



“Can you hear me?”

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# The Royal North Shore Hospital



- There are 7 deadly sins
- There are 7 dwarf's
- There are 7 wonders of the world
- There were 7 steps, 1 idea and 9 months for the taped handover to prove its worth on the ward!

# Step 1

## Introducing the idea

- November 2006
- The idea of using a tape to handover each shift was suggested during a staff meeting.
- The proposal was rejected.
- Only 15% of staff voted in favour, 10% had no opinion while 75% voted NO!

- Reason cited at this time;
- Language barrier
- Feeling silly talking to self
- Would not be able to hear properly
- Impersonal
- Not interactive

# Step 2

## Audit and Research

- January 2007
- Internet search on using a tape to handover patients.
- Audit of the hospital
- List of benefits prepared for the staff:

- Staff would spend more time with patients at bedside.
- Late starters could listen to tape and not take in-charge away from ward.
- Staff could tape their handover at their convenience.
- Staff would leave the shift on time.

And finally.....

- Handover time would be reduced!

# Step 3

## re-introduction of idea

- February 2007
- Ward meeting with afternoon tea!
- Information presented to staff.
- 80% happy to trail taped handover

# Step 4

## Buying the equipment

- March 2007
- budget of \$100 set. Different types of machines researched



2X REC TIME

V.O.R

CLEAR VOICE

SLOW  
SPEED  
CONTROL



FAST

NORMAL

REC TIME  
/PLAY MODE  
DOUBLE

SONY



# Step 5

## The big day arrives!

- April 2007. first shift to use tape, night shift to morning staff.



# Step 6

## Evaluation

- June 2007
- Notice placed in staff room inviting comments on the taped hand-over.
- 93% loved the taped system.
- 85% felt information was often missing.

- Comments included;
- Not enough Information given
- Need a quiet area to tape
- Taping should be done in sessions
- Develop a structure for information sharing
- Love it! Great, why didn't we do this sooner

# But some things were not needed.....

- This is ‘sally’ handing over patients 1-9 its 6:15, no sorry its 6:18 I think my watch is slow.....
- “I just have to stop a moment and give an IVAB”.....
- .....”Back again”
- Hello..... can you hear me?

# Step 7

## Handover tool developed

- July 2007
- Structured format developed by A/CNE and staff.
- Cards made and laminated for all staff.

# Format included

- Nurses name and section, patients' name and bed number and resus/infection status if appropriate.
- Cognitive state, falls risk
- Changes in management, brief overview of patient (eg settled night)
- Investigations outstanding
- Management to be aware of (eg warfarin)

- Invasive treatment (IDC, PICC)
- Discharge plan such as:
  - EDD and Destination
  - Summary completed
- This should be completed in 20-25 minutes!



Its not all bad at North Shore!

Thank You