how skilled communication, true collaboration and effective decision making in the postoperative handover is an essential ingredient to a healthy work environment.

Developed an evidence-based tool and guideline for standardizing the postoperative handover process for patients being admitted directly from the Operating Room (OR) to the Cardiothoracic Intensive Care Unit (CTICU).

Clinical Issue

- The transfer of patient information between health care providers is a risk factor for adverse events.
- Communication failures frequently occur during the operative procedure.
- Delay in communicating critical patient information can lead to deterioration in a patient's clinical status.

Evidence

- Ineffective communication between nurses and physicians is the single factor most significantly associated with increased hospital mortality.
- During the transitions of care, inadequate communication is implicated in nearly 70% of all errors and adverse events.
- Joint Commission requires health care organizations to implement standardized handover protocols and facilitate communication between providers.

Review of Literature

Prospective Interventional Study

Would the implementation of a new OR-to-ICU protocol improve provider satisfaction, increase information sharing, and decrease the number of technical defects?

Results

	Pre	Post	P- Value
Presence of all Team Members	0%	68%	**p<0.001**
Parallel conversations	11.3	3.5	**p<0.001**
Missed info in the surgery report	26%	16%	**p=0.03**
Number of questions from ICU team	0.23	0.00	**p=0.0397**
Nurse Satisfaction	61%	81%	**p=0.269**

A standardized handoff protocol can reduce the risk of missed information and improve satisfaction among healthcare providers.

Petrovic, M A, Aboumatar, H, Baumgartner, W A, et al. (2012). Pilot implementation of a perioperative protocol to guide operating room-to-intensive care unit patient handovers. Journal of cardiothoracic and vascular anesthesia, 26(1), 11-16

Review of Literature

Systematic Review

To present a review of the literature on postoperative patient handovers and to summarize process and communication recommendations based on its findings.

Results

- All interventions improved metrics of effectiveness, efficiency, and perceived teamwork.
- An association between poor-quality handovers and adverse events was also demonstrated.

Recommendations

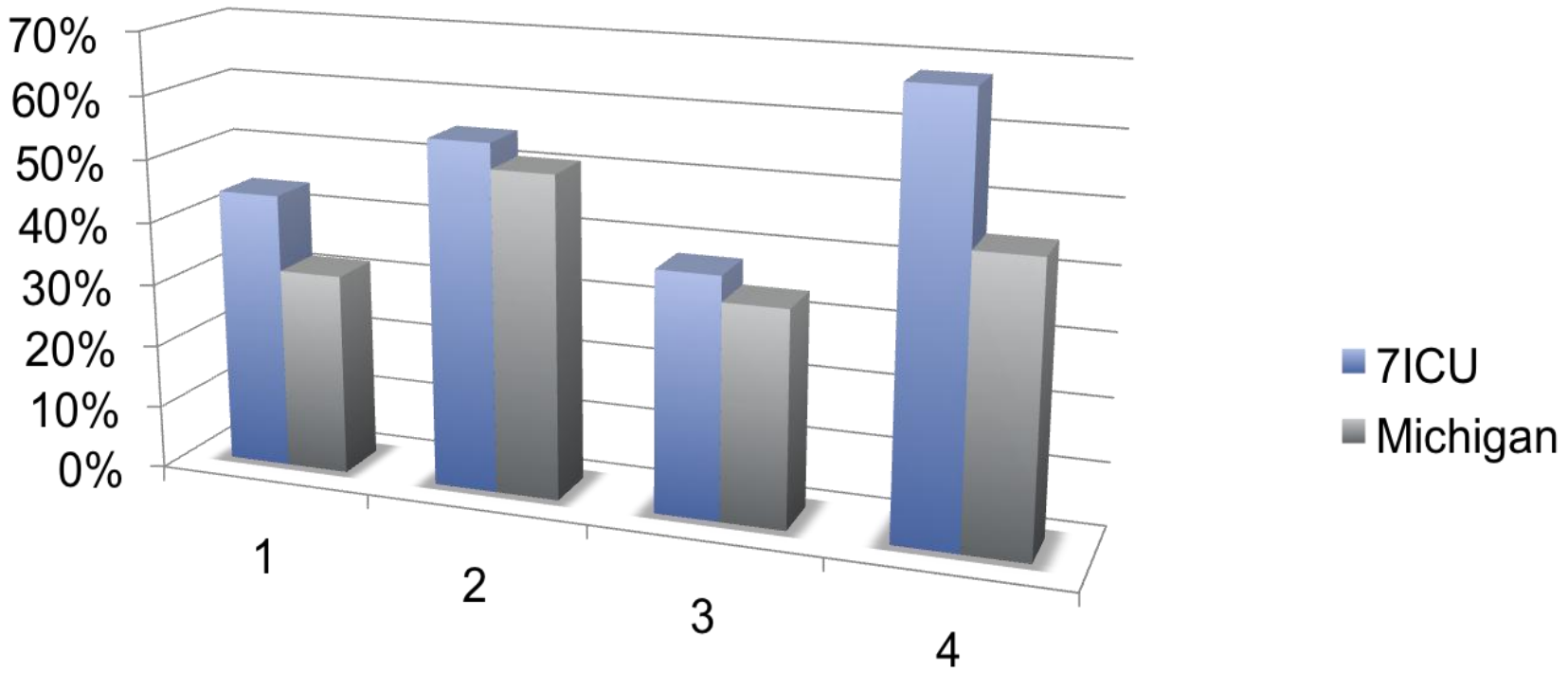
- Standardize processes
- Complete urgent clinical tasks before the information transfer
- Allow only patient specific discussions during verbal handovers
- Require that all relevant team members be present
- Provide training in team skills and communication

