Improving the Safety of Medical Handover in Oxford Health

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An improvement project was undertaken to improve the safety of medical handovers. This project has been running since 2015 until the present. During medical handovers doctors inform their on-call colleagues about the different tasks that need doing out-of-hours including_—physically unwell patients and expected admissions. In medical and surgical specialties, these handovers usually face-to-face with a junior representative from each ward attending. In psychiatry, this is often not feasible, as doctors are often spread over multiple sites.

In 2015, a G-Drive multi-spreadsheet system was used for handover, following this a system within the electronic health care record (CareNotes) was devised. Surveys on safety and junior doctor satisfaction identified that both systems had flaws but were significant improvements on preceding systems. Feedback from 2019, however, suggested trainees felt the handover system using the electronic health care record was unsafe. Reasons for this included: verbal face-to-face handover not occurring; jobs for Oxford and Buckinghamshire being mixed in together; there being no way to mark tasks as done; and weekend doctors were having to search through all handover notes from Friday-Sunday in order to identify Sunday-specific tasks.

The next stage of the improvement work involved using Microsoft Teams for the medical handover. This involved using an Excel spreadsheet with conditional formatting within MS teams, with added features based on surveyed feedback from trainees. This allowed: greying out of wards with nothing to handover; tasks to be assigned a date; crossing out of completed tasks. Using Teams meant that written and verbal handover took place on the same platform and, instead of phone calls via switch to the duty doctor, day doctors could attend a verbal/video handover on Teams at 16.45 each day. I created a tutorial video for the new system and gave a talk with Q&A session for junior doctors. I then supervised the new system rollout during March 2020, supporting junior doctors with the process for the first few weeks, and maintaining the spreadsheet formatting.

Trainee feedback was surveyed again in July and November 2020. Safety, ease of use, and satisfaction had all improved: 0% of junior doctors rated the handover process as "Unsafe" or "Very unsafe" compared to 35% of doctors surveyed back in 2015; the percentage rating the system as "Safe" or "Very safe" was ~71% compared to 11.7% in 2015; 83.33% reported the Teams system was "Slightly easier" or "Significantly easier" to use; 57.14% reported being "Satisfied" while 21.43% reported being "Very satisfied" (a category steadfastly 0% when previously surveyed) with the handover process. Improvements continue to be made based on feedback and some issues raised require improved concordance with the handover system by doctors. This has been addressed with reminder emails and induction talks for new starters.

With the new system firmly established in Oxfordshire, I have since successfully supported colleagues in Buckinghamshire to rollout the new handover system in a new location.