Joint Event

16th International Conference on
Alzheimers Disease & Dementia

7th International Conference on
Neurology and Psychiatry

2nd International Conference on
Neuroscience and Neurobiology

October 19-20, 2022

Webinar

QI project to improve the handover process among the junior and SPRS doctors, to ensure the continuity of the safe and acute care for the patients in hyper acute stroke unit, the acute stroke unit, and the expected thrombolysis +/- thrombectomy calls

Shaimaa Awad
Imperial College Healthcare NHS Trust, UK

Statement of the problem: the Royal College of Physicians (RCP) recognizes that, changing work patterns must not detract from the ultimate responsibility of doctors to ensure that their patients are safe, diagnosed efficiently, and treated effectively, so handover as per the standard protocol is needed. An RCP survey and workshop in 2010 demonstrated the variability of handover systems in use; indeed, in some hospitals no handover processes are defined.

The purpose of the project: Improvement in the stroke department's performance in the continuity of providing the right acute care for the patients at the time of the handover.

Methodology & theoretical orientation: By creating

1. Handover Proforma, to be used verbally +/- in-written, that includes the standard ISBAR approach, with other new points as the current level of acuity, triaging the tasks in colors, Ceiling of care discharge plans, timing, and the named consultant for each shift for better communications.

2. Discussing and presenting the first cycle of the project, in the stroke departmental academic weekly meeting, on 21/6/2022, and introducing the new tool of change, with a plan and to assess the level of the 21 Senior House Officers (SHOs) and registrar's handover practice using this new proforma after a month.
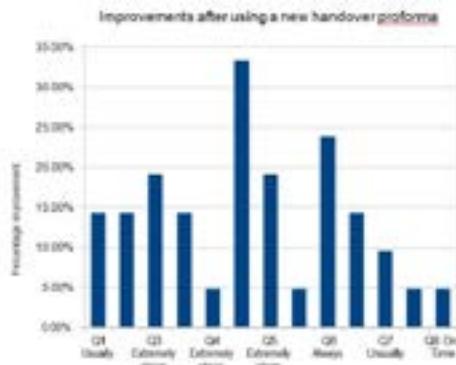
A questionnaire with multiple choice questions, pre and post the new handover proforma used as the tool of assessing if Improvement happened or not with the SHOS+SPRS handover practice, from May 2022 to end of August 2022.

Findings: Generally, the stroke handover has improved, as follows: Handing-over the Patient data (Name, Age, ID, and location) improved by 14.29%. Prioritizing the sick patient at the time of the handover is improved by: 14.28%. Clarity of the patients' level of acuity at the time of handover improved by 19.05% as extremely clear, then very clear as 14.28%.

Joint Event

16th International Conference on

Alzheimers Disease & Dementia

7th International Conference on

Neurology and Psychiatry

2nd International Conference on

Neuroscience and Neurobiology

October 19-20, 2022

Webinar

Clarity of the patients' background at the time of the handover improved by: 4.76% as extremely clear and 33.33% for very clear. Clarity of the handover of jobs at the time of the handover improved by 19.05%, as Extremely clear, and by 4.76% for Very clear. Clarity of the forward management plan at the time of the handover improved by 23.81% 7-Clarity of the ceiling of care at the time of the handover improved by 14.29% as always, and by 9.52% as usually. Timing of the handover is improved by 4.76% as early timing and by 4.76% for on time handover.

Conclusion: The handover practice in the stroke department from May 2022 to 21st of June 2022 was not as per the standard protocol using the SBAR. Using the created handover proforma, for 1 month after the first cycle, improved the clinical handover practice among the SHOs, and SPRS, which ensures the continuity of the safe and acute care for the patients in hyper acute stroke unit, the acute stroke unit, and the expected thrombolysis +/- thrombectomy calls.

Improvements after using a new handover proforma

Joint Event

16ᵗʰ International Conference on
Alzheimers Disease & Dementia

7ᵗʰ International Conference on
Neurology and Psychiatry

2ⁿᵈ International Conference on
Neuroscience and Neurobiology

October 19-20, 2022

Webinar

Biography

Shaimaa Ali Awad is a neuroscience (Neurology/Neurosurgery) SHO at Imperial College Healthcare NHS Trust, London, UK. Previously she was Stroke/acute medicine SHO, Imperial College Healthcare NHS Trust, and a former Speciality doctor for The Centre of Interventional Paediatric Psychopharmacology and Rare Diseases (CIPPRD), Maudsley Hospital, London, UK, who provides whole-person medicine and integrated mental and physical health care for children and young people with complex, severe, and treatment-resistant co-occurring neuropsychiatric disorders and medical conditions including rare diseases. Her interest is in the ongoing Quality Improvement, audit, and research projects, is improving the current neuroscience services and creating new ones.