Preliminary Results

The transfer involves three critical aspects.

- The transfer involves three critical aspects: information, responsibility, and authority.
- Handoff has been characterized as being “remarkably haphazard.”
- The Joint Commission has mandated US hospitals to standardize handoffs between “outgoing” and “oncoming” teams to support accurate and complete information transfer.
- Some diagnostic and therapeutic decisions about patient cases are made with inaccurate, incomplete, and ambiguous information.
- Poor information seeking practices of “oncoming” teams during handoffs impact the effectiveness of handoff communication.

Research Gap: There is limited work on information needs of oncoming teams which will impact the recommended design of effective handoff tools.

Study Objective: Develop an understanding about (1) handoff communication and (2) information seeking behavior of oncoming teams during handoffs.

Methodology

Research Context: 16-bed Medical Intensive Care Unit (MICU) in an academic hospital.

Handoff Type: Resident Handoffs between outgoing team (resident and intern) and oncoming team (attending physician, fellow, resident, intern, and pharmacist).

Data Collection Approach: Handoff-centered Approach.

Data Collection Methods

- MICU team (outgoing and oncoming clinicians)
- EMR on COW, Progress note (prepared by outgoing), patient
- Information: patient assessment, vitals, intubation details.

Data Analysis Approach: Mixed Inductive-deductive Approach.

Data Analysis Methods

- Data Feature: Content-based Analysis

- Examples of Code

<table>
<thead>
<tr>
<th>MICU Roles and Responsibilities</th>
<th>Patient care responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensive care unit (ICU) nurse</td>
<td>Medical and nursing activities</td>
</tr>
<tr>
<td>Intensive care unit (ICU) nurse</td>
<td>Medical and nursing activities</td>
</tr>
<tr>
<td>Intensive care unit (ICU) nurse</td>
<td>Medical and nursing activities</td>
</tr>
<tr>
<td>Intensive care unit (ICU) nurse</td>
<td>Medical and nursing activities</td>
</tr>
</tbody>
</table>

Conclusion

1. The handoff communication framework

- As a promising first step for examining the communication events during critical care transitions.
- Highlights two critical activities in group handoffs: (1) outgoing team-driven information presentation and (2) oncoming team-driven learning and explanation activity.
- Presents opportunities to evaluate handoff communication outcomes; to study how handoffs contribute to workflow complexity in critical care settings; and to identify the different factors that result in information flow breakdowns.

2. Analysis of information seeking behavior during handoffs can

- Assist in developing a program in training care providers to seek the right information prior to handoff.
- Characterize the cognitive process of the individual asking the question, which can help in developing a conceptual framework for studying information seeking and giving patterns in handoffs.
- Refine the design of handoff tool based on the categories of information needs.
- Develop effective learning strategies for linking questions and answers.

Acknowledgments

This research is supported in part by a training fellowship from the Keck Center AHRQ Training Program in Patient Safety and Quality of the Gulf Coast Consortia (AHRQ Grant No. T12 HS017586-02) and from the James S McDonnell Foundation (Grant 2200020152 to Vinma Patel).

References