

## Background & Significance

- As of 2006, The Joint made use of a standardized handoff tool a National Patient Safety Goal.
- Implementation of a standardized hand off tool yields a reduction in communication and documentation errors.
- With communication errors and communication breaks, there can be diagnostic errors and treatment errors.
- Standardized tools facilitate data sharing and enhance communication
- Standardized hand-off protocols improve results in level of information passed on through hand-off and provider/organizational outcomes.
- Currently, project site lacks policy to facilitate patient hand-off from the ED to inpatient units.
- No standardized way to share patient data or transfer patients.
- Increased TAT, median decision to admit, and ED turn-around times, LWOB, LWBT, and AMA rates

## Methods

**Design:** Retrospective and prospective chart review of patients admitted from ED to pilot unit, with educational huddles for one month provided to both units

**Setting:** a large emergency department that sees about 95,000 patients annually, and admits 1,600 patients monthly within a 610-bed hospital in an urban area in central New Jersey.

**Sample:** 52 patients admitted to pilot floor during 2 month implementation period, with 30 patients meeting inclusion criteria

**Measures/Analysis:** Data was analyzed to see if value points of interest (AMA, LWOB, LWBT, throughput by unit times) improved, worsened, or stayed the same

## Results

- Decrease in AMA and LWOB from December through February, with an increase in these values for March.
- LWBT values decreased in January, increased in February and then again in March.
- Turnaround times decreased in January, but increased in February and March

## Discussion

**Patient care:** Patient care becomes safer due to adequate exchange of information.

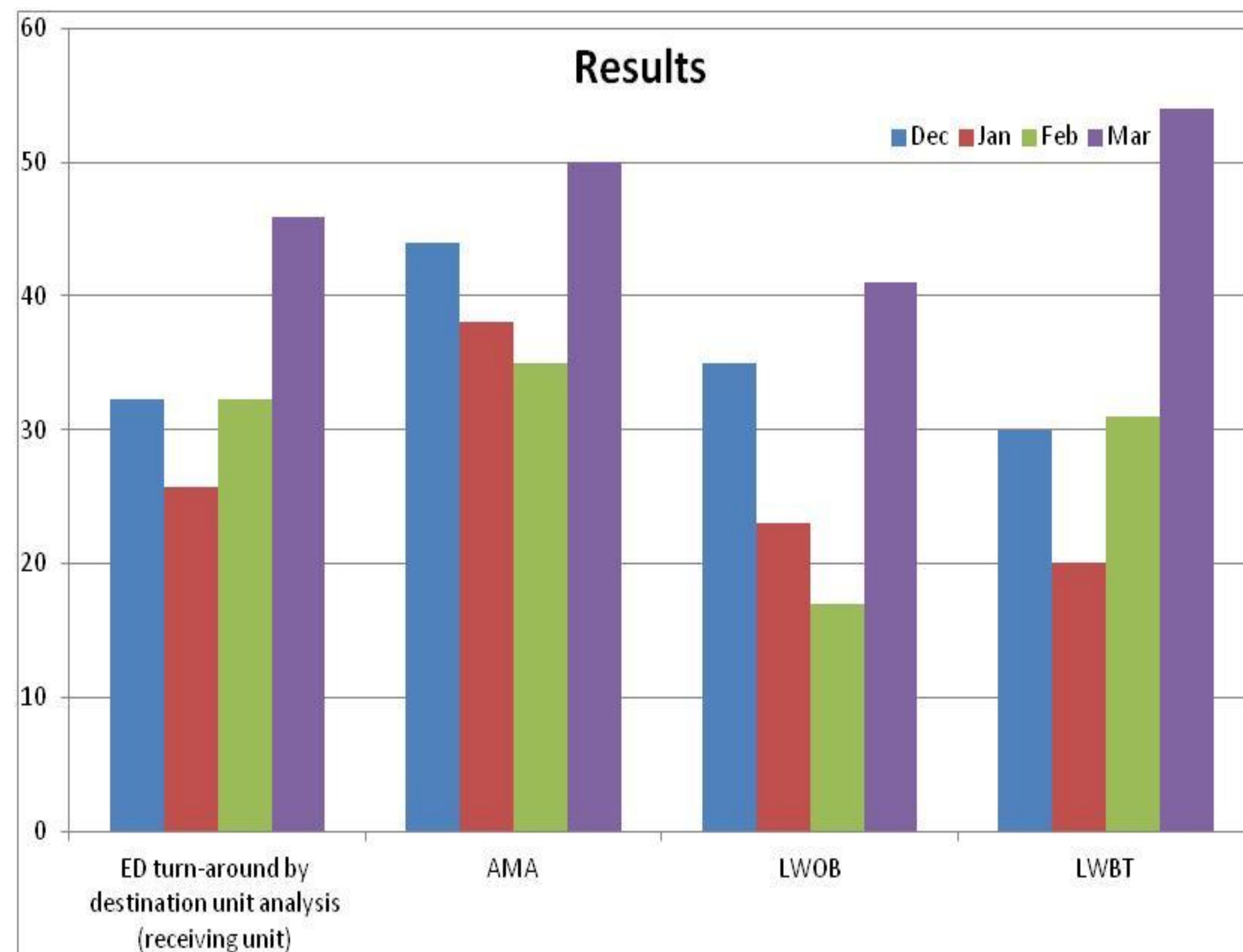
**Implications for practice:** Nurses can share data in an organized and timely manner, ensuring that the data is available to both parties.

**Policy:** extend the pilot to all inpatient units within the institution with hopes of adopting this policy system-wide

**Economy:** cost-effectiveness for the institution with decreased LOS and turnaround times.

**\*Please see hand-out for references**

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# References

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