

# Joint Commission Center for Transforming Healthcare Releases Targeted Solutions Tool for Hand-Off Communications

On June 27, 2012, the Joint Commission Center for Transforming Healthcare launched its newest project in the Targeted Solutions Tool™ (TST) suite: the Hand-off Communications TST. This new tool is designed to help health care organizations avoid communication-related miscues and errors during the process of passing necessary and critical patient information from one caregiver (or team of caregivers) to the next.

Ineffective hand-off communication is recognized as a critical patient safety problem in health care; in fact, an estimated 80% of serious medical errors involve miscommunication between caregivers during the transfer of patients. The hand-off process involves “senders,” those caregivers transmitting patient information and transitioning the care of a patient to the next clinician, and “receivers,” those caregivers who accept the patient information and care of that patient. In addition to causing patient harm, defective hand-offs can lead to delays in treatment, inappropriate treatment, and increased length of stay in the hospital.

## **Project Results**

The Center for Transforming Healthcare created the Hand-off Communication TST to measure the effectiveness of hand-offs within an organization or to another facility and to provide solutions to improve performance. The TST is an application that guides health care organizations through a step-by-step process to accurately measure their orga-

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nization's actual performance, identify their barriers to excellent performance, and direct them to proven solutions that are customized to address their particular barriers. Using the tool and the solutions from the Center's Hand-off Communications project, health care organizations reported an increase in patient and family satisfaction, staff satisfaction, and successful transfers of patients. One health care organization reduced readmissions by 50 percent; another health care organization reduced the time it takes to move a patient from the emergency department to an inpatient unit by 33 percent. Health care organizations were able to complete their Hand-off Communications project in approximately four months, using minimal resources. In fact, organizations added no staff and made only minor changes to the roles and responsibilities of existing staff.

The universal experience of the health care organizations that built and tested the TST for Hand-off Communications was that senders and receivers had differing expectations of what constituted a successful hand-off. Using the TST, these organizations aligned expectations of the hand-off, developed a process for a successful hand-off, and fostered better relationships and communication among staff. The Hand-off Communications TST accomplishes the following:

- Facilitates examination of the current hand-off communication process between two settings of care from the viewpoints of both the senders and receivers.
- Provides a tested and validated measurement system that produces data that support and drive the need for improving an organization's current hand-off communication processes.
- Identifies areas of focus including the specific information needed for the transition being measured. (For example, the information needed for a hand-off from the emergency department to an inpatient unit differs from that needed for a hand-off from a hospital to a skilled nursing facility.)
- Provides customizable forms for data collection to fit the specific needs of the transition being measured.
- Provides guidelines to determine the most appropriate and realistic hand-off communication process for a given transition while also empowering staff involved in the process.

### **SHARE Solutions**

The hand-off communications solutions and list of collaborating hospitals are on the Center website at [http://www.centerfortransforminghealthcare.org/assets/4/6/CTH\\_Hand-off\\_commun\\_set\\_final\\_2010.pdf](http://www.centerfortransforminghealthcare.org/assets/4/6/CTH_Hand-off_commun_set_final_2010.pdf). The targeted solutions, which are described using the mnemonic SHARE, address

the specific causes of unsuccessful hand-offs. SHARE refers to the following actions:

- **Standardize critical content.** This includes providing details of the patient's history to the receiver, emphasizing key information about the patient when speaking with the receiver, and synthesizing patient information from separate sources before passing it on to the receiver.
- **Hardwire within your system.** This includes developing standardized forms, tools, and methods (such as checklists); identifying new and existing technologies to help make the hand-off successful; and stating expectations about how to conduct a successful hand-off.
- **Allow opportunity to ask questions.** This includes using critical thinking skills when discussing a patient's case as well as sharing and receiving information as an interdisciplinary team. Receivers should expect to receive all key information about the patient from the sender. Receivers and senders should scrutinize and question the data, and they should exchange contact information in the event there are additional questions.
- **Reinforce quality and measurement.** This includes demonstrating leadership commitment to successful hand-offs, such as holding staff accountable, monitoring compliance with use of standardized forms, and using data to determine a systematic approach for improvement.
- **Educate and coach.** This includes organizations teaching staff what constitutes a successful hand-off, standardizing training on how to conduct a hand-off, providing real-time performance feedback to staff, and making successful hand-offs an organizational priority.

All Joint Commission-accredited and certified health care organizations have free access to the TST and hand-off communications solutions via their secure *Joint Commission Connect*<sup>™</sup> extranet. In addition to the Hand-off Communications TST, the Center currently provides targeted solutions for hand hygiene and wrong-site surgery. The Center also plans to add targeted solutions for surgical-site infections, heart failure hospitalizations, safety culture, falls, and other issues.

For more information about the Hand-off Communications project, contact Klaus Nether, MT (ASCP) SV, MMI, master black belt, Center for Transforming Healthcare, at [knether@jointcommission.org](mailto:knether@jointcommission.org). For information about the Targeted Solutions Tool, visit the Joint Commission Center for Transforming Healthcare website at <http://www.centerfortransforminghealthcare.org> or call customer service at 630-792-5800. 