Barriers

- Incomplete transfer of information and other communication issues
- Inconsistent or incomplete teams
- Absent or inefficient execution of clinical tasks
- Poor standardization

Segall, N, Bonifacio, A S, Schroeder, R A, et al. (2012). Can we make postoperative patient handovers safer? A systematic review of the literature. Anesthesia and analgesia, 115(1), 102-115.

Baseline CTICU Handovers



1 Things 'fall between the cracks' when transferring patients from one unit to another
2 Important patient care information is often lost during shift changes
3 Problems often occur in the exchange of information across hospital units
4 Shift changes are problematic for patients in this hospital

Evidence-Based Practice Question

Does implementing a standardized handover protocol and tool from the OR to the CTICU, as compared to current variable practice, improve accuracy, completion, consistency and efficiency of report as well as nurse-physician satisfaction (e.g. communication, collaboration and decision-making)?

Interventions

- An evidence-based guideline to standardize postoperative handover
- Pre education knowledge assessment of unit RNs
- Multi-disciplinary education sessions
  - OR and ICU nurses
  - Leadership
  - Physicians
  - Nurse Practitioners
- Post education knowledge assessment of unit RNs
- Coaching and mentoring
- Evaluation of adherence to the evidence-based practice change

Demographic Characteristics of the Sample for Pre and Post Survey

Age	#	%
20-29	22	42%
30-39	23	44%
40-49	4	8%
50 or more	3	6%

Yrs of nursing experience	#	%
≥1	5	10%
2-5	18	35%
6-10	20	38%
11-20	7	13%
≤20	2	4%

