

I-PASS It Off: A Quality Improvement Project on Resident Handoff in a Rural Healthcare Setting



Shelby Tripod, DO; Jason Jarvis, DO; Nathan Tripod, DO; Kelsey Flynn, DO

INTRODUCTION

Standardized handoff improves quality patient care by eliminating confusion between providers at shift change. There is considerable variation in how handoff occurs and whether formal training is provided to residents.

As part of a larger initiative whose aim was to streamline handoff in the healthcare setting, the I-PASS mnemonic (illness severity, patient summary, action list, situation awareness and contingency plans, and synthesis by receiver) was implemented to standardize a protocol for delivering patient handoff within inpatient units. This study evaluated the reliability of the tool among residents in a rural healthcare setting.

OBJECTIVES

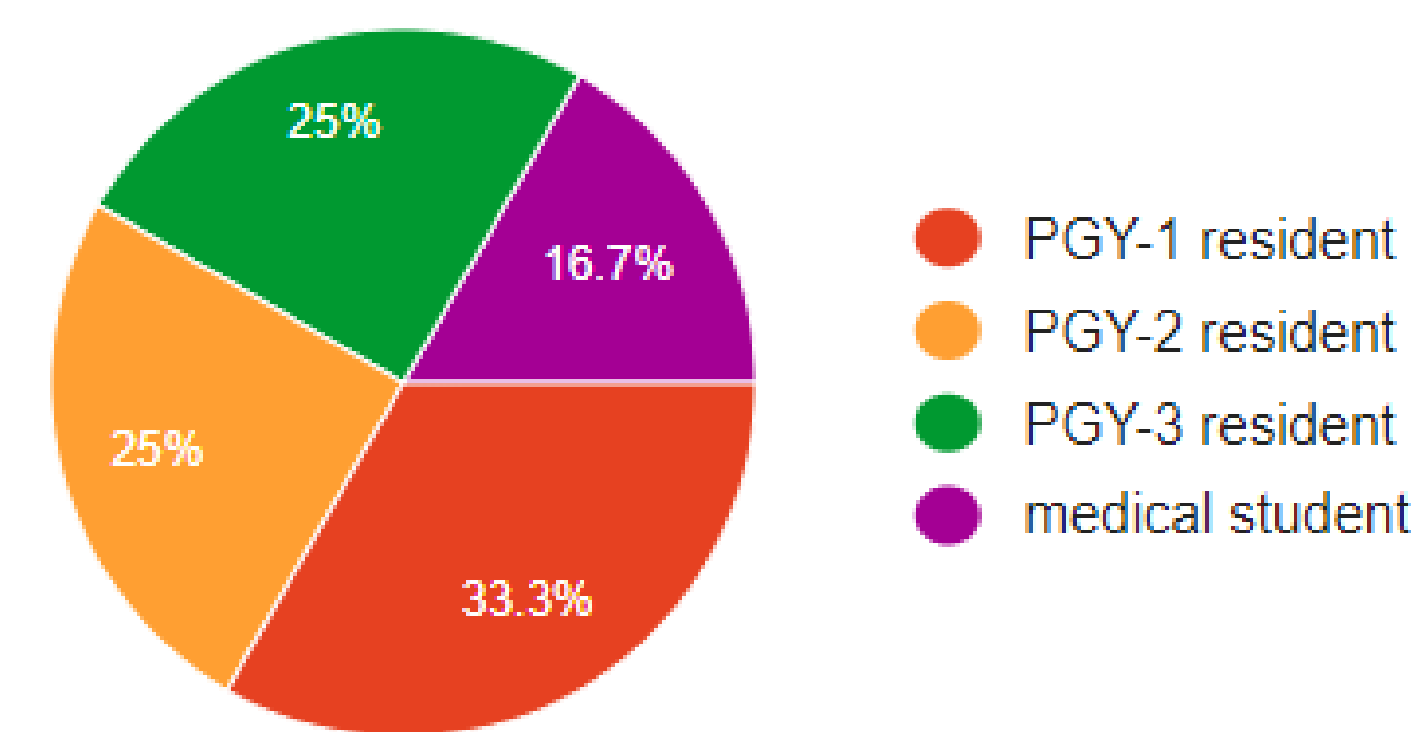
- Implement a systematic approach to resident handoff
- Integrate the systematic approach to I-PASS into the EMR
- Maximize resident communication during handoff
- Minimize medical error between handoff

