

PLICO Educational Workshops

Tulsa County Medical Society
&
Oklahoma State Medical Association

Raising the Bar on the Handoff

September - October, 2017

Sean E. Mahar, MA

<http://www.seanemahar.com/>



Raising the Bar on the Handoff



Malpractice Risks in Communication Failures

Shari Moore

crico

Protecting Providers.
Promoting Safety.

Annual Benchmarking Report



Malpractice Risks in Communication Failures



30% of the claims had one or more communication factors contributing to the event.

OVER
VIEW

CRICO Strategies' Comparative Benchmarking System (CBS) contains 350,000 medical malpractice cases representing more than \$25 billion in reserves and losses. CBS reflects the medical professional liability experience of more than 400 hospitals and 165,000 physicians from commercial and captive insurers across the U.S.



30%

Communication was a factor in 30% of 23,658 cases filed from 2009–2013.



Severity

SEVERITY OF PATIENT INJURIES



N=7,149



of all
high-severity
injury cases
involve a
communication
failure

N=8,445 cases involving
a high-severity injury



WHAT GOES WRONG

Communication errors may involve face-to-face conversations, electronic exchanges, or clinical notation and interpretation via the patient's medical record. For this Report, breakdowns in documentation timing, accuracy, and legibility were also included, as were systems failures in sharing information (e.g., test results and referral findings) and instructions among providers, patients, and family members.



Cases triggered by provider-provider communication failures are significantly more likely to result in payment.

Communication case types	Close with Payment	Average Indemnity
Communication - all	41%	\$433k
Provider-provider	49%	\$484k
Provider-patient	35%	\$381k

Preliminary Conversation

How are your communication handoffs similar or different from a baton pass in a relay race?

Working in small groups, please try to identify 2 to 3 similarities and differences.



Establish Learning Partnerships

- Create learning partnerships.
- Please incorporate anyone who joins us after we begin.

Desired “Thinking” Outcomes

Participants are able to think in the following ways:

1. Describe both physical and oral handoffs.
2. Reflect upon the physical purposes of oral handoffs and verbalize outcome oriented objectives.
3. Discriminate between expressive and outcome oriented speech.
4. Discriminate between the presence or absence of spontaneous evidence of a successful handoff.
5. Use cognitive and behavioral prompts for effective inquiry when soliciting evidence of grasping.
6. Recognize and describe the futility of questions that ask for yes/no responses. They are non-productive forms of inquiry during handoffs.

Desired “Performance” Outcomes

Participants are able to demonstrate the following for maximum handoff success:

1. Establish outcome oriented purpose.
2. Assess receiver’s abilities.
3. Engage the other party in the handoff.
4. Look for spontaneous evidence of grasping.
If this occurs, stop here.
5. Follow up using effective inquiry.

Current/New Vocabulary

Current

- Handoff
- Signout
- Transmitting info.
- SBAR
- ANTICipate
- I-PASS
- Provide information

New

1. Attention
2. Purpose
3. Performance
4. Expressive
5. Outcome Oriented
6. Feedback
7. Grasping
8. Spontaneous Evidence
9. Soliciting Evidence

Workshop Methodology

- ✓ Concept
- ✓ Experiential practice
- ✓ Concept
- ✓ Experiential practice
- ✓ Etc.

Program Outline

Module 1: Goal of an effective handoff [30 m.]

Break [15 m.]

Module 2: Result of an effective handoff [15 m.]

Module 3: Speaker monitors grasping [15 m.]

Module 4: Confirming grasping with inquiry [20 m.]

Module 1: The goal of an effective handoff is not to give, but rather for the receiver to get.

