

STANDARDIZING THE HANDOFF OF HOSPITALIZED PATIENTS WITH DPAC-Q

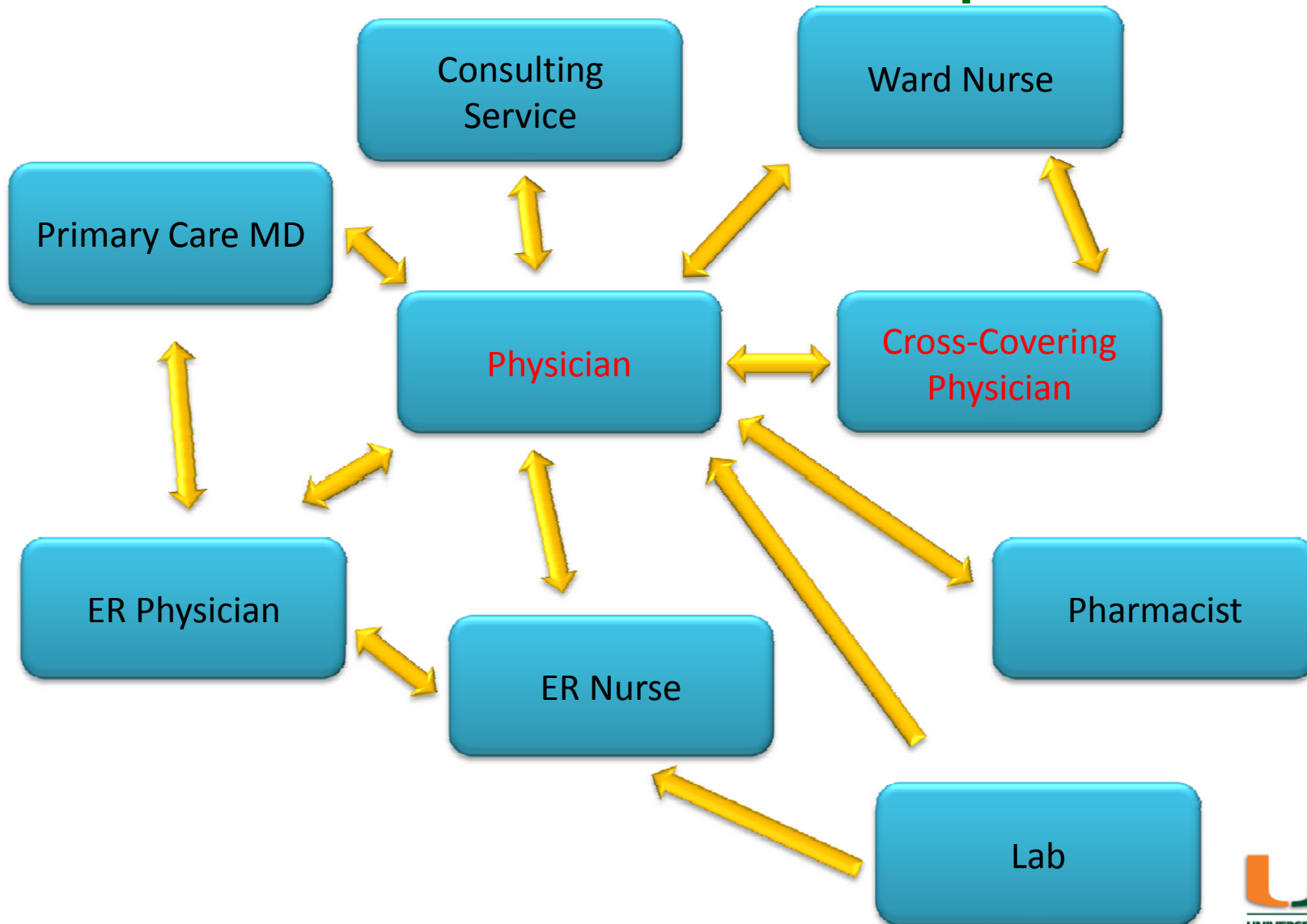
