

CENTRAL STATE HOSPITAL
POLICY

SUBJECT: Hand-Off Communications/aka Shift Report

ANNUAL REVIEW: January

PERSON RESPONSIBLE FOR REVIEW: Chairpersons, Provision of Care Committee

LAST REVISION DATE: April 2008

I. PURPOSE

Central State Hospital is committed to a process of communication between caregivers to ensure continuity of service. This hand-off communication policy is designed to create a formal process that assures there is accurate and adequate information shared between staff at shift change, and at other times when one staff member or team takes over the care of a client from another caregiver or team.

There are numerous situations that involve hand-off communications between staff caregivers, including but not limited to: shift changes for nurses and HSTs, CNAs, & FSTs, physicians transferring responsibility for a client's care, physician OD or on-call coverage, temporary assignment changes for staff leaving the unit or assignment changes, client transfers between units, and temporary client transfers/transport for outside medical services.

II. DEFINITIONS

1. Hand-off communications are interactive information exchanges between caregivers involved in a change of assignment of client care responsibility. Communications include pertinent up-to-date information concerning the client's plan of care, treatments, condition and any recent or anticipated changes. Such communications may involve several standard forms of written information exchanges, face-to-face communications, and electronic/telephonic transfers.
2. The 24 Hour Shift Report process is utilized as a formal mechanism to ensure the continuity of client care. This process includes documentation of events occurring within the shift as well as an opportunity to ask and respond to questions. In addition to providing documentation of the "shift report," the automated 24-Hour Shift Report system also provides an avenue by which to collect and trend data such as staffing patterns, unit/service area census, unit

incidents, client hospitalizations, movements, appointments, psychotropic STAT/PRNs, observation levels, risk factors, and client incidents.

3. HST/CNA &/FST Assignment Sheets - Daily Assignment Sheets vary in different areas of the hospital due to the differing needs of these areas. These are filled out at shift change by the Charge Nurse or Lead HST to assign various duties to CNAs, HSTs, and FSTs. The assignment sheet includes information such as staff on-duty, special observation levels, special precautions, location assignments, client assignments, vital signs, and unit activities.
4. CSH Physicians' Notes - this is a LAN-based communication report that is accessible to all medical staff with the purpose of communicating important client information between primary attending physicians/Advanced Practice Registered Nurse (APRN) and on-duty medical/psychiatric officers and vice versa. This communication log focuses on acute issues that may need to be addressed during periods of cross coverage as opposed to general information on all CSH clients. The log includes the client's name, living unit location, and a short summary of needed follow-up or medical/psychiatric interventions that were taken. If deemed pertinent to the current situation, the client's diagnoses, medications, and/or allergies can be included in the log. Medical and Psychiatric O.D.s are expected to check the log as soon as possible when starting their shifts. Attending physicians/APRNs are expected to check the log early in their workday.
5. Client Information Sheets – (CSH #1007) these are used when a client is transferred to another facility for acute medical reasons. It includes the client's identifying information, reason for referral, diagnoses, medications, diet, allergies, special precautions, DNR status, legal status, caregiver contact information, reimbursement information, and whether client is able to give informed consent.

III. PROCESS/PROCEDURE

1. Hand off communication is deemed pertinent primarily to Nursing (including HSTs, FSTs, & CNAs) and Physicians/APRNs, as these disciplines are primarily responsible for coordinating and providing clinical care for CSH clients. Refer to Nursing Policy # II.3.0 Hand-off/Shift Report and CSH Policy 4.58, Medical Staff Communications Report Policy/Procedure for specifics on how this is instituted.
2. When the care of a client is passed from one staff member to another, such as at the beginning of a shift, the on-coming staff member will be responsible for reviewing and or otherwise obtaining current information about the client's plan of care, treatments or condition, and any anticipated changes. This information may be made available in the form of a 24-Shift Report, Assignment Sheet, CSH Physicians' Notes, Client Information Sheet, or through face-to-face or verbal

communications - or any combination thereof. The on-coming staff member shall ask questions or seek additional information whenever they feel there was insufficient information shared through the usual hand-off communication process. This information may be obtained from the off-going staff member or the lead staff member.

Approved:

This policy was approved by the CMO and CEO in March 2008