



The INEED handoff tool:  
A Quality Improvement Project  
Empowering Inpatient RNs during Patient  
Handoffs from Emergency Department RNs

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# Introduction

- What is the patient handoff?
  - Transfer of patient information from Sending RN → Receiving RN
- The transition from ED to Inpatient setting is prone to errors in handoffs
- Lapses in communication = delays in patient care
- Standardizing handoffs is a solution!

# Literature Review

- Common themes
  - Consider input from receiving RN
  - Use of a handoff tool
  - RN satisfaction as indicator for effectiveness
  
- Gaps in Literature
  - Role of the Receiving RN is diminished
  - Limited studies focusing on the ED to Inpatient handoff

# Methodology

- Setting
  - Med/Surg Overflow floor at Trauma Level 1 Med Center
  - Only receives patients from the Emergency Department

## Phase 1: Development of the INEED Handoff Tool

- IPASS as the framework
- Input from floor charge nurses



<b>I</b>	<b>Illness Severity</b>	<ul style="list-style-type: none"> <li>• Stable, “watcher,” unstable</li> </ul>
<b>P</b>	<b>Patient Summary</b>	<ul style="list-style-type: none"> <li>• Summary statement</li> <li>• Events leading up to admission</li> <li>• Hospital course</li> <li>• Ongoing assessment</li> <li>• Plan</li> </ul>
<b>A</b>	<b>Action List</b>	<ul style="list-style-type: none"> <li>• To do list</li> <li>• Time line and ownership</li> </ul>
<b>S</b>	<b>Situation Awareness and Contingency Planning</b>	<ul style="list-style-type: none"> <li>• Know what’s going on</li> <li>• Plan for what might happen</li> </ul>
<b>S</b>	<b>Synthesis by Receiver</b>	<ul style="list-style-type: none"> <li>• Receiver summarizes what was heard</li> <li>• Asks questions</li> <li>• Restates key action/to do items</li> </ul>

South 1 Adult Annex

**INEED Handoff tool**

**I**NFORMATION

Male / Female

Diagnosis \_\_\_\_\_

Pertinent History \_\_\_\_\_

Isolation Y / N

Arriving in: Bed/ Gurney / Wheelchair

If Yes \_\_\_\_\_

Reporting Nurse \_\_\_\_\_

**N**EURO STATUS

Alert/Oriented x \_\_\_\_\_

Ambulatory Y / N

**E**MERGENT DATA

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**E**XPECTED TASKS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D**ISPOSITION

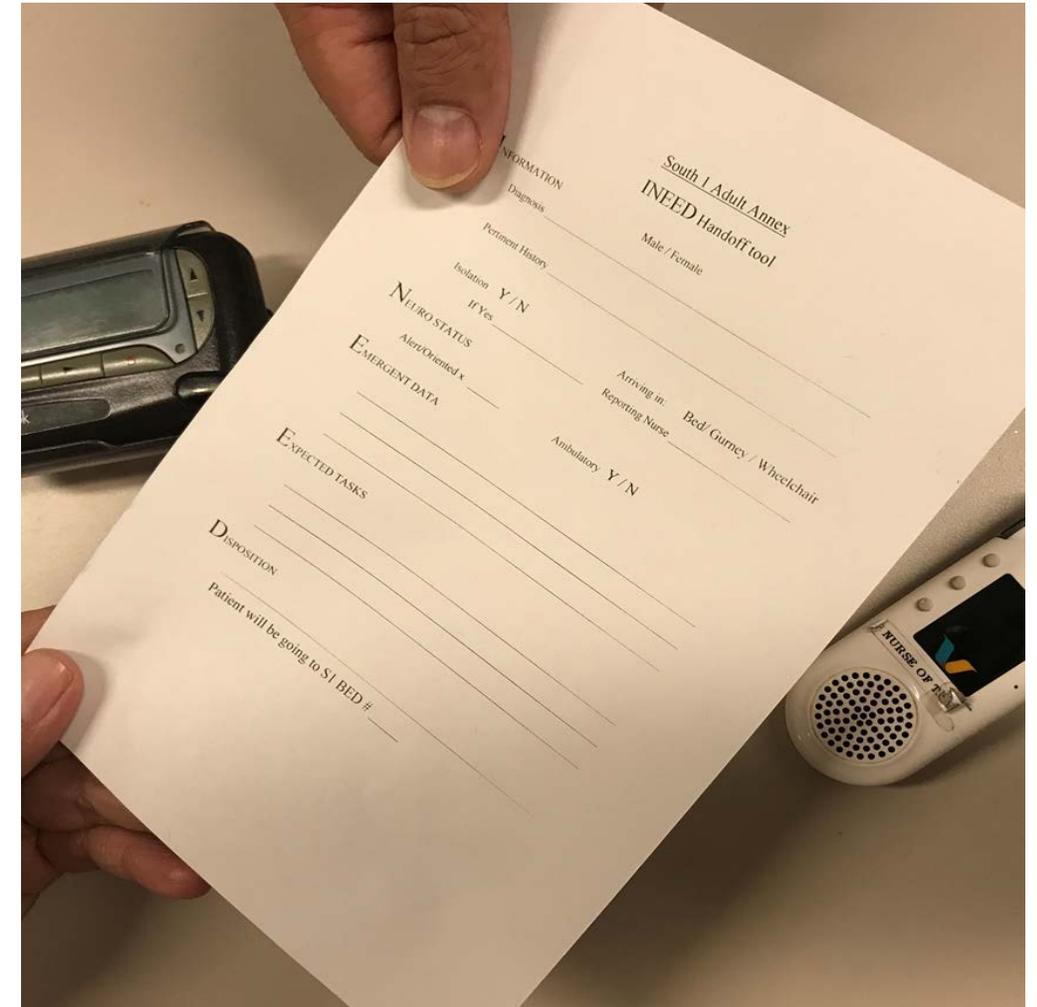
\_\_\_\_\_

Patient will be going to S1 BED # \_\_\_\_\_

# Methodology

## Phase 2: Implementation and Evaluation Using PDSA Cycle

- INEED tool was used by the Inpatient RN
- Two-week trial period on identified unit
- Electronic surveys sent to the Inpatient RNs who used the tool



