

Tell me about it! Improving the quality of anaesthetic handover in Obstetric Recovery.

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Introduction and Aims

It is well-recognised that a high-quality handover is crucial to providing effective post-operative care, and variability in practice can threaten patient safety due to information being missed.¹ The Association of Anaesthetists recommends the use of **formal handover checklists** in recovery.² Obstetrics has a high proportion of emergency and out-of-hours work, and clear communication under pressure within the multi-disciplinary team is vital in this environment.

In our unit, we noticed there is sometimes difficulty recalling all pertinent details when giving anaesthetic handover in Obstetrics. This is why we developed a project to help address this.

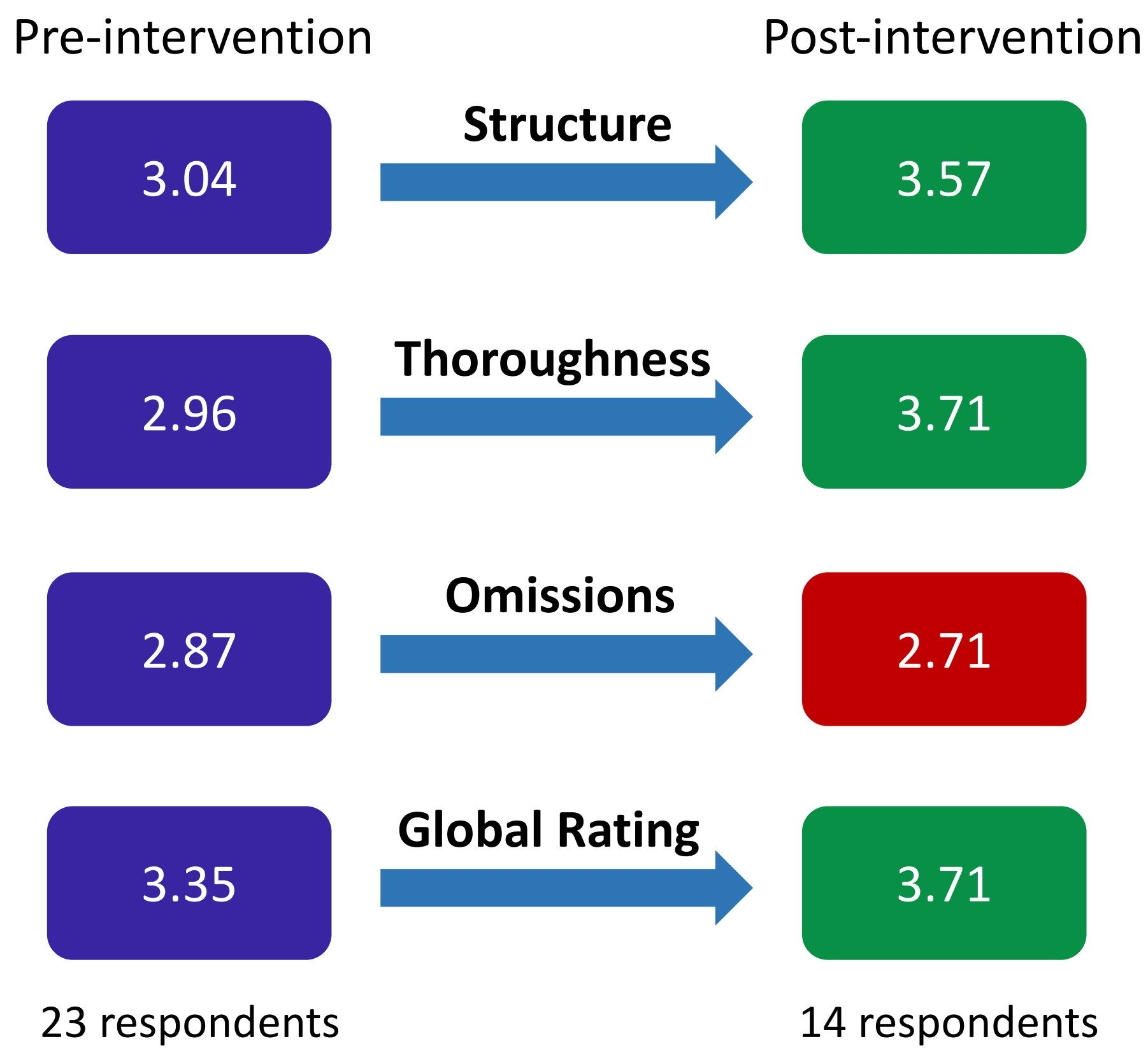
Methods

- Pre-intervention questionnaires were sent to the midwifery team about the **quality of anaesthetic handover** after obstetric theatre cases. The questions asked respondents to rate from 1-5: