Improving Transitions of Care: I-PASS Handoff Initiative

Karin A. Sloan, MD
Director of Clinical Quality, Dept of Medicine

on behalf of the Core I-PASS Implementation Team for Internal Medicine:
David Yuh, hospitalist/Quality Leader inpatient GIM; Faisal Rahman, Chief Resident; Katy Thompson, Chief Resident; Jordan Yoder, PGY3; Aravind Menon, PGY2; Craig Noronha, APD, Epic clinical lead for handoff tool
Context

• Shorter shifts $\rightarrow$ more frequent handoffs
• Having a cross-covering physician increases risk of a potentially preventable adverse event by 6-fold
• The CLER Transitions of Care domain calls for:
  – Standardized format for handoffs
  – Standardized process for handoffs (e.g. Epic handoff tool)
  – Process for supervision of handoffs
Opportunities identified for improvement during CLER needs assessment at BMC

• Education in optimal handoffs
  – Less than half of training programs reported that they had any formal training in handoffs
• Quality of handoffs
• Consistency across training programs
• Supervision of handoffs
I-PASS at BMC

- Transitions of Care subcommittee formed 2014 of residents and faculty stakeholders from different programs to develop a plan for improving Transitions of Care at BMC
  - Endorsed I-PASS handoff bundle
    - Best evidence for reducing preventable adverse events
- Chris Landrigan, I-PASS Study PI, gave Medicine Grand Rounds Oct 2014, during Quality Week
- Obtained BMC leadership support to move towards I-PASS as handoff format for physicians and nurses across BMC
  - Nursing is currently rolling out a bedside handoff initiative “I-PASS with SAFETY”
<table>
<thead>
<tr>
<th>Number of errors</th>
<th>Pre (n=5516 admissions)</th>
<th>Post (n=5571 admissions)</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall rate of medical errors</td>
<td>24.5</td>
<td>18.8</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Preventable adverse events</td>
<td>4.7</td>
<td>3.3</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Near misses / non harmful errors</td>
<td>19.7</td>
<td>14.5</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Non-preventable Adverse Events</td>
<td>3.0</td>
<td>2.6</td>
<td>0.48</td>
</tr>
</tbody>
</table>

## The I-PASS Mnemonic

<table>
<thead>
<tr>
<th></th>
<th>Illness Severity</th>
</tr>
</thead>
<tbody>
<tr>
<td>I</td>
<td>Stable, “watcher,” unstable</td>
</tr>
<tr>
<td>P</td>
<td>Patient Summary</td>
</tr>
<tr>
<td></td>
<td>Summary statement</td>
</tr>
<tr>
<td></td>
<td>Events leading up to admission</td>
</tr>
<tr>
<td></td>
<td>Hospital course</td>
</tr>
<tr>
<td></td>
<td>Ongoing assessment</td>
</tr>
<tr>
<td></td>
<td>Plan</td>
</tr>
<tr>
<td>A</td>
<td>Action List</td>
</tr>
<tr>
<td></td>
<td>To do list</td>
</tr>
<tr>
<td></td>
<td>Timeline and ownership</td>
</tr>
<tr>
<td>S</td>
<td>Situation Awareness and Contingency Planning</td>
</tr>
<tr>
<td></td>
<td>Know what’s going on</td>
</tr>
<tr>
<td></td>
<td>Plan for what might happen</td>
</tr>
<tr>
<td>S</td>
<td>Synthesis by Receiver</td>
</tr>
<tr>
<td></td>
<td>Receiver summarizes what was heard</td>
</tr>
<tr>
<td></td>
<td>Asks questions</td>
</tr>
<tr>
<td></td>
<td>Restates key action/to do items</td>
</tr>
</tbody>
</table>

Participation in Society of Hospital Medicine-IPASS Mentored Implementation Program

- With program leadership support, Internal Medicine program applied to participate and was selected
- AHRQ-funded project with the aim of disseminating I-PASS to 32 additional institutions
- We have been highlighted as site that has completed all milestones thus far
- Allows access to all of the I-PASS curricular materials
- In scope for program: MP3 and MP4
I-PASS training completed to date

• With the support of GME leadership, every incoming BMC intern participated in simulated training in I-PASS handoffs at orientation
  – 1 facilitator: 1 to 2 groups of 3 interns, each intern practiced giving, receiving, and observing a handoff

• Internal Medicine noon conference held in early June for PGY2s and PGY3s and supplemental curriculum planned for July ambulatory half day sessions

• 4 champion trainings held for Chief Residents and faculty from many BMC departments
A big *thank you* to champions/facilitators in Dept of Med

- Served as facilitators for Intern Orientation:
  - Sheilah Bernard
  - Rachel Casas
  - James Hudspeth
  - Nyra Khetarpal
  - Rob Lowe
  - Rachel Simmons
  - Mike York
  - David Yuh
  - All Chief Residents: Nick Bosch, Katy Thompson Brunner, Faisal Rahman, Usman Tahir, Stephanie Toth, Sasha Wong

- Completed champion training:
  - Patrick Fleming
  - Henri Lee
  - Aravind Menon
  - Tom Ostrander
  - Carol Sulis
  - Deborah Whalen
  - Jordan Yoder
Plan for MP3 and MP4 services

• We are asking those on MP3 and MP 4 to:
  1. Conduct 2 observations and feedback of handoffs over the 3 week rotation and use the handoff observation forms (of giver, receiver, and written).
     • Team Resident: week 1
     • Attending: week 2
  2. Fill out the end-of-rotation survey on the quality of handoffs.

• Faculty who participate in this initiative will be eligible for MOC Part 4.
Goals of observations and feedback of handoffs

• Accountability for use of I-PASS and to ensure sustainment
• Opportunity for formative feedback
• Increase supervision of handoffs

• While MP3 and MP4 are officially participating in the I-PASS Mentored Implementation program, we will likely be developing a similar plan for observations and feedbacks of handoffs on other services
  • At a minimum, for trainees who don’t rotate on those services
Next steps for I-PASS handoffs across BMC

• Partnering with CIR housestaff QI Council
• Forming a BMC I-PASS Committee with a representative from each training program
• Each program will be expected to:
  • Use I-PASS handoff format
  • Use Epic handoff tool
    – Work with eMERGE team to optimize
  • Develop a plan for supervision of handoffs
  • Submit data on observations of handoffs so we can follow adoption
EPIC I-PASS handoff tool (currently most Medicine teams are using)
How faculty can support the I-PASS handoff initiative

• Familiarize yourself with I-PASS and support the I-PASS format
• Emphasize the importance of transitions of care in optimizing patient safety
• Support a protected space and time for handoffs
• Participate in this initiative by conducting live handoff observations to be eligible for MOC Part 4 credit
  • BMC now has MOC portfolio sponsor status from the American Board of Medical Specialties and we are working towards making this initiative institutionally sponsored for MOC
Future directions in transitions of care

• Inter-professional communication at care transitions
• Communication between consultative and primary services
• Other transitions in addition to shift-to-shift
  – Team to team (e.g. ED to inpatient), floor to MICU, inpatient to outpatient
Learn more about I-PASS by watching the 24 minute “Core Content Video”

- [www.hospitalmedicine.org/ipass](http://www.hospitalmedicine.org/ipass) (When you go to this link, it says "access denied." Ignore that. Go up to the right top corner and click "log on."

- username: BMC_IPASS
- password: Ipass123
- Under "Front-Line Provider Training Materials” → IPASS Core Content Video Module.
Thank you for your support of this Quality Improvement and Educational initiative that we believe will have a positive impact on patient safety.

Please let us know if you have any comments or feedback now and throughout the year.

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