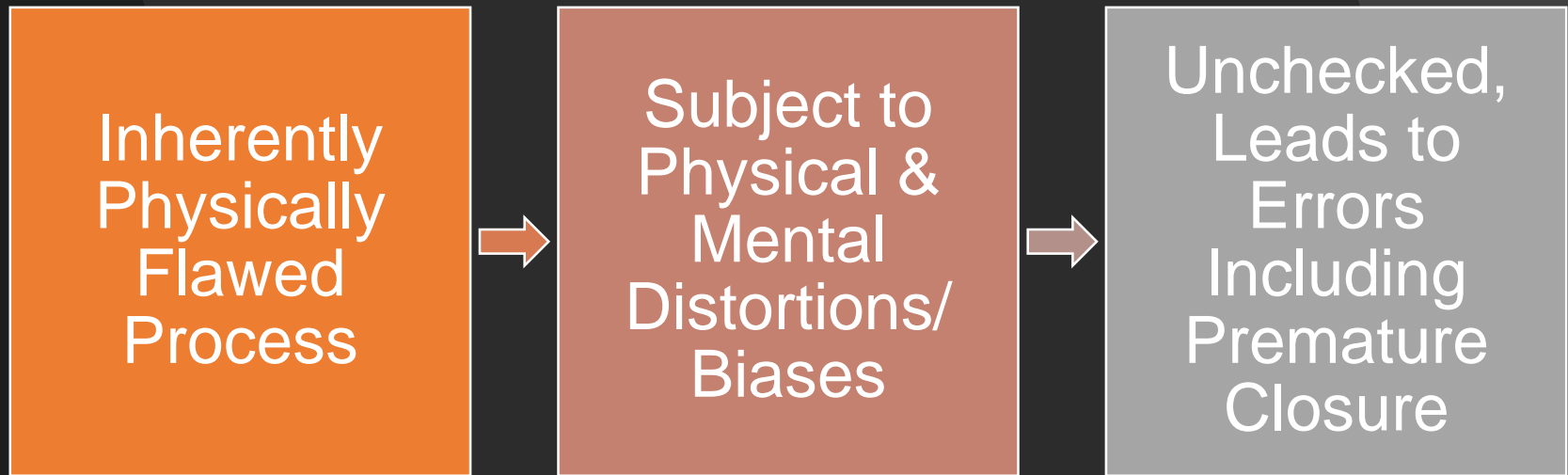


Zooming in on physical handoffs

1. Perception

2. Slow motion analysis
3. Experiencing physical grasping
4. Giver/sender responsibility to monitor grasping

1. Perception



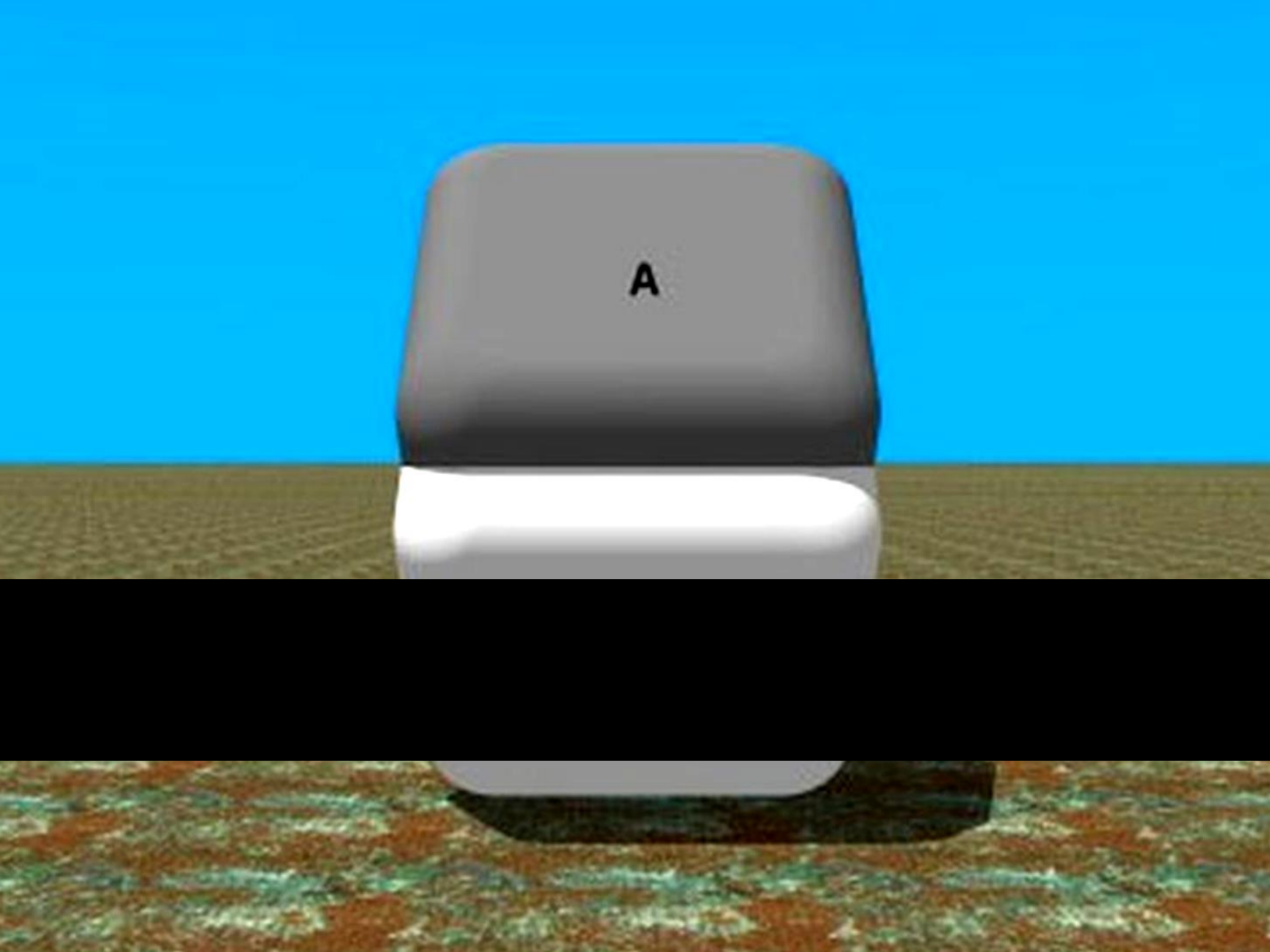
The Truth about the Blind Spot





A

B





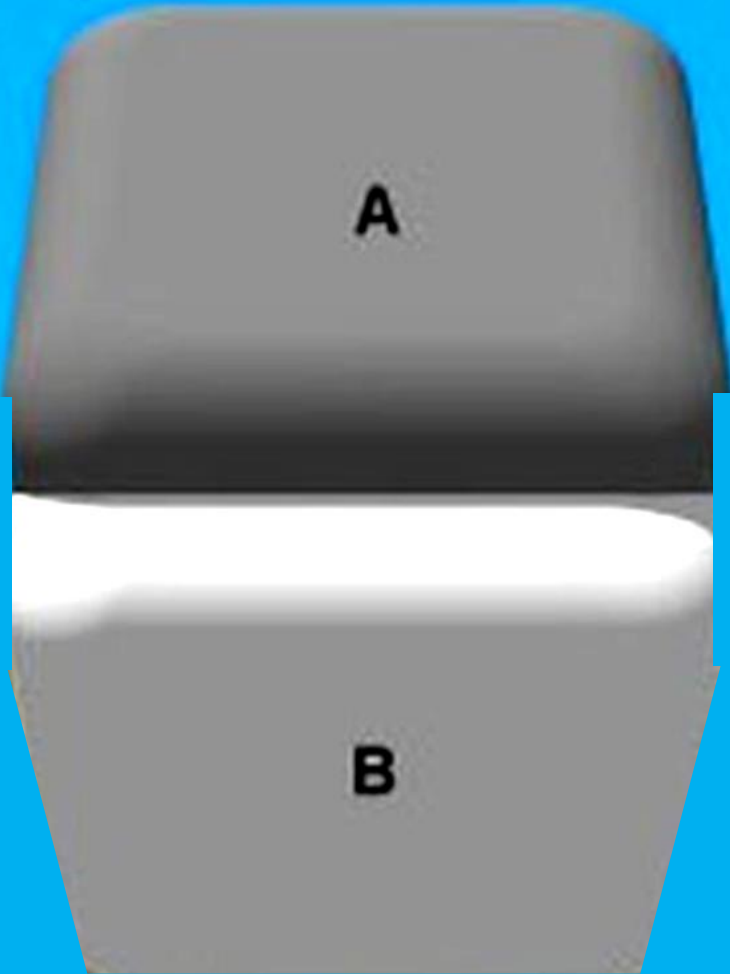
A

B



A

B



A 3D rendered chair is centered in the frame. The chair has a dark grey, rounded backrest and a white, rounded seat. The backrest is labeled with a bold black letter 'A' in the center. The seat is labeled with a bold black letter 'B' in the center. The chair is set against a bright blue sky and a brown, textured ground. A dark shadow is cast by the chair onto the ground to its right.