Gender	#	%
Male	15	29%
Female	37	71%

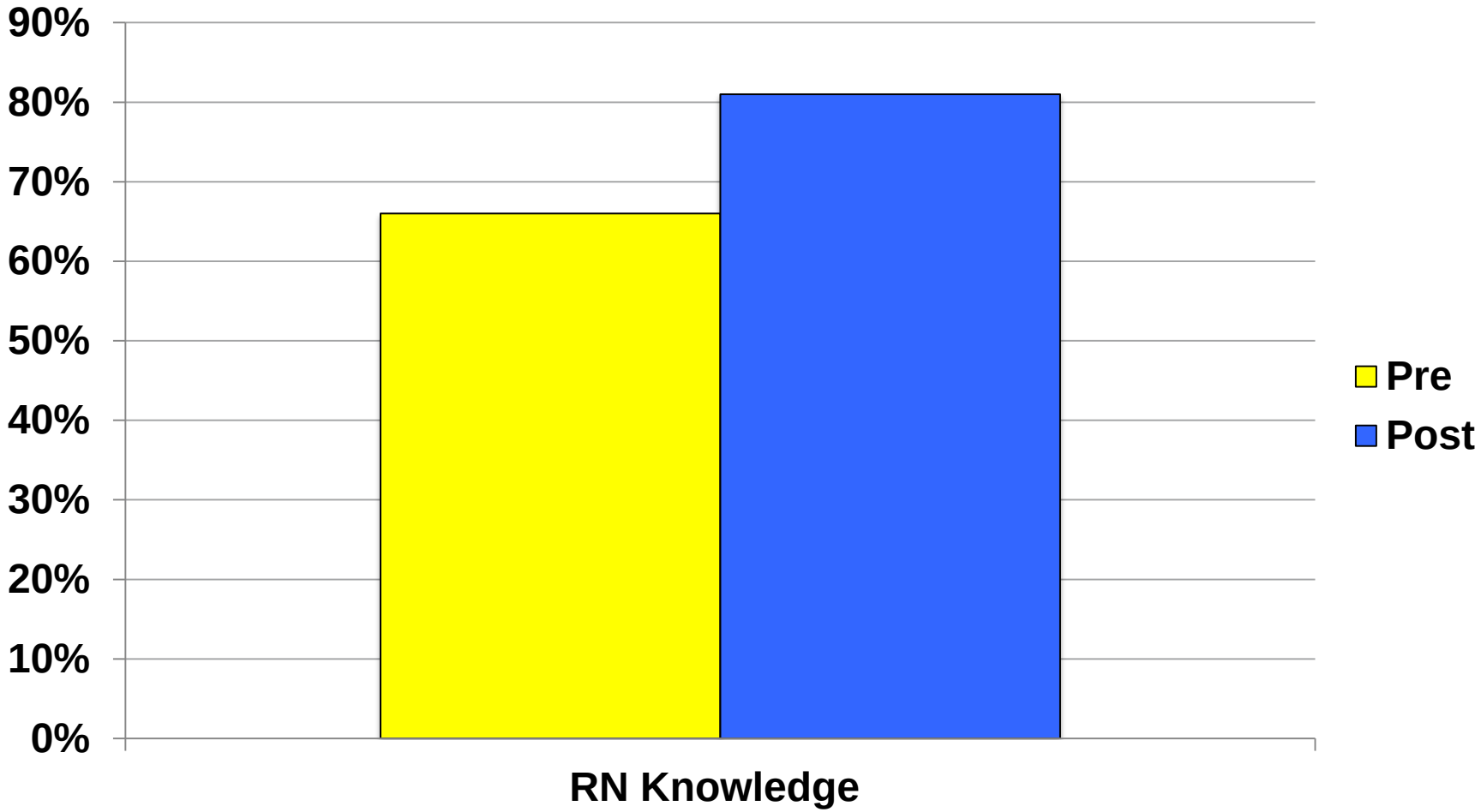
Job Classification	#	%
CN I	3	6%
CN II	33	63%
CN III	11	21%
AN I/II	5	10%

