

SHARED Handover For Labour Ward Recovery

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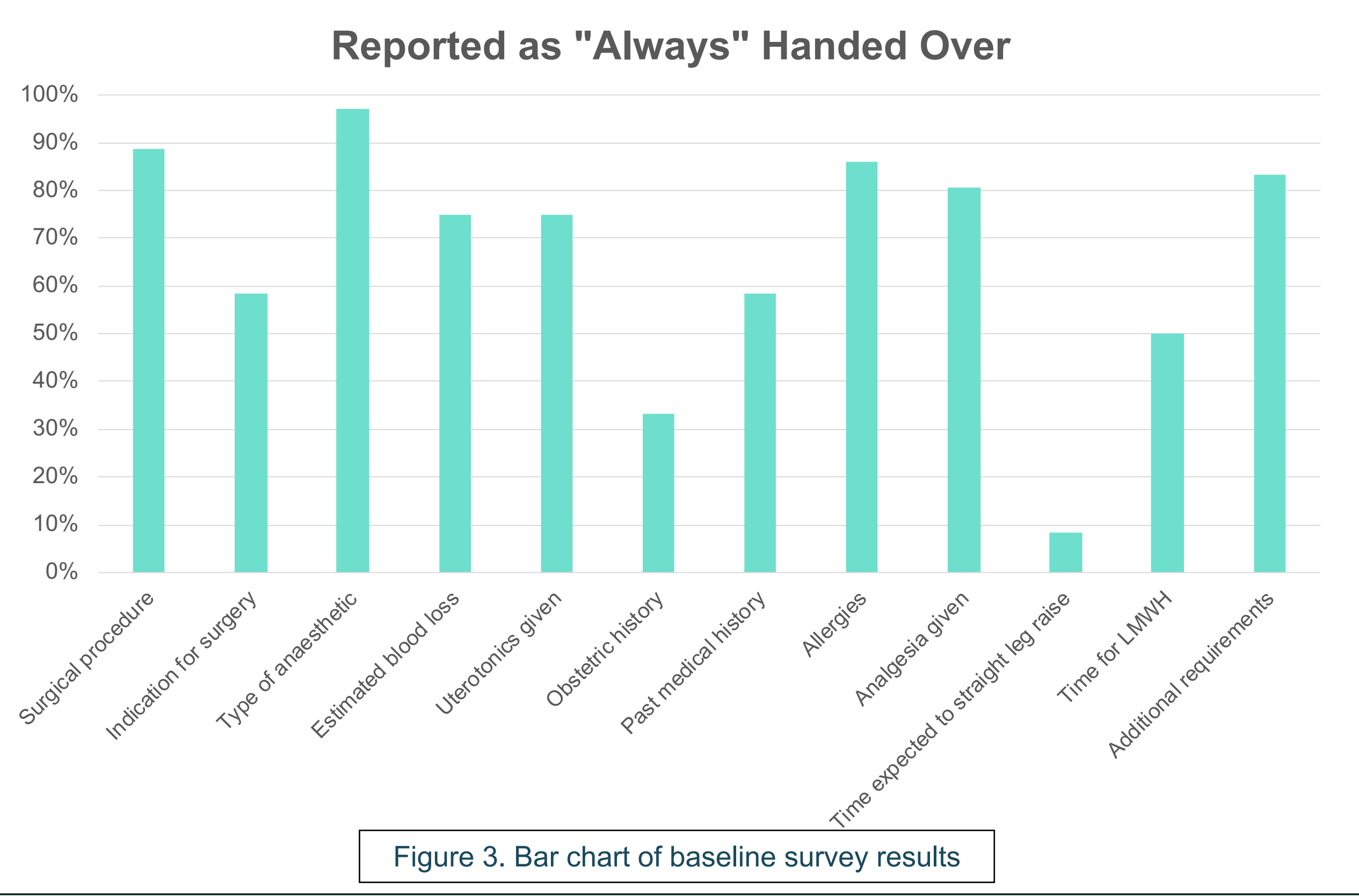
INTRODUCTION