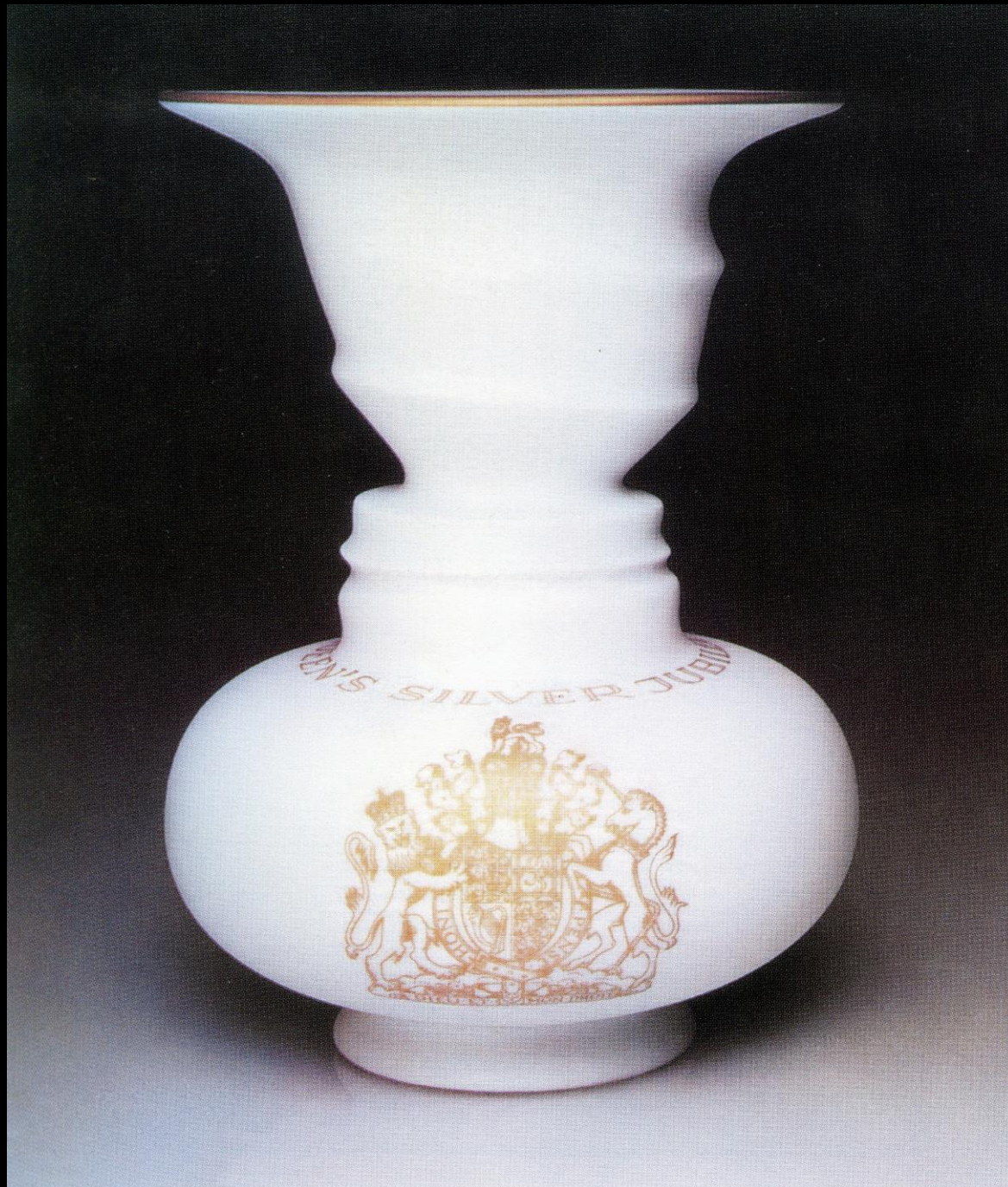
A

B







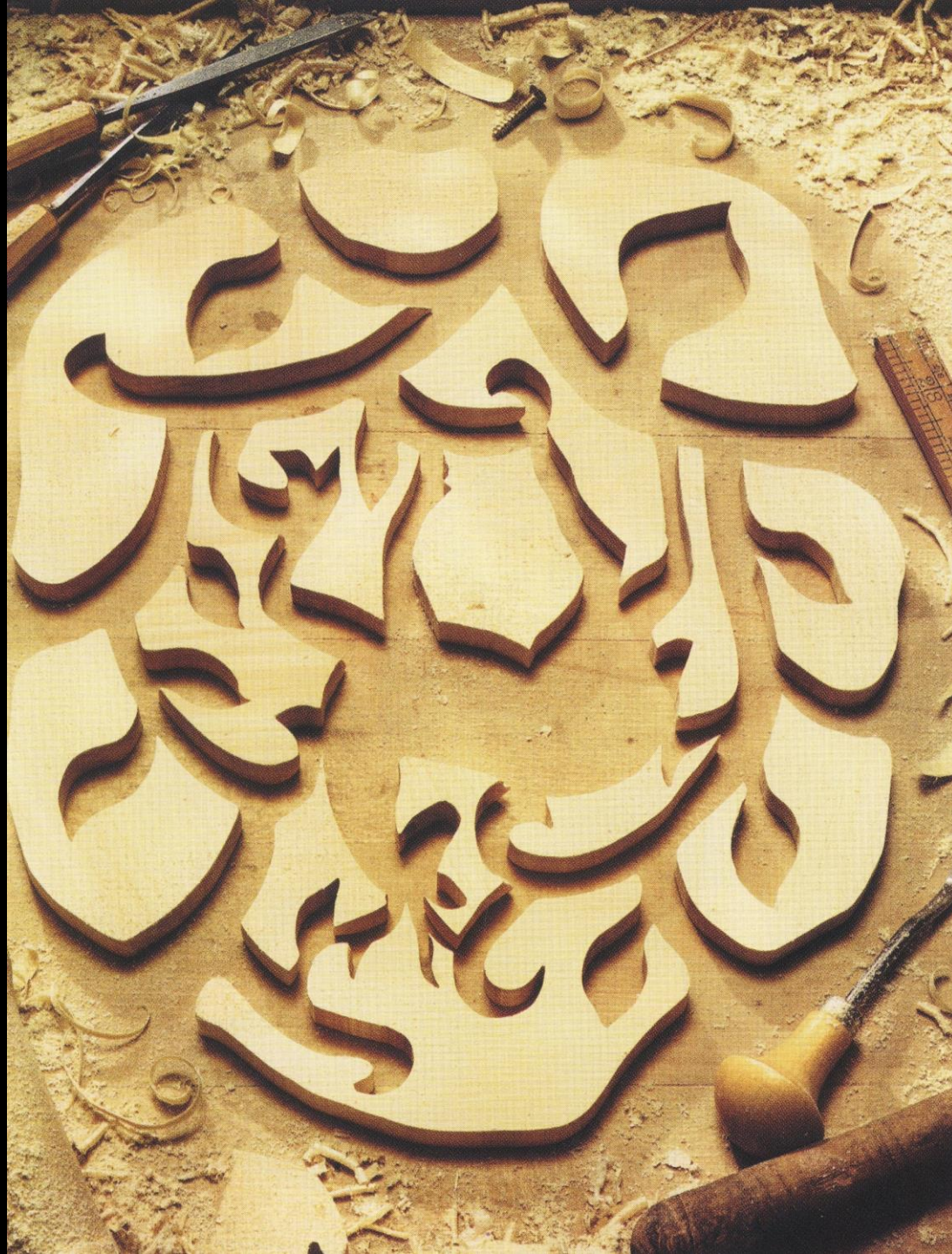




© Gianni A. Sarcone

© G. Sarcone, www.archimedes-lab.org

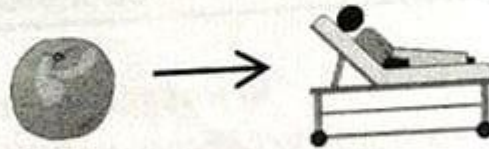






Spectrum

Diabetes Misunderstanding



- Patient in hospital taught to inject insulin by injecting an orange
- Patient readmitted to hospital with dangerously high blood sugar
- Patient was injecting insulin into the orange, then eating it



\$2700

Average daily cost for
hospital admission

Module 1: The goal of an effective handoff is not to give, but rather for the receiver to get.



Zooming in on physical handoffs

1. Perception
- 2. Slow motion analysis**
3. Experiencing physical grasping
4. Giver/sender responsibility to monitor grasping

2.
Two Slow
Motion
Video Clips
of Grasping











Module 1: The goal of an effective handoff is not to give, but rather for the receiver to get.



Zooming in on physical handoffs

1. Perception
2. Slow motion analysis
- 3. Experiencing physical grasping**
4. Giver/sender responsibility to monitor grasping

3. Experience Physical Handoffs

1

Practice giving and grasping with your learning partner

2

Practice Throwing and catching, the transition from physical to oral handoffs

Module 1: The goal of an effective handoff is not to give, but rather for the receiver to get.



Zooming in on physical handoffs

1. Perception
2. Slow motion analysis
3. Experiencing physical grasping
4. **Giver/sender responsibility to monitor grasping**

4. Giver/sender responsibility to monitor grasping



Giver/sender
is responsible
for monitoring grasping,
NOT the receiver.