N = 52

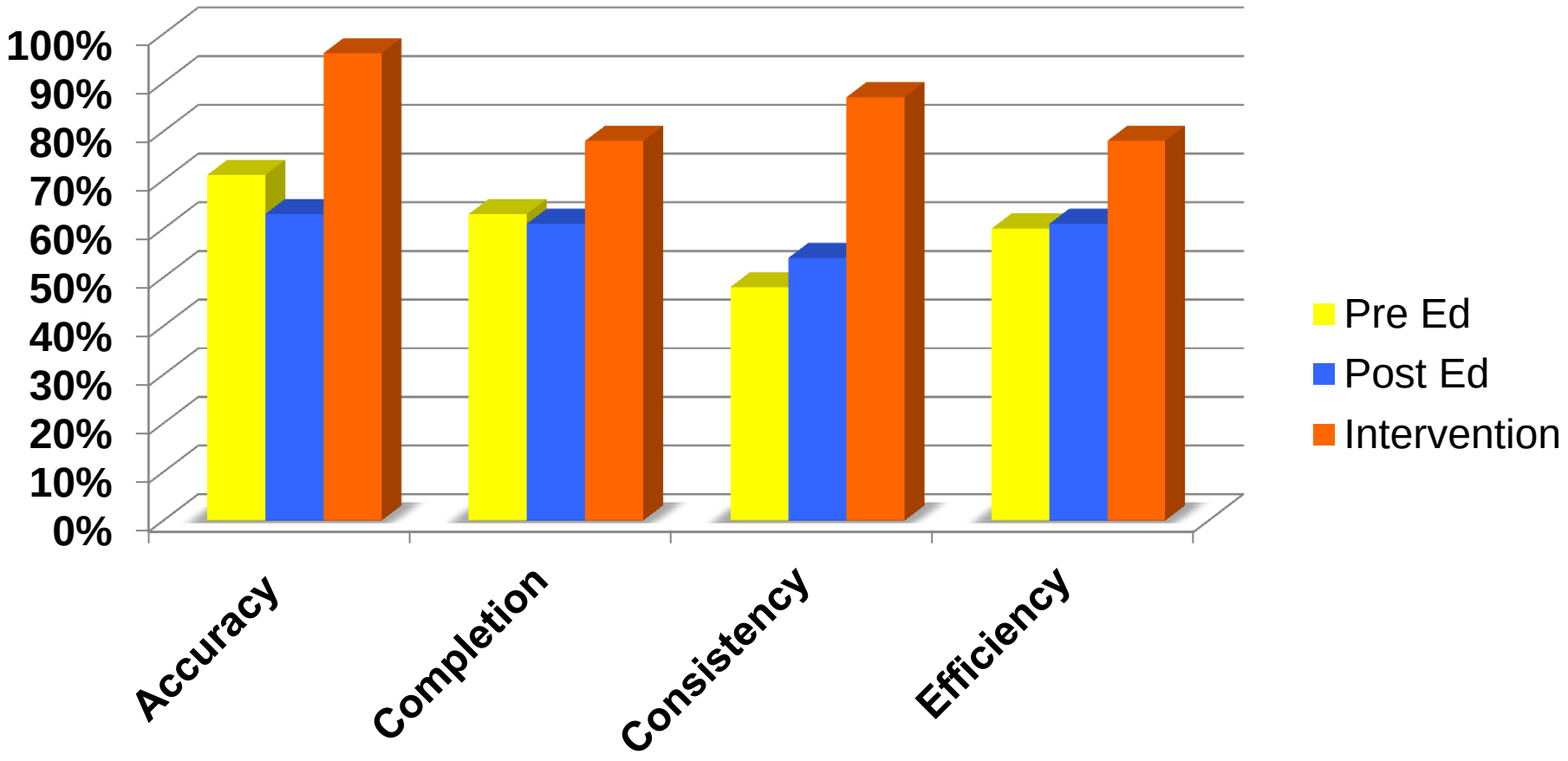
Outcomes Measured

- Pre and Post RN Knowledge Survey
- Satisfaction and Work Environment Survey
  - Accuracy, Completion, Consistency and Efficiency
  - Communication, Collaboration and Decision Making
- Practice Outcomes: Documentation

