Thus, the aim of the project is to create and implement a structured and standardised mental model tool for effective communication during handover to further improve patient’s safety.

A team was formed consisting of representatives from nursing and risk management office to identify the gaps in the transferring and receiving of patient care. The team reviewed the Risk Management System Incidents from January 2011 to December 2012, to identify medication-related errors due to lack of proper handover of patient’s information. During this period we observed 24 incidents of medication errors, such as omission of medication, wrong drug, wrong frequency, overdose, delay in drug administration and wrong dose.

Using the Plan-Do-Study-Act (PDSA) Cycle, the team wanted to analyse and have a better understanding of the scope of the problem. We formulated a set of questionnaire, which was tested and validated by a team of nurses. Thereafter, we conducted a pre-survey involving two wards, namely Ward 56 and 85. In this survey both doctors and nurses were included.

The pre-survey among nurses showed, 52.5% of the respondents agreed that the current nursing handover communication is not conducted in a systematic and precise manner. 67.2 % of the respondents agreed that there is no standardised format of communication. After identifying the gaps, we did a literature search, from the literature we had reviewed, SBAR which stands for Situation–Background–Assessment–Recommendation, is one of the standardised communication framework for effective communication and our team decided to utilise this tool. In the questionnaire, to determine the knowledge of the respondents, two questions were asked about SBAR. It showed that 59% of the respondents do not know SBAR and 73.8% do not know how to utilise it.

The team conducted a pre-survey among doctors on their perspective of the current manner of communication with the nurses on patient care. 56.5 of the respondents felt that nurses do not convey the patient information in a systematic and concise manner. All the respondents felt that a structured communication programme and training will be beneficial for the nurses. 87% of the respondents agreed on the utilisation of SBAR for improving communication.

A post-implementation survey was conducted among the doctors in-charge of the piloted wards. Results revealed that the nurses conveyed the patient information in a systematic and precise manner. 79% of the respondents were aware that the nurses in the piloted ward used SBAR and 66.6% were using it constantly during their communication with the doctors.

The initial intervention was to conduct a Scenario-based Didactic Training on SBAR and to use SBAR format as a memory prompt for verbal communication during shift hand-over and referral to doctors and other department.

A series of posters and cue cards were developed and distributed to the nurses and doctors. We reviewed our initial intervention, realised that to base on memory prompt can be challenging for staff to comply. We brainstorm for solutions and to reinforce the use of SBAR for verbal communication, cue cards and posters were created. Each staff from the piloted wards received an ID-sized SBAR cue card. This card was also pasted on the telephone at the nursing counter which serves as reminder when performing telephone referral to doctors or other department. An A4-sized SBAR poster was also created and pasted on the pneumatic tube door cupboard, with regular reinforcement during roll call were also done.

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Simultaneously, Senior Management Personnel at Division of Nursing presented to the Senior Nursing Personnel at Division of Nursing. The team conducted a pre-survey among doctors on their perspective of the current manner of communication with the nurses on patient care. 56.5% of the respondents agreed that nurses do not convey the patient information in a systematic and concise manner. 67.2% of the respondents agreed that there is no standardised format of communication. After identifying the gaps, we did a literature search, from the literature we had reviewed, SBAR which stands for Situation–Background–Assessment–Recommendation, is one of the standardised communication framework for effective communication and our team decided to utilise this tool. In the questionnaire, to determine the knowledge of the respondents, two questions were asked about SBAR. It showed that 59% of the respondents do not know SBAR and 73.8% do not know how to utilise it.

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