



Institutional Virtual Handoff Strategy Development



Virtual Handoff Strategy Development

The I-PASS Virtual Handoff Strategy Development aims to help hospitals assess the current state of their transitions of care and develop a customized roadmap for reliable handoff communication.

Primary Objectives

- Assess the transitions of care environment.
- Evaluate strengths of current communication workflows
- Identify gaps in communication between clinicians
- Provide a customized implementation plan for moving forward

Scope of Services

- Our experienced team of I-PASS Coaches will conduct a series of calls and up to 14 hours of virtual sessions to assess the current state of handoff communication within your institution.
 - These virtual sessions will include:
 - Observation of live handoff sessions throughout the institution, across care areas and provider types
 - Meetings with key stakeholders within the organization (C-Suite, front-line providers, quality, and safety teams, etc.)
 - Informational sessions aimed at building momentum around the importance of handoff communication in improving patient safety
- Key deliverables include a report detailing key observations, recommendations for modifying and improving your handoffs, and a customized implementation plan to achieve a standardized handoff method.

| Duration | Session | Attendees |
|----------|--|--|
| 5.5 hrs | Observe sign-out | Providers or nurses in areas being observed |
| 30 min | Small group meeting with core team | Core project team leads |
| 1 hr | IT Discussion | Informatics specialists or representatives, IT representative, CIO |
| 1 hr | Meet with potential unit champions for nursing unit-level assessment | Clinical nurse educators, practice area council chair, nurse managers, supervisors, unit-level quality representativess |
| 1 hr | Meet with potential chief residents / resident champions for program- level assessment | Chief residents, GME director or representative, attendings or faculty |
| 1 hr | Meet with other potential provider-level champions | Nurse practitioners, physician assistants, nurse midwives |
| 1 hr | Meeting with key leadership from various levels of organization | CQO, CNO, CMO, COO, other nursing executives, residency program directors, associate quality officer, GME and nurse education leadership, medical director |
| 1 hr | Wrap-up and next steps / Project planning | Core project team / coordinating council |

Use of a standard handoff communication method across providers requires implementation of the elements below. The scoring seen here is pulled from a sample report.

Initial assessment and planning

- Institutional support and champions exist
- Culture around high-reliability is present
- Internal structure exists for implementing patient safety initiatives

Optimize for needs of institution

- Written handoff tools exist and are aligned with EMR
- Structured verbal process exists and is supported by a written tool

Training

• Clear expectations for handoff communication exist across all care areas, and all are trained on this process in the same manner

Implementation and assessment

- Measure adherence to a verbal and written handoff process
- Measure harms to patients relative to handoff communication

Sustainment and expansion

• Address continuing improvement efforts around handoff communication

Key



The Virtual Needs Assessment establishes the foundation for creating reliable handoff communications across your organization.

The assessment provides the I-PASS team an in-depth understanding of the organization & enables tailoring the implementation guide to your organizational strengths and areas of opportunities.

The assessment also level-sets internal understanding of performance, creating unified organizational leadership in its own understanding of opportunities and strengths.



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