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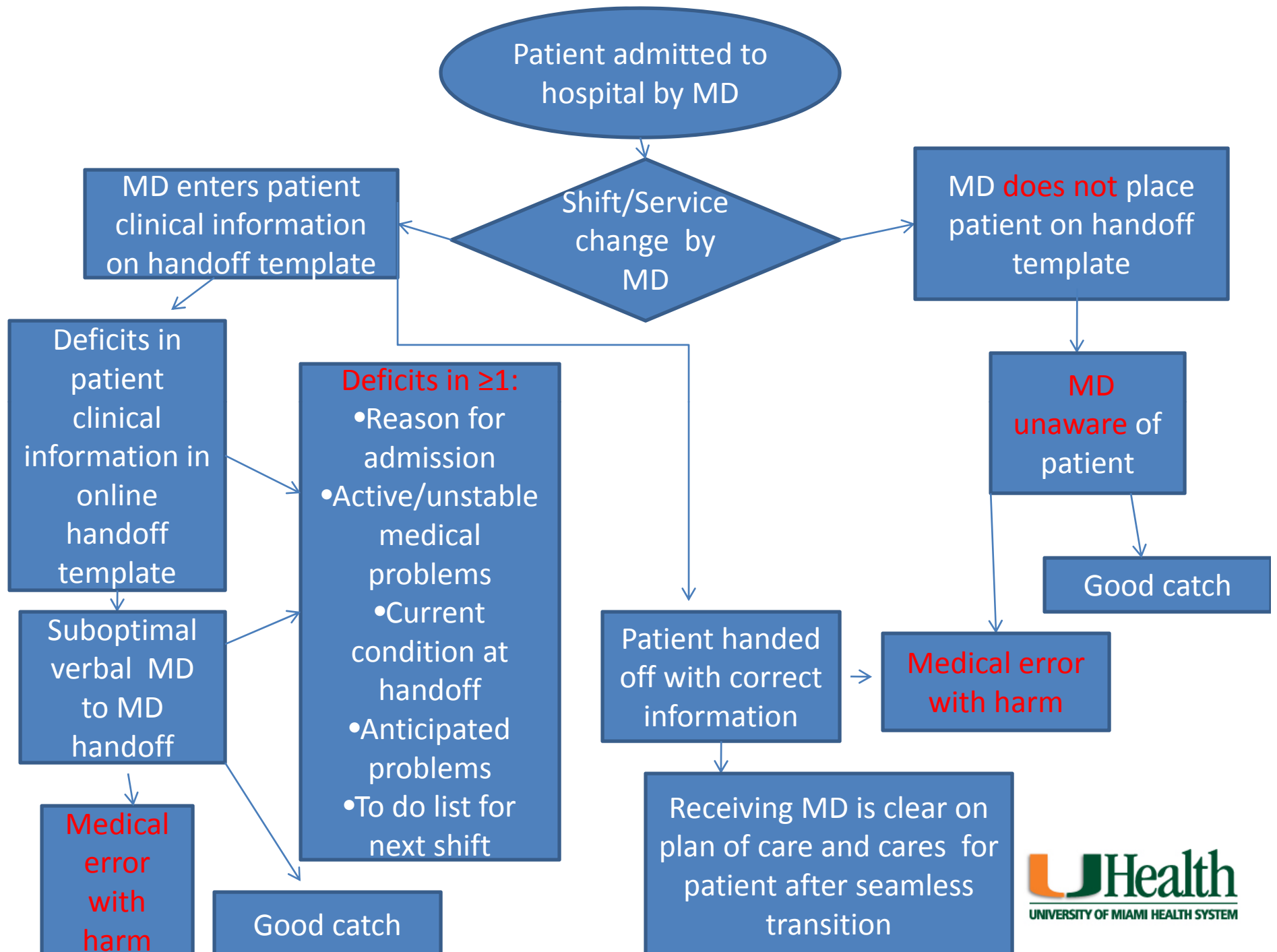


What is a Handoff?

