








MODERNISING THE WEEKEND MEDICAL HANDOVER

All week – Teams prepare weekend handover list

	Friday	Saturday	Sunday
08:30		Handover list accessed & updated 	Handover list accessed & updated 
12:00		WARD COVER	WARD COVER
16:00	Handover commences Teams attend and hand over pre-populated electronic list		
20:30	Handover updated 	Handover updated 	
21:00	Night Ward Cover 	Night Ward Cover 	Night Ward Cover 

Comprehensive handover between medical professionals is critical in delivering effective high-quality patient care whilst maintaining patient safety.

The weekend handover poses a complex challenge; comprising navigating large volumes of patients/tasks and a new medical team each week.

With COVID, re-deployment of staff provided the opportunity for quality improvement; with an overhaul of the handover system via the introduction of a novel embedded electronic handover.

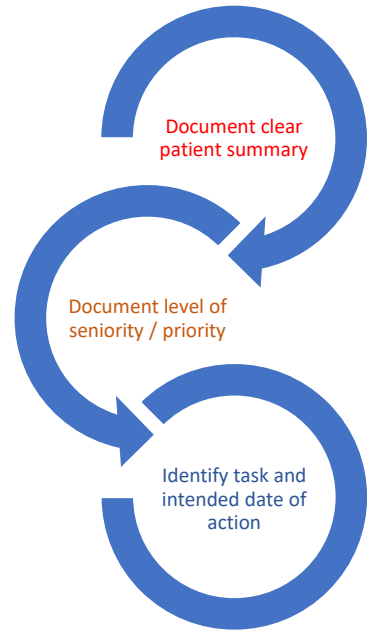
Baseline data: A retrospective questionnaire distributed to junior doctors in Summer 2020 described the prior handover as “unstructured”, “protracted” and “inefficient”, compounded by inter-doctor variability in documentation/handover.

Implemented action: A fully-embedded functional electronic handover system was created within ‘Epic’; our electronic patient records (EPR) platform creating a ‘one-stop’ for all necessary information. This was supplemented by a face-face handover on Friday afternoon.

Results & Discussion

Pre-population of the embedded handover system which followed RCP guidance led to clearer documentation and handovers. The new system allowed for complete access of all data on the EPR across the hospital which could be edited in real time for all users ensuring interventions could easily be monitored and completed by the weekend team.

ELECTRONIC HANDOVER TAB DOCUMENTATION



Conclusion

The implementation of a new electronic medical handover process which is embedded onto our EPR system has led to more efficient weekend handovers between staff; with an associated improvement in the quality of data recording and documentation. This has been observed positively by junior doctors and remains in use with alterations via subsequent PDSA with the aim of further optimising its functionality.

DOING IT THE **Epic** WAY!

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