## Teaching Tool 6 - Coaching

CanMEDS Collaborator

## Handover in everyday practice

THE UNMODIFIED CONTENT BELOW WAS CREATED FOR THE CANMEDS TEACHING AND ASSESSMENT TOOLS GUIDE BY S GLOVER TAKAHASHI AND IS OWNED BY THE ROYAL COLLEGE OF PHYSICIANS AND SURGEONS OF CANADA. YOU MAY USE, REPRODUCE AND MODIFY THE CONTENT FOR YOUR OWN NON-COMMERCIAL PURPOSES PROVIDED THAT YOUR MODIFICATIONS ARE CLEARLY INDICATED AND YOU PROVIDE ATTRIBUTION TO THE ROYAL COLLEGE. THE ROYAL COLLEGE MAY REVOKE THIS PERMISSION AT ANY TIME BY PROVIDING WRITTEN NOTICE.

NOTICE: THE CONTENT BELOW MAY HAVE BEEN MODIFIED FROM ITS ORIGINAL FORM AND MAY NOT REPRESENT THE OPINION OR VIEWS OF THE ROYAL COLLEGE.

One of the key competencies of the CanMEDS 2015 Collaborator Role is to hand over the care of a patient to another health care professional to facilitate continuity of safe patient care. Effective handovers can enhance care and help to prevent harm to patients. When handovers go badly, care can be negatively impacted. The purpose of this exercise is for you to relate what you are learning about hand over to your daily work. In doing so, you may develop a greater appreciation and understanding of these important concepts.

Completed by:	

- A. Drawing from your clinical practice over the past four weeks, answer the following questions. Please be sure to use specific details.
- 1. Describe a situation where you led or participated in a handover that you were pleased with the process and outcomes. Include general details about the background context (patient types, type of service, your role and the situation). What, if any impact did the location and your role in that location have on the outcomes? What factors contributed to the outcome?

2.	Describe a situation where you led or participated in a handover that you were not
	pleased with the process and outcomes. Include details about clinical location (patient
	types, type of service, your role in this location and situation). What, if any impact did the
	context and your role in that location have on the outcomes?

3. Based on ONE of the situations from above answer the following questions.

3a. What aspects of handover did you do well in that situation?

3b. What would you do differently in future to achieve better process or outcome(s)?

4. Review the tables below. Select and complete the tables below that apply to your 'selected' situation

HANDOVER <sup>i</sup> IN THIS CASE	Rate you	ır approa	ich IN THI	Areas or ideas for priority			
	1 Very poor	2 Poor	3 Solid competent	4 Very good	5 Superb	Not applicable	improvement?
I focused on giving and receiving patient information (e.g. when necessary I removed distractions; I listened actively and engaged in discussions)							
I used standardized handover tools (e.g. for verbal communication, electronic handover tools, formal checklists)							

HANDOVER <sup>i</sup>	Rate you rating	ır approa	ch IN THI	Areas or ideas for priority			
IN THIS CASE	1 Very poor	2 Poor	3 Solid competent	4 Very good	5 Superb	Not applicable	improvement?
I leveraged experience from team-based training on handovers to handle this situation							
I confirmed the reason and rationale for the transfer of care. Ensured clarity for all							
I verified that appropriate health professionals were aware of the patient's clinical condition and that they agreed to accept the transfer of care							
I verified that the roles and responsibilities of each team member in handover were clear to the patient and to other colleagues in the health care professions							
I followed institution's protocols for patient handovers, including transfer of care related to consultations, as well as responsibilities for treatment and discharge decisions							
I ensured sufficient patient information has been provided to the team during the handover							

HANDOVER <sup>i</sup>	Rate you rating	ır approa	ch IN THI	Areas or ideas for priority			
IN THIS CASE	1 Very poor	2 Poor	3 Solid competent	4 Very good	5 Superb	Not applicable	improvement?
I clarified and repeated back as needed							
I documented relevant information including self-identification							
OVERALL							

$\bigcap t$	h	er	n	$\cap$	tρ	5/	r	₽f	۾ا	<u></u>	ti	$\cap$	n	ľ
$\cup$ $\iota$		CI	1 1	$\circ$	$\iota \iota$	21	1.	_	ı	L	LΙ	v	1 1	

## B. Summary of current/new priorities for improvement of handover

- Based on your reflections above, complete the table below to help you make a learning plan around handover competencies.
- What aspects of handover can you do better?
- What are your goals and how will you know if you have been successful?

APPLIES TO PERIOD: FROM	TO
, <u></u>	: •

#	HANDOVER SKILLS	Goal(s) including timeframe	Metrics or criteria for success	Key next steps, resources, supports for success
1.				
2.				

 $<sup>^{\</sup>rm i}$  Adapted from CMPA Risk Fact Sheet- Patient handovers- A1300-004-E  $\circledcirc$  CMPA 2013. https://www.cmpa-acpm.ca/documents/10179/300031190/patient\_handovers-e.pdf Reproduced with permission.