Results: Percent Correct Score on Pre and Post Knowledge Survey Among Nurses



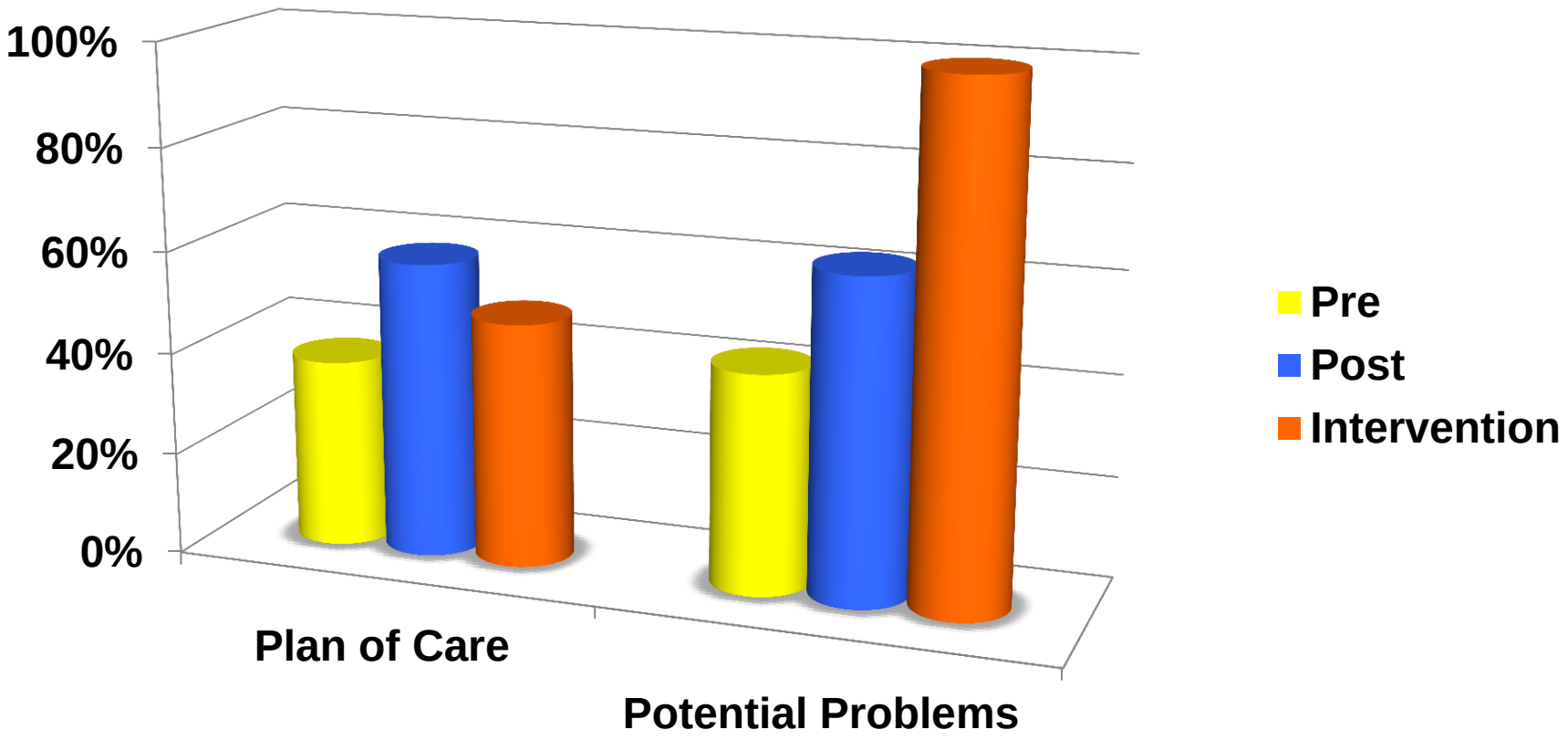
How often does our current handover process and report meet the following?



