

# Improving Team Handoff of Pediatric Behavioral Health Patients in the Acute Care Medical/Surgical Setting

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## Background

- Nurses and other healthcare team members in an acute care pediatric medical-surgical setting faced significant challenges when managing behavioral health (BH) patients.
- Given the rise in BH admissions within our hospital (up to 20% of patient census), increases in staff injuries were seen.
- The evidence-based PSYCH mnemonic handoff tool was selected to model a handoff process to create a clear and consistent shift-to-shift report.

## Purpose

- The purpose of this project was to create a BH patient handoff tool to be used at shift change by both nurses and ancillary patient care companions.

## Methods/Implementation

- Root cause analysis (RCA) revealed that inconsistent handoffs and unclear care plans were key issues.
- A pre-implementation 5-question Likert-type survey assessed staff comfort and confidence with BH patient care and handoffs
- A specialized tool was developed and presented to be used during shift handoff.
- Charge RNs were tasked with monitoring its use, and the interprofessional BH team contributed to its ongoing refinement.
- After three months of use, a post-implementation survey was distributed.

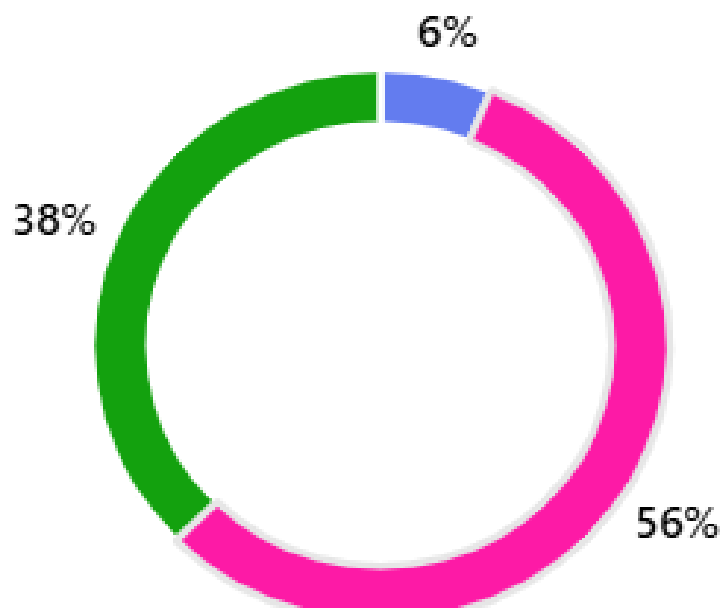
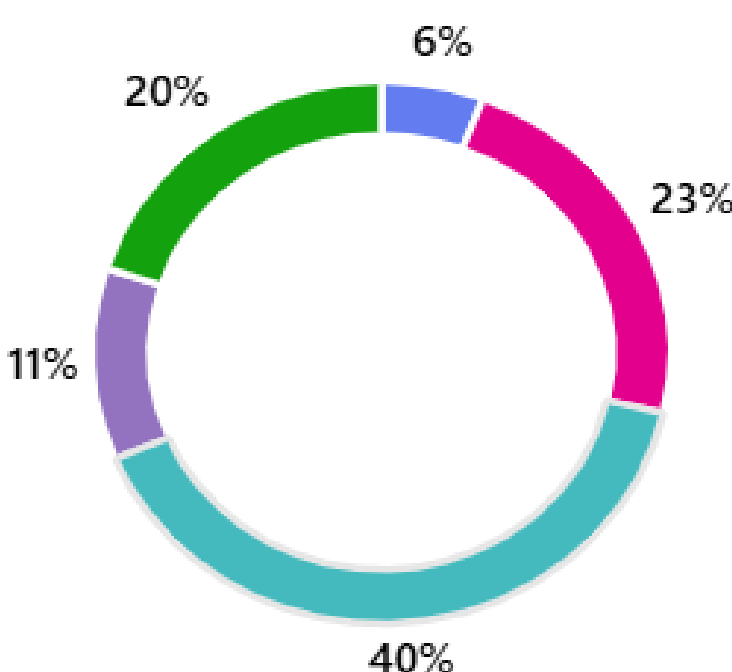
## Results

- Comparison of responses between pre- and post-implantation surveys illustrates significant positive results to all areas addressed, including overall staff comfort in caring for this patient population:

**Question:** I am comfortable with the role of caring for a behavioral health patient.

Pre-Implementation: Agree 23%

Post-Implementation: Agree 56%



**Figure 2.**BH handoff tool based on PSYCH Mnemonic:

**Patient information**

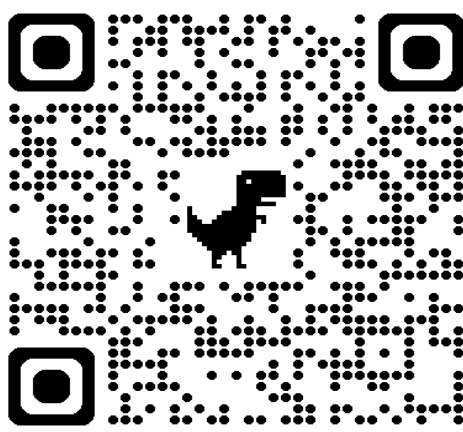
**Situation leading to admit**

**Your assessment**

**Critical information**

**Hindrance to discharge**

Printed on light-blue card stock to distinguish from medical Kardex



## Conclusions

- The tool created a consistent and focused method in which to handoff key elements and challenges to caring for what can be a complex and anxiety producing patient assignment
- Development of the elements were to narrow down key items from lengthy care plans and progress notes written by psychiatric providers.
- Limitation to the project included about 50% less response rate between pre- and post- implementation

## Implications for Practice

- Nurses are familiar with using a patient Kardex to reference pertinent medical information during shift handoff; the blue color easily signifies the BH tool.
- The tool is tailored to the specific needs of the BH patients as they remain inpatient while awaiting placement for psychiatric treatment.
- The electronic format allows for direct input/revisions by psychiatric providers in particularly complex cases.
- Next steps include potential distribution and revision as needed for the inpatient BH unit within ACH.
- The significance of staff acceptance provides a valid option for use of the tool at other children's hospitals.

## References

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