

## Problem

No allocated time for morning handover at Lagan Valley Hospital contributes to anxiety among F1 doctors. It results in the night-F1 staying beyond their shift to handover to each ward individually; leads to unfamiliarity of sick patients and outstanding tasks; and has the potential to compromise patient safety.

## Strategy for change

We propose a 10minute time slot each morning at 9am for handover between F1 doctors. We aim to reduce anxiety among F1 doctors; familiarise the day-F1 with patients on their ward and improve patient safety by minimising errors associated with poor handover. Handover follows a standardised approach including:

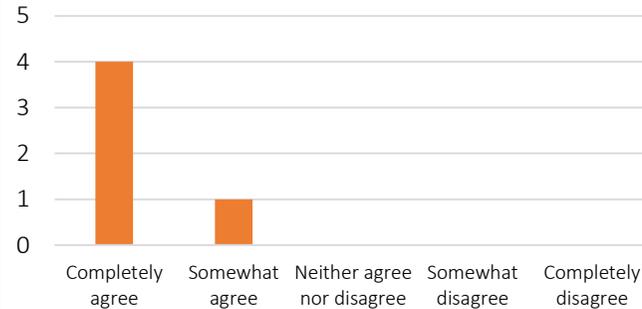
1. Sick patients / patients to be aware of
2. Outstanding investigations
3. Deaths overnight
4. Any other issues / concerns

## Measure of improvement

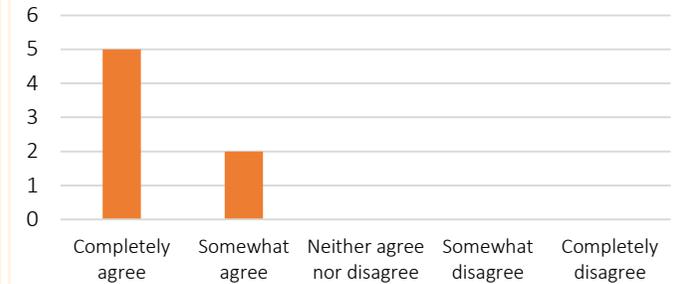
Qualitative pre- and post-intervention questionnaires were completed by F1 doctors. Questionnaires focused on confidence around effective handover of information between shifts, perceived impact on patient safety and perceived need for a formal handover process.

## Feedback from F1 doctors

I feel that an F1 handover could improve patient safety



After the introduction of F1 handover, I felt all the important information from overnight was effectively communicated to me



*"There have been a couple of instances where the night team and day team have been unable to have a full discussion about all post take patients... This has led to scans not being ordered, bloods not being done or not being chased and a subsequent delay in results or treatment for patients. Handover could help improve this".*

*"I found that the F1 handover was a great opportunity to discuss difficult or interesting cases with my colleagues, which was a good opportunity to learn. It also made me feel less stressed leaving my shift knowing all important information had been relayed to the day-team."*



## Discussion

All participants felt that F1 handover was necessary and should be continued indefinitely. Shift patterns and lack of a formal handover between doctors can disrupt continuity of patient care compromising patient safety. Effective communication and handover are a vital component of safe and effective patient care <sup>(1)</sup>. Our results are based on qualitative feedback, so it is difficult to establish if patient outcomes / safety were improved by the introduction of a handover and further study would be required to establish causation.

## Conclusion

The introduction of an F1 handover in Lagan Valley improved morale between junior doctors and reduced anxiety in relation to effective communication between shifts.