structure; thoroughness; omissions (“are things ever missed out?”); and a global rating of the quality. We also asked whether handover would be improved with more structure and/or guidance.
 - Intervention: we created a **structured handover poster** and placed a copy above each bedspace in Obstetric Recovery.
 - We advertised the poster via email, WhatsApp, and physically placing multiple copies in the Obstetric Anaesthetic Office.
 - Post-intervention questionnaires were sent to the midwifery team, which included qualitative feedback.
 - Post-intervention questionnaires were also sent to the obstetric anaesthetists, which included qualitative feedback.
- This project was peer-reviewed and approved by the Trust Quality Improvement Team.

Results

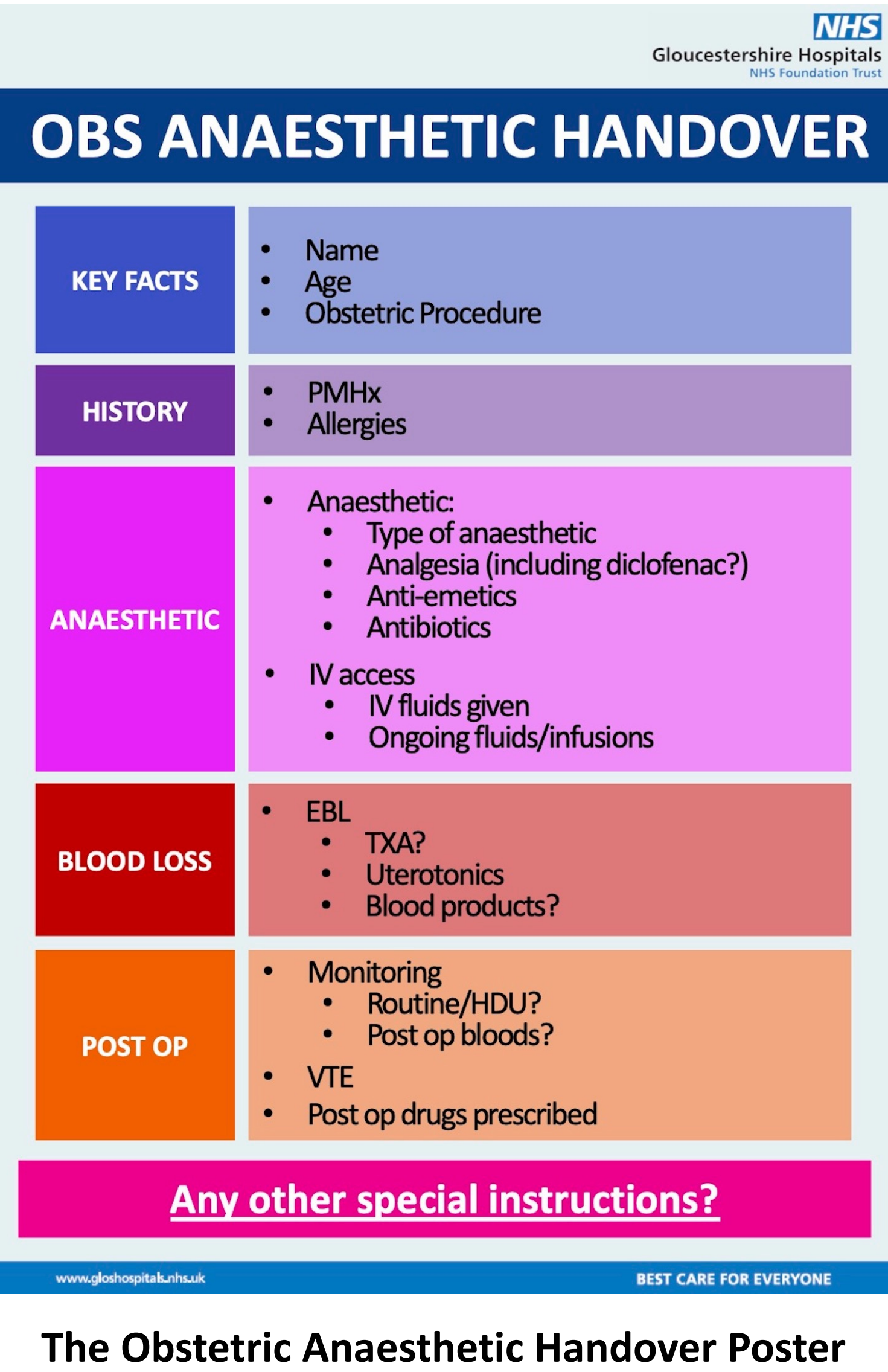
- Pre-intervention** questionnaires indicated that handover was neither structured nor thorough enough.
- 22 out of 23 respondents felt details were missed during handover.
 - Over 90%** of respondents felt that handover would be improved with more structure and guidance.