National standards for immediate post-anaesthesia recovery state that the anaesthetist must formally hand over the patient's care to an appropriately trained practitioner [1]. Structured handover tools, such as the SAFE handover, have been shown to reduce critical omissions during handovers in obstetric anaesthesia [2]. Use of such tools has also been encouraged in the latest RCOA Guidelines for the Provision of Anaesthesia Services for an Obstetric Population 2023 [3]. We undertook a quality improvement project to assess and improve the effectiveness of anaesthetic handover to recovery in our labour ward by the introduction of a structured handover tool.

METHODS

We conducted a baseline survey to assess anaesthetic handover to recovery in the labour ward, collecting responses from recovery nurses, midwives, and anaesthetists (all grades). We subsequently introduced a handover tool using the acronym SHARED (type of Surgery, patient History, type of Anaesthetic, and planned Analgesia, the time when straight leg Raise should be possible, anything Extra and Dalteparin (or low molecular weight heparin, LMWH)). In addition, we created a sticker that was added to the anaesthetic chart to promote use of the tool. We conducted post-implementation surveys to gain feedback. The project has been registered as a clinical audit.

RESULTS



DISCUSSION

We implemented a standardised handover tool that has received positive feedback from recovery staff and anaesthetic colleagues. National recommendations are that maternity units should ensure effective handover of care between healthcare professionals involved in a woman's care that is implemented and monitored. Using a standardised approach to handover has previously been shown to improve patient safety, and we anticipate that this approach to recovery handover will be helpful to patient care.

Surgery and Indication

History

Anaesthetic, Allergy & Analgesia

Raise Time

Extras & Exceptions

Dalteparin

SHARED Anaesthetic Handover

Surgery :
Indication: _____ EBL: _____
Uterotonics: _____

History – Obstetric: _____
Medical: _____

Anaesthetic: ☐ Spinal ☐ Epidural Top-up ☐ GA
Analgesia: _____
Allergies: _____

Raise - time expected to straight leg raise: _____

Extras: Bloods required ☐ FBC ☐ U&E ☐ LFT ☐ CRP ☐ Coag
☐ Other investigations _____
☐ PET protocol ☐ HDU chart ☐ Urine output _____
☐ Epidural to stay in until _____