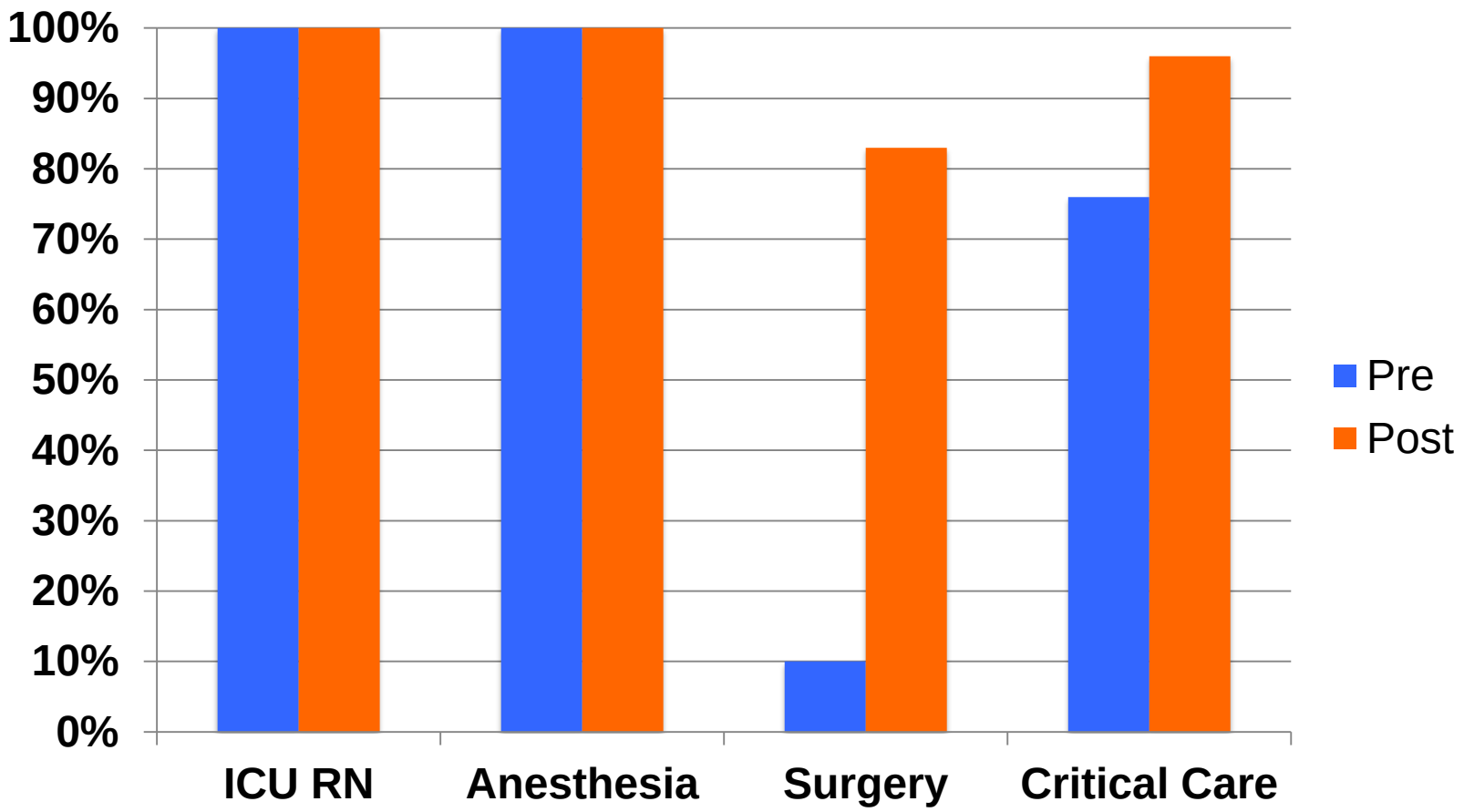
Intervention Measurements

- Communication
  - Introduction of team members
  - Anesthesia provider gives report
  - Surgical provider gives report
  - Identification of the plan of care
  - Information about potential problems
- Collaboration
  - Are all members present at the handover timeout report?
- Decision Making
  - Did the team use the structured Handover Report from OR to CTICU to guide communication and ensure accuracy and completeness of information?