Midwifery Team Questionnaires (average score out of 5)



Comments from the Midwives:

- Examples of positive feedback
- Very clear and easy to understand
 - Gives a structure so nothing is missed
 - A helpful tool to refer to for what the handover should look like
 - It works when the practitioner uses it
 - Clear and informative
- Suggestions for possible improvement
- Need to make sure it is done by all
 - Reminder for all anaesthetists that the poster is there
 - More awareness (possibly put in team talk in CDS so anaesthetists can be prompted by midwife if needed)
 - Actually sticking to the poster, not just quickly speeding through
 - Pushing to change the habit of brief handovers... to be safe it all needs to be said



The Obstetric Anaesthetic Handover Poster

Comments from the Anaesthetists:

- Examples of positive feedback
- Great idea
 - Clear and concise
 - Very useful methodical poster
 - Really helpful when being called to obs theatre on call for emergency cases when not normally practising there
 - Bright colours and location.... easy to identify and use
 - Ensures comprehensive handover
 - Helps stop important information being forgotten
 - Well structured and succinct
 - Easy to use
 - Helpful aide-memoire, handover flow is better
- Suggestions for possible improvement
- Have we promoted this to the midwives and promoted them to expect us to use this structure?
 - Perhaps more buy-in from the midwifery side
 - Tickbox on the anaesthetic chart for documentation of effective handover?
 - Larger print, could decrease number of words even more
 - Possibly a section for complications/cell salvage use

Anaesthetic Team

- Questionnaires** (average score out of 5)
- Do you feel this poster...
- helps you **structure** your handover better? **4.06**
 - helps **thoroughness** of handover? **4.47**
 - stops you forgetting** things? **4.47**
- 17 respondents

Discussion

We have developed a straightforward and effective visual aid to anaesthetic handover in Obstetric Recovery. It has been very well-received by both the midwifery team and obstetric anaesthetic team, with improvements in almost all quantitatively assessed aspects of handover. The qualitative feedback is overwhelmingly positive, highlighting key themes of **clarity**, **ease of use** and **inclusion of important information**.

Our results suggest both the midwives and anaesthetists clearly feel this is a **useful tool that should be used more**. However, the main themes for improvement from the midwifery team were **lack of awareness amongst the anaesthetists** and that it is **not being used enough** during anaesthetic handover – and this has limited its impact on the quality of handover. Meanwhile, the anaesthetic team feedback indicates enthusiasm for the poster, but suggests we could promote it more amongst our midwifery colleagues, too.

Standardising the structure of handover should reduce the risk of key information being missed, thus enhancing patient safety. We wonder if the slight worsening of the subjective “are things ever missed out?” score is because we have raised awareness of what *should* be included.

In future:

- We will continue to raise awareness amongst the midwives and anaesthetists e.g. teaching sessions, incorporating into handover briefs
- We hope this poster will empower our midwives to ask the anaesthetist handing over for information that might have been missed.
- We can develop the poster’s contents with further improvement ideas.

Overall, this project has had a positive impact in our unit, and we feel that all obstetric units could benefit from introducing this simple intervention.

References

1. Redley B, Bucknall TK, Evans S, Botti M. Inter-professional clinical handover in post-anaesthetic care units: tools to improve quality and safety. *Int J Qual Health Care*. 2016;28:573-579.

2. Association of Anaesthetists of Great Britain and Ireland. Immediate Post-anaesthesia Recovery 2013. *Anaesthesia*. 2013;68:288-297.