- Handoff = transfer of professional responsibility and information between physicians **in a HIPAA compliant manner with a standardized approach**
- A handoff is **NOT** an H&P....
- Rather, a handoff briefly conveys:
 1. Why the patient is here
 2. What is their current clinical condition
 3. What is the plan going forward...

Handoffs take multiple forms





Communication in Healthcare

- Failures in communication are the most common root cause of sentinel events reported to JCAHO

Root Causes of Sentinel Events (All categories; 1995-2004)



Sentinel Event Statistics. Available at: <http://www.jcaho.org>

Handoff Basics-Before you begin...

- This information is “discoverable” by malpractice attorney’s, so be careful what you type into the computer...
- Limit interruptions
- The handoff should be verbal interactive communication between off-going and ongoing provider
- All patients that are handed off are included
- A standard computerized template is **updated** and printed out prior to each handoff session

Proposed Verbal Handoff Script DPAC-Q

D= Demographics

P=Problems

A=Anticipatory Guidance

C=Checklist

Q=Questions ?

Proposed Handoff Script DPAC-Q

Demographics

| | |
|------------------|--|
| ID | “Mr. Martinez is a 50 yo WLM” |
| Code Status | “He is Full code” |
| Illness Severity | “He is one of my sickest patients for tonight” |

Proposed Handoff Script DPAC-Q

P

Problems

| | |
|---|--|
| Reason for admission | “He was admitted for unstable angina” |
| Active/ unstable | “DM and Htn are both uncontrolled” |
| Chronic Stable | Gout |
| <ul style="list-style-type: none">• Allergies | <ul style="list-style-type: none">• “Allergic to penicillin” |
| Current clinical condition at handoff | “At 5 PM, I just started nitro drip due to recurrent chest pain with 1 set of (-) cardiac enzymes and nonspecific T wave changes on EKG” |

Proposed Handoff Script DPAC-Q

Anticipated complications “**If** this happens, **then** do X, Y, and Z ”

| | |
|---|---|
| “Potential Complications overnight include...” | “He is on ACS protocol with B Blocker, statin, ACE, nitrates, O2, LMH heparin, ASA, and Plavix, so...” <ul style="list-style-type: none">○ If he develops chest pain again, then transfer to CCU and call the cath fellow |
| “If he develops ____, then please do the following: A,B, and C” | <ul style="list-style-type: none">○ If his dinner BS > 300,then increase his basal insulin at bedtime from 10 units to 15. |

Proposed Handoff Script DPAC-Q

C Checklist/ To Do list *specific to next shift*

- “The to-do list for the next shift is...”
- “The checklist for the next shift is...”

| | |
|--|--|
| “Please check” Check CBC at midnight | (Specific task, not vague) Transfuse 2 units prn Hb<8. |
| “Please check the Cardiology note to see if going to Cath in AM” | (Specific task, not vague) <ul style="list-style-type: none">○ If so, then make npo, decrease his PM basal insulin to 8 units, and start D5 IVF at 75 ml /hr at 6AM Instead of “make npo and decrease his insulin” |

Proposed Handoff Script DPAC-Q

Questions

- “When is the third set of cardiac enzymes due?”

Verbal Checklist

| Competency | Present or absent |
|---|-------------------|
| D emographics <ul style="list-style-type: none"> ▪ ID ▪ Illness Severity ▪ Code status | |
| P roblems: <ul style="list-style-type: none"> • Reason for admission • Active/ Unstable • Chronic/ Stable • Allergies • Current Condition at Handoff | |
| • Anticipatory guidance | |
| • Checklist for next shift | |
| Repeat Questions asked | |

Summary

As a physician you assume ownership of all patients that you handoff and cross-cover.

- High quality handoffs are the responsibility of all physicians- patient safety depends on it
- UHealth has now provided a standard handoff script for guidance
- The checklist is the minimum required handoff elements- each facility's computer template may have variations