

## Aims

The aims of this project were to improve the quality of morning handover, making them succinct but effective and ensuring they provided learning opportunities for trainees.

## Methodology

We handed out questionnaires to staff in the paediatric department, at random, to conduct a survey. The questionnaire comprised of 11 positive statements about the handover, which they had to qualify as either “strongly disagree”, “disagree”, “neither agree or disagree”, “agree”, “strongly agree” or “don’t know”. In the first phase (pre-intervention) we gathered their initial responses to these statements. We then introduced our 7-step handover guide<sup>1</sup>, which was used at every morning handover for 1 month. The staff’s opinions on these statements were then re-evaluated using a post-intervention questionnaire.

## Questionnaire

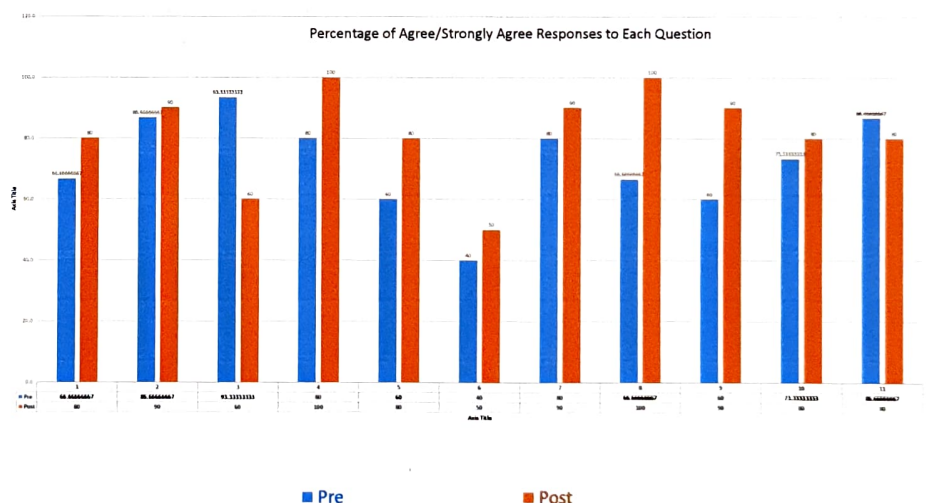
- 1 The handovers are well structured:
- 2 I feel well-informed about the patients at the end of the handover
- 3 It is clear who the most unwell patients are at the end of handover
- 4 I am aware of all the patients with safe-guarding or child protection issues by the end of handover
- 5 Patients with similar names are clearly identified
- 6 Important safety issues are highlighted during handover e.g. patients with severe allergies, equipment issues etc.
- 7 Infection control issues are identified e.g. patients with RSV
- 8 It is clear which staff are rostered on for the day and whether there are rota gaps
- 9 Teaching opportunities for the day are highlighted
- 10 When I am the one giving handover, I feel comfortable doing so
- 11 Paediatric handovers at Peterborough are enjoyable and non-intimidating

Strongly disagree  
 Disagree  
 Neither agree or disagree  
 Agree  
 Strongly Agree  
 Don't know

## Results

The percentage of staff who answered “agree” or “strongly agree” increased after the intervention for 9 out of the 11 positive statements about handover.

It was only “clarity about the most unwell patients at the end of handover” and “handovers are enjoyable and non-intimidating” that yielded worse results after the intervention.



## Conclusion

The intervention improved the quality of our morning handover sessions.

A follow up survey will be carried out to assess if these changes have sustainable impact