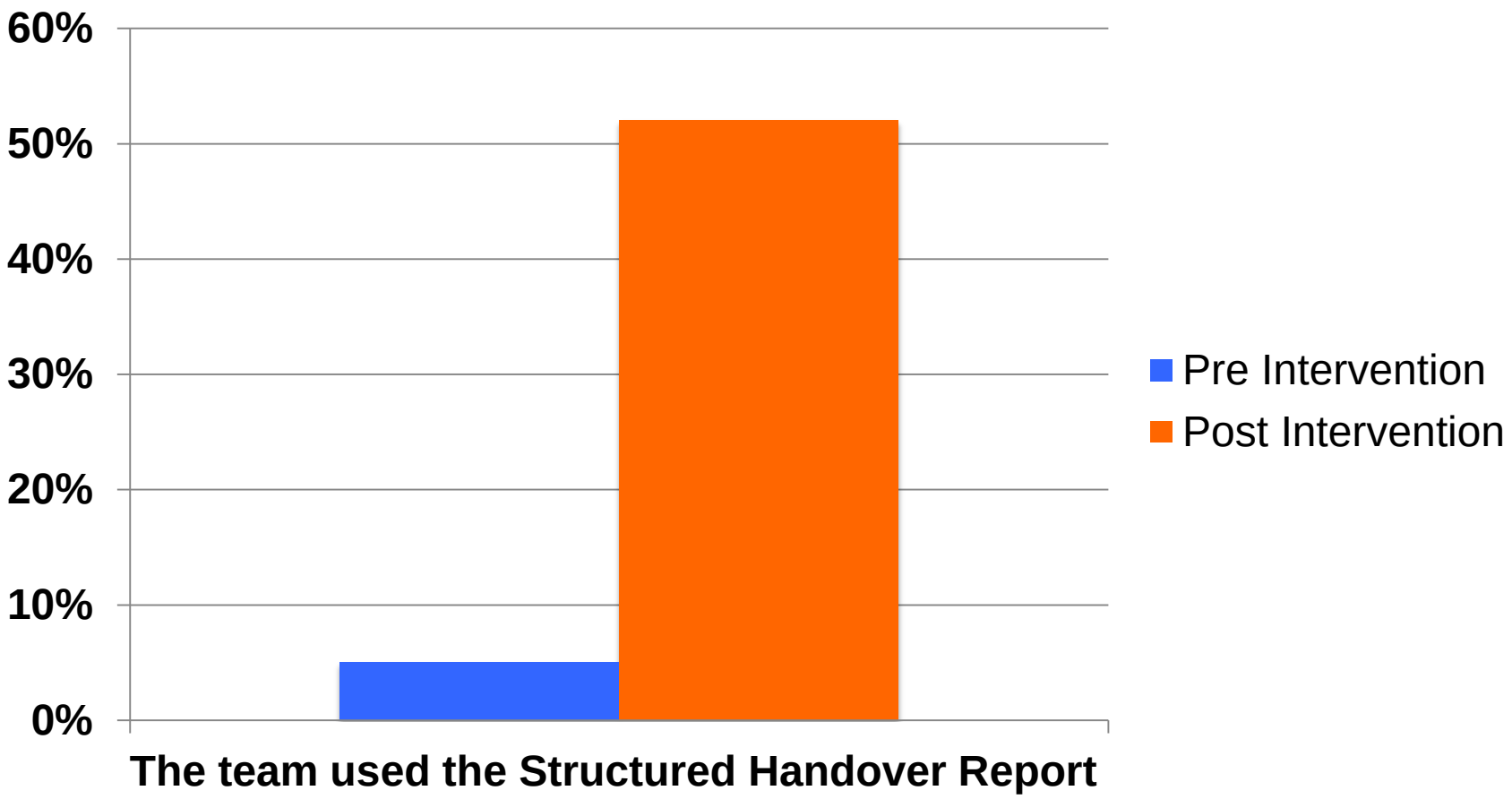
Communication



Collaboration



Decision Making



Comments by Nurses Regarding the Tool

- "I think this tool will greatly improve the handover process for all parties if used consistently and correctly. I think the biggest challenge will be the change of practice and getting people involved to be compliant."

- "Often times, the anesthesiologists are in a hurry to give report and some information is missed. The new tool will hopefully prevent this miscommunication."

- "Great idea/tool…definitely need to make changes with handover standards."

Future Plans

- Work with unit leaders and colleagues to integrate guideline into unit routines through performance improvement processes and include in orientation program
- Disseminate to other units, and throughout the nursing department in the following forums:
  - Staff Meetings
  - Quality Council
  - Nursing Research Grand Rounds
  - Newsletters *Investigator* Column
  - Annual Research & Evidence Based Practice Conference
- Grant application submitted to Center for Health Quality and Innovation Quality Enterprise Risk Management.

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Thank you for your time and attention!

Questions and Comments