

## **POST-OPERATIVE HANDOFF IMPROVEMENT**

Team Leader: Lisa A. O'Neil, RN, BSN

Salem Hospital-North Shore Medical Center, Salem, MA

Team Members: Karen Correnti, RN; Julie Perry, RN; Kim Benea, RN

**Background:** Inpatient unit nursing staff reported dissatisfaction with the existing handoff system between the PACU and the inpatient units. The process was felt to be inconsistent, delaying pain management and detracting from patient safety/satisfaction.

**Objectives:** The project goal was to create a standardized patient handoff process to provide a smooth transition of care and to ensure that a patient's Pain Management Plan would be ready to implement upon arrival.

**Process of implementation:** The existing process was assessed by SIPOC analysis and process diagramming. Deficiencies were quantified to establish a baseline and to guide re-design. The existing process relied on a faxed handoff sheet, which contributed to inefficiency and to failed communication. A new process was designed that encourages interaction among the nurses and the patient/family, including a verbal review of the Pain Management Plan. A checklist was developed to guide and document the performance elements of a proper face-to-face handoff. Implementation occurred with on-site support from the team members.

**Statement of the successful practice:** The implementation of the new handoff process was assessed using a survey instrument administered to the inpatient unit nurses. 92% reported that the new process provided a more complete report and improved patient safety. 84% of the staff perceived that patient satisfaction was enhanced.

**Implications:** These results suggest that process redesign can improve patient safety, operational efficiency, and patient satisfaction. In particular, the incorporation of a standardized face-to-face handoff appears to enhance communication around the issues of pain management and general continuity of care.