Dalteparin (or LMWH) _____

Print name: _____ Grade: _____

Signature: _____ Date: _____

Figure 1. SHARED infographic

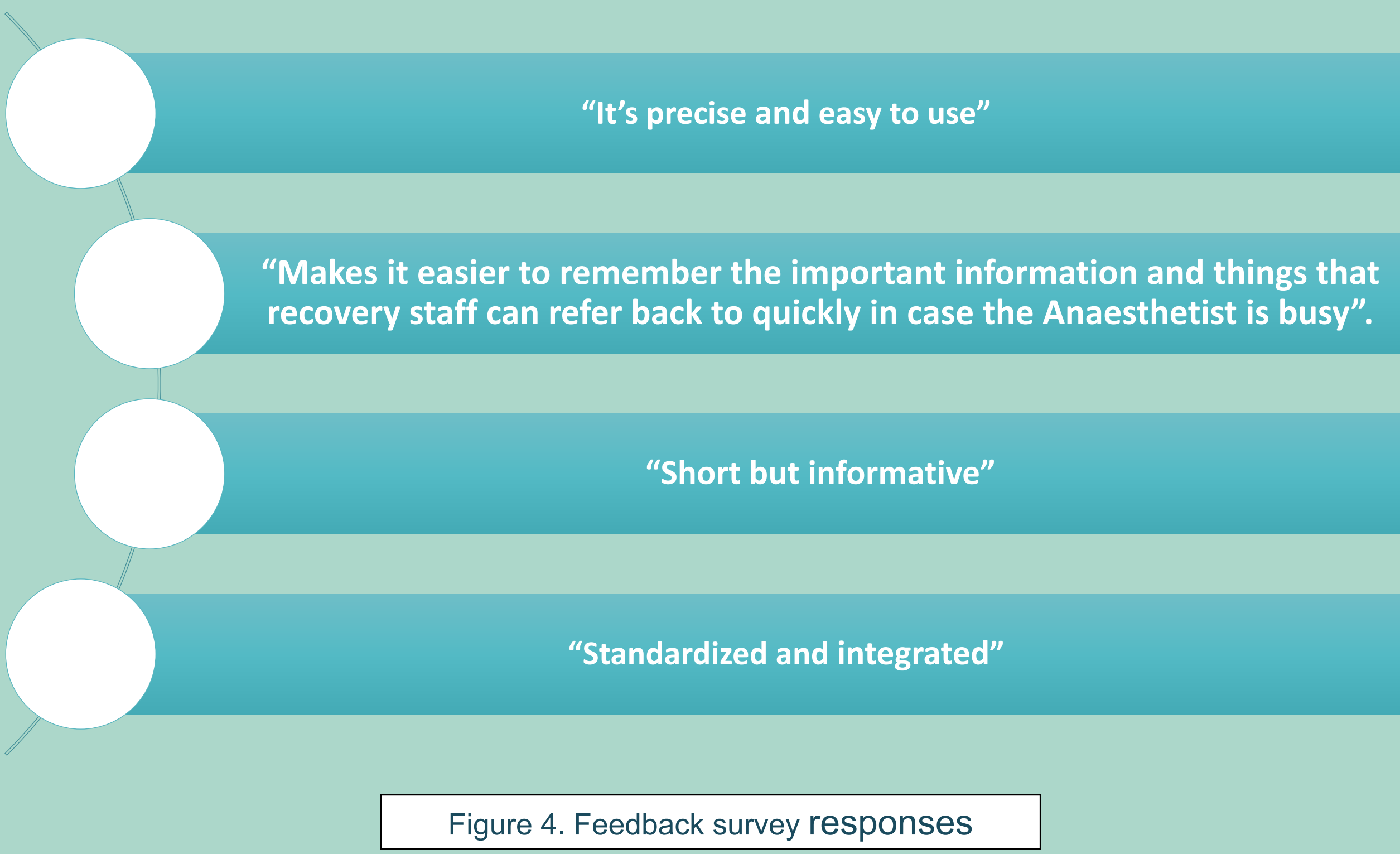
Figure 2.. SHARED Anaesthetic Handover sticker

RESULTS

In the baseline survey, we collected 36 responses. The areas highlighted as frequently missed during handover were the time expected for the patient to be able to straight leg raise, the time that LMWH can be given and the patient's obstetric history. Only 19% (7/36) of respondents thought the anaesthetic handover was sufficiently standardised.

In the feedback survey we collected 19 responses. Positive feedback included the structured, standardised and easy to use checklist format. The Anaesthetists reported it to be helpful to remember important information to handover and felt it reduced the number of follow- up calls from recovery staff. Recovery staff found it detailed and informative. Suggestions for improvement were regarding size of the sticker tool to allow more space for free text and an additional section to document what fluids and blood products were given.

94% reported it was an improvement on the previous handover process.



REFERENCES

- Whitaker Chair D.K., Booth H., Clyburn P. et al. Immediate post-anaesthesia recovery 2013: Association of Anaesthetists of Great Britain and Ireland. *Anaesthesia* 2013; 68: 288-297
- Dharmadasa A, Bailes I, Gough K et al. An audit of the efficacy of a structured handover tool in obstetric anaesthesia. *Int J Obstet Anesth* 2014; 23: 151–6
- Guidelines for the Provision of Anaesthesia Services for an Obstetric Population 2023. RCOA. <https://rcoa.ac.uk/gpas/chapter-9#chapter-9>