Improving Handoffs by Incorporating a Standardized IPASS Section Into the Written Handoff Document

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Improving handoffs by incorporating a standardized IPASS section into the written handoff document

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Background

- Communication errors are implicated in as many as two-thirds of sentinel events
- Communication errors that occur during handoff between shifts inherently carry a high risk of causing patient harm
- Standardizing handoffs has been shown to improve the safety of handoffs
- Our institution joined a multi-center group to study the effectiveness of handoffs using a standardized mnemonic, “IPASS”
- To improve compliance with IPASS, we updated the system-generated patient report (Rounds Report) to include a dedicated section for IPASS.

What is IPASS?

- Standardized handoff process
- Illness severity: stable, unstable, or “watcher”
- Patient summary: brief summary of past medical history and reason for admission
- Action items: tasks the oncoming shift needs to address
- Situational awareness: series of “if, then” scenarios for contingency planning
- Synthesis by receiver: reminder for receiver to briefly summarize so giver can verify accuracy

Methods

- Goal: provide visual reminder and organized section dedicated to handoff utilizing the IPASS process.
- Developed focus group of senior residents to provide feedback about original Rounds Report
- Performed PDSA cycle involving residents using the original and proposed formats to provide an end-of-shift handoff
- Collected feedback about compliance with IPASS, resident satisfaction, and ease of use
- Implemented new formatting, which is automatically applied to all new Rounds Reports generated.

Results

- Reformatted rounds report includes all the same content as the original one, but rearranges the handoff parts to be more intuitive and organized
- Some departments did not like the length of the new document, so there is an additional option not to print some elements of the report
- Improved compliance with IPASS process—both written and spoken components—as tracked by attending physician observers of handoffs
- Improved resident physician satisfaction with handoff process

Conclusions

- Automatically generating a written summary of patient information organized into sections dedicated for handoff and sections dedicated for daily work is an intuitive way to improve communication during handoffs
- Reformattting Rounds Report led to improved compliance with the standardized IPASS mnemonic and improved resident physician satisfaction with the handoff experience