We will re-visit this in Module 3.



Continue to be aware
of anything you pass
or that is passed to you.

Outline

Module 1: Goal of an effective handoff [30 m.]

Break [15 m.]

Module 2: Result of an effective handoff [15 m.]

Module 3: Speaker monitors grasping [15 m.]

Module 4: Confirming grasping with inquiry [20 m.]

Module 2: The result of a handoff flows from the initial thinking of the goal/purpose.

Concept: At the end of a handoff, the receiver

1. has a grasp of what is expected/needed
2. has the necessary information or access to it
3. has the skills and resources to follow through
4. accepts responsibility for follow through

Practicing Outcome Goals

1. Give a compliment
2. Give feedback
3. Explain my reasons
4. Tell you about a patient
5. Explain the bloodwork results

Note: See flowchart, part 1, comparing expressive and outcome oriented goals.

Give a Compliment

- What do you want the receiver to feel?
- What do you want the receiver to be thinking?
- What do you want the receiver to think of you?
- How will you know you were successful?

Practicing Outcome Goals

1. Give a compliment
2. Give feedback
3. Explain my reasons
4. Tell you about a patient
5. Explain the bloodwork results

Note: See flowchart, part 1, comparing expressive and outcome oriented goals.

Outline

Module 1: Goal of an effective handoff [30 m.]

Break [15 m.]

Module 2: Result of an effective handoff [15 m.]

Module 3: Speaker monitors grasping [15 m.]

Module 4: Confirming grasping with inquiry [20 m.]

Module 3: Speaker, not receiver, is responsible for monitoring grasping.

Practice: Monitor your receiver against three levels of attention, while you tell a story.

Level 3: Receiver is visibly inattentive, distracted, disinterested, even disrespectful.

Level 2: Receiver is faking it with occasional eye contact and a periodic “yep.”

Level 1: Receiver is sincerely attentive making eye contact, mirroring posture, interrupting with appropriate questions that advance your story.

Outline

Module 1: Goal of an effective handoff [30 m.]

Break [15 m.]

Module 2: Result of an effective handoff [15 m.]

Module 3: Speaker monitors grasping [15 m.]

Module 4: Confirming grasping with inquiry [20 m.]

Module 4: Use specific type of inquiry to increase confidence grasping has occurred.

Concepts:

- Inquiry is good.
- The answers to some questions do not add value.
- The answers to other questions actually increase confidence that grasping has occurred.

Practice questions

1. Let's practice questions that do not work, that do not produce conceptual or behavioral evidence of grasping. (Read from the tri-fold program material, the middle of panel 4.)
2. Practice questions that do work
 - They ask for cognitive/behavioral evidence
 - They ask for a calculation

Application Exercise

1. **Person A:** Responsible for discharging a young patient with a broken arm now in a cast. Explain cast care to the youth's parent.
2. **Person B:** Just nod and say "sure" during the instructions.
3. **After the instructions,** Person A needs to ask person B one or two questions, the answers to which should reveal evidence of grasping. Both people can collaborate on trying to find optimum questions. When the collaboration is completed, actually try out the questions and responses to see if they work.

Review Desired Outcomes

Participants are able to think in the following ways:

1. Describe both physical and oral handoffs.
2. Reflect upon the physical purposes of oral handoffs and verbalize outcome oriented objectives.
3. Discriminate between expressive and outcome oriented speech.
4. Discriminate between the presence or absence of spontaneous evidence of a successful handoff.
5. Use cognitive and behavioral prompts for effective inquiry when soliciting evidence of grasping.
6. Recognize and describe the futility of questions that ask for yes/no responses. They are non-productive forms of inquiry during handoffs.

Review Performance Outcomes

Participants are able to demonstrate the following for maximum handoff success:

1. Establish outcome oriented purpose.
2. Assess receiver's abilities.
3. Engage the other party in the handoff.
4. Look for spontaneous evidence of grasping.
If this occurs, stop here.
5. Follow up using effective inquiry.

Review Outline

Module 1: Goal of an effective handoff [30 m.]

Break [15 m.]

Module 2: Result of an effective handoff [15 m.]

Module 3: Speaker monitors grasping [15 m.]

Module 4: Confirming grasping with inquiry [20 m.]

Additional Applications

- Leadership
- Education
- Training
- Coaching
- Parenting

Q & A

**Based upon
your experiences
during the past 2 hours,
what will you do differently
to raise the bar on handoffs?**

Thank you!