# Post Implementation Results

- 19 relief charge nurses recruited to use the INEED tool
- 14 RNs responded to the surveys after two weeks
  - 11 RNs agreed that the tool sought for adequate patient info
  - 10 RNs agreed that the tool improved the handoff process
  - 9 RNs agreed that they would use the tool again
- Feedback
  - Some ED RNs could still not answer some questions
  - Improve Layout of tool

SIRN to receive

Reporting ED RN

**South One INEED Handoff tool**

**I**NFORMATION :

Pt initials

Male / Female

Diagnosis

Code Status

Past Med History

Isolation Y / N

Arriving in Bed/ Gurney / WC

If Yes, type:

Language

**N**EURO STATUS :

Alert/Oriented x

Ambulatory Y / N

**E**MERGENT DATA :

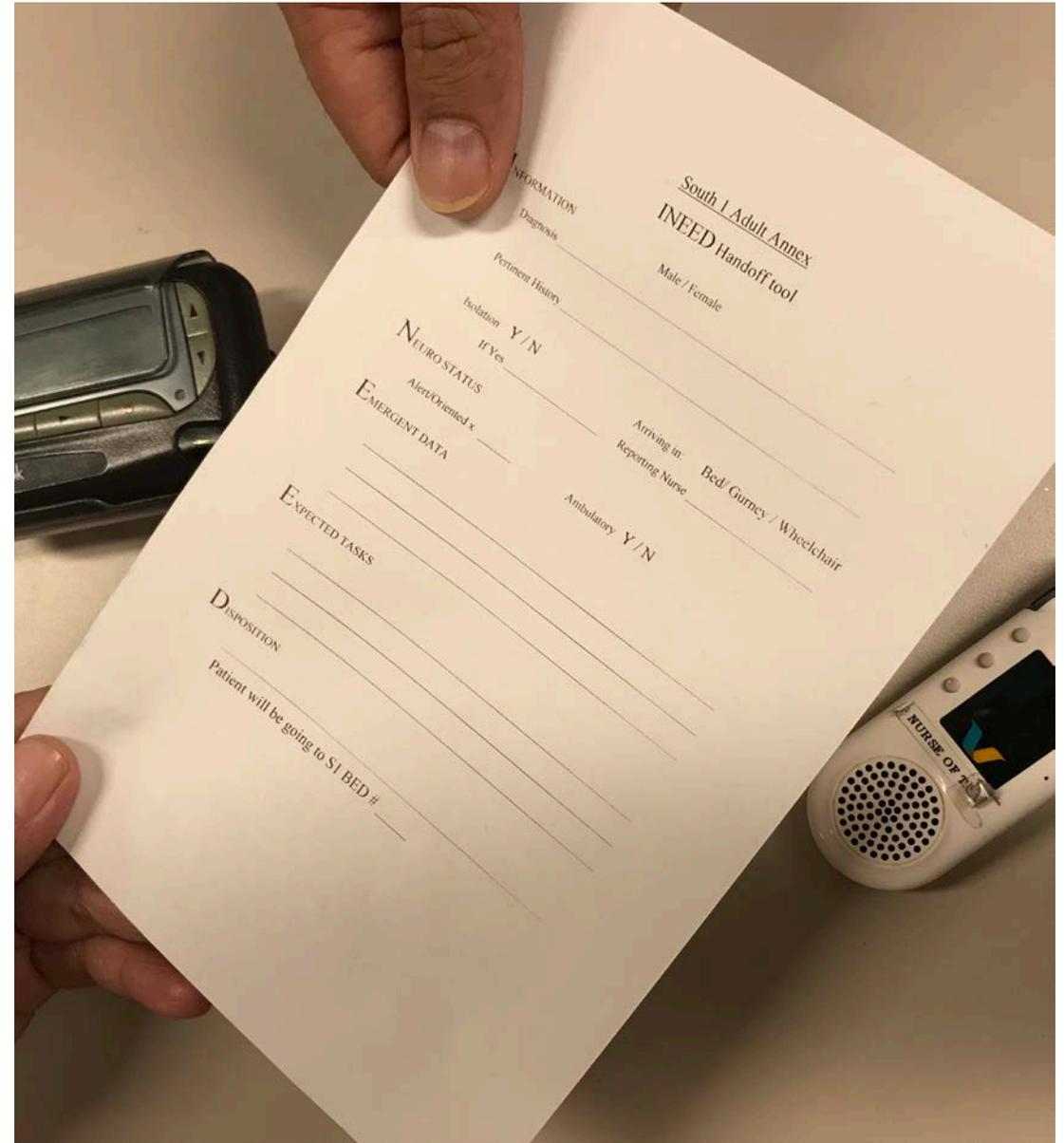
**E**XPECTED TASKS :

**D**ISPOSITION :

Additional Comments

Targeted Bed #

# Limitations and Conclusion



# Thank You!

## Acknowledgments

- Calene Roseman, RN South 1 Nurse Manager
- Dr. Jann Murray Garcia, Thesis Chair
- MSL cohort Class of 2020
- UC Davis Betty Irene School of Nursing
- I Love you, Mom and Dad!

I could not have done this without you all!

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