METHODS

To assess inter-rater reliability, 16 residents and 7 medical students were surveyed over a 24-month span and completed a 10-item survey to assess their familiarity, confidence and perception of patient handoff in the rural inpatient setting

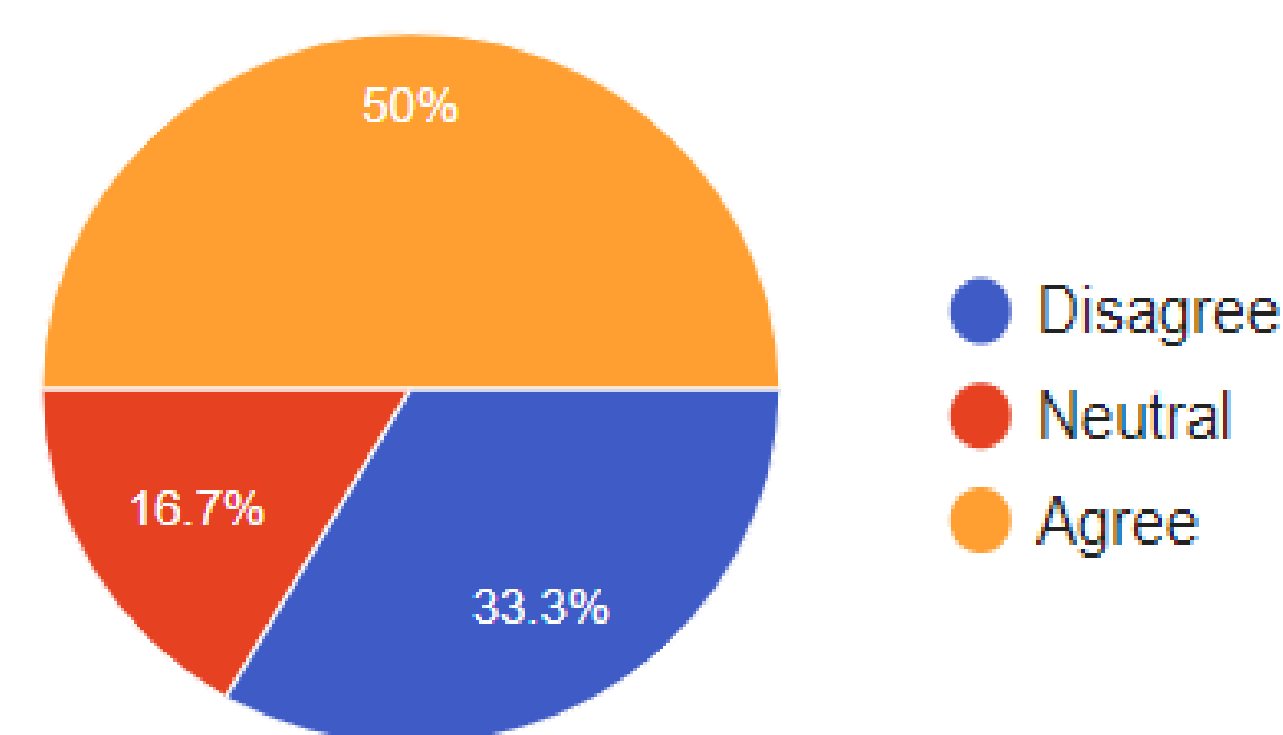
RESULTS

Respondents

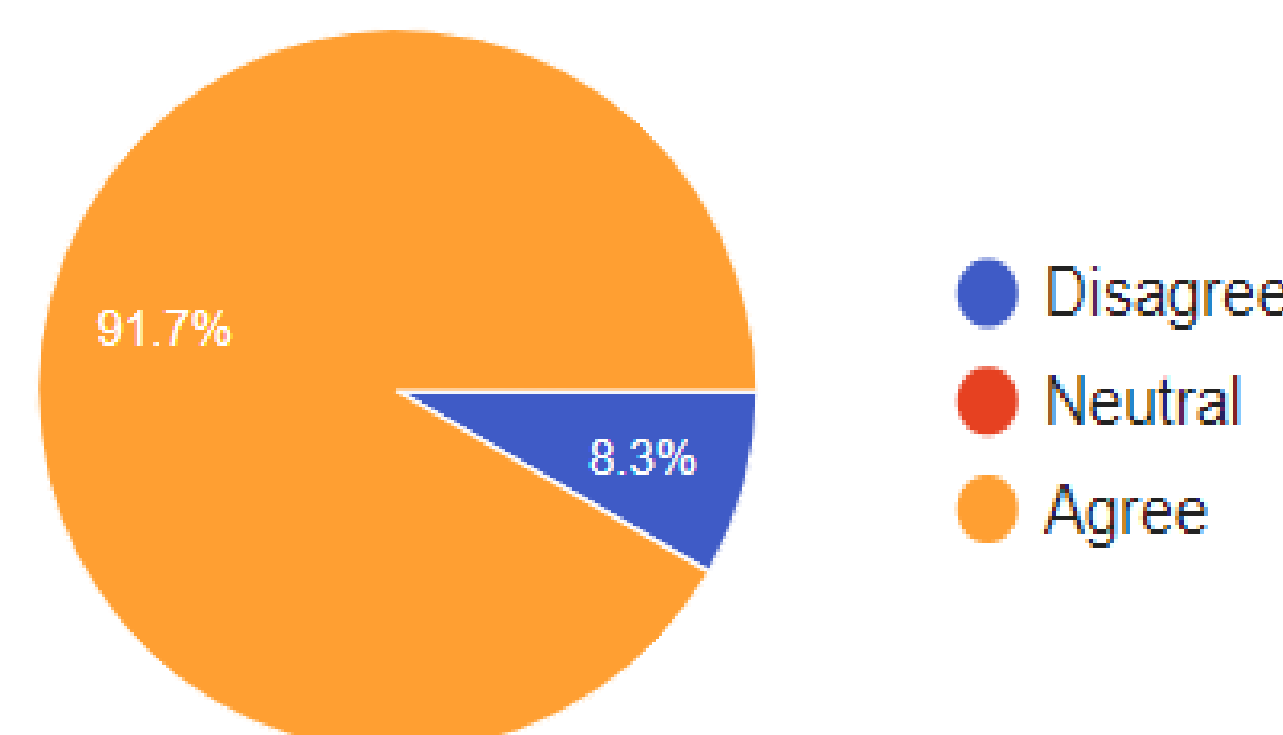


- 78.2% survey completion rate
- 55.6% confidence in patient handoff pre-training

Witnessed medical error



Confidence in patient handoff post-training



Resident Feedback:

- "Patient handoff has been much improved after implementing IPASS. Less things are missed between residents at shift change."
- "Keeping written and verbal IPASS pertinent and concise helps us communicate more effectively and hold each other accountable."
- "Since implementing IPASS handoff, I feel more comfortable managing an entire hospital list of patients more efficiently and have seen less medical error and misses occur."

TAKE HOME POINTS

- Unstandardized patient handoffs are variable, inconsistent and increase risk of medical error
- Standardized patient hand-offs:
 - Increase resident confidence
 - Decrease perceived medical errors
 - Increase accountability
 - Provide concise and consistent communication

FUTURE CONSIDERATIONS

- Address barriers to continued implementation
- Continue education to ensure consistency reporting interventions and code status
- Track near misses

CONCLUSION

- I-PASS is a reliable, valid and standardized means of handing off patients from one resident to another in a rural healthcare setting.
- A structured process is necessary to reduce medical errors and miscommunication between providers.
- Identifying weaknesses in our handoff process has enabled the creation of a standard practice guideline and EMR template for continued success and superior patient care.

REFERENCES

- Joseph R. Keebler, Isaac Lynch, Philip E. Greulich et al, Leveraging the Science of Teamwork to Sustain Handoff Improvements in Cardiovascular Surgery, The Joint Commission Journal on Quality and Patient Safety, 10.1016/j.jcjq.2023.05.006, (2023).
- Kurtis M. Norman, Rémi Hueckel, et al. Implementing IPASS Handoff to Improve Patient Safety in Pediatric Critical Care Transport, Air Medical Journal, Volume 42, Issue 2, 2023, Pages 95-98, ISSN 1067-991X, (<https://www.sciencedirect.com/science/article/pii/S1067991X22002504>)

