



AB127. SOH23ABS_091. Pilot study to develop a pre-operative “cardiothoracic clinical handover tool” and its effect on handover quality

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Background: Clinical handover is an essential step in the surgical patient’s hospital journey but one that is not without risk. Within cardiothoracic surgery, endeavours to protocolise post-operative handover from cardiac theatre to cardiac intensive care units have resulted in enhanced patient safety, but little to no effort has focused on the pre-operative setting and the dissemination of information throughout the surgical team.

Methods: Thus, we designed a pre-post study examining the quality of pre-operative cardiothoracic patient handovers before and after the introduction of an intra-departmentally designed “Cardiothoracic Clinical Handover Tool” based on the Royal College of Surgeons of England’s guidelines for “Safe Handover”.

Results: In total, 80 clinical handovers were assessed, with 40 in each arm of the study. Handover quality significantly improved from a score of 63.75% to 88.57% ($P < 0.001$). This prolonged handover duration from a mean of 72.1 to 102.4 seconds per case ($P = 0.003$). Interruptions occurred in 27.5% of pre- and 25% of post-intervention handovers. Interruptions resulted in increased handover durations overall (114.6 *vs.* 77.7 s, $P = 0.012$), poorer quality handovers in the pre-intervention group (51.28% *vs.* 68.42%, $P = 0.03$) but failed to impact quality following the introduction of the handover tool (88.57% in both groups, $P = 1$).

Conclusions: We conclude that clinical handover tools have the potential to significantly enhance the quality of pre-operative handover and protect against poor handover practices, such as interruptions, thus safe-guarding patient welfare. We provide the first cardiothoracic specific pre-operative handover tool for adaptation to meet local requirements in other centres.

Keywords: Cardiac surgery; clinical handover; quality improvement; thoracic surgery; tools

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Footnote

Conflicts of Interest: The authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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