

## W020 - Hospital & Ward Late Handover Trend Analysis

### Definitions - Handover and Turnaround at Acute Trusts

#### Arrival Time

The time that the vehicle that has conveyed the patient to the hospital stops at the nearest point to the hospital department/unit and applies its handbrake. This time will be entered into the Mobile Data Terminal (MDT) in the vehicle.

#### Handover Time

The time that both clinical and physical care of a patient is handed over from staff to hospital staff. This time is not just the time that a verbal handover is conducted; it also includes the time taken to transfer the patient to a hospital chair, bed or trolley. The Ambulance Arrivals System (AAS) or the MDT may be used to input this time for each patient transfer, whichever is input first will be used for reporting purposes.

#### Clear Time

The time that staff book "clear" using the MDT in the vehicle, and are then available to be allocated to another incident.

#### Trajectories

The trajectories which are shown on each graph have been agreed with each Acute Trust. The trajectory is based on achieving the target of handing over every patient to A&E wards within 15 minutes by the end of March 2010.

#### Dorset Handover Times

As of the middle of July 2009, the collection of Handover Data in Dorset was improved. This effected the majority of handovers to West Dorset General, Poole and Royal Bournemouth Acute Trusts. An improved version of the Mobile Data Terminals used in Dorset ambulances means that Handover data will now be obtained from the Ambulance Crews via their MDT where the Ambulance Arrivals System was not used. This will result in an increase in the number of Handovers recorded in those hospitals as the system was phased in over the first half of July.

#### Accident & Emergency (ED/A&E), Medical and Surgical Admissions (MAU), OTHER

For the purposes of this report we will treat ward names of A&E and GENERAL as A&E. Historically Ambulance Crews have not been able to specify which ward they will convey their patient to on their MDT. Research has shown that more than 90% of wards with the name of General are in fact conveyed to A&E. The next version of the AAS will ensure that crews have to enter the correct handover ward, at this point we will only select wards with the name of A&E when reporting against the 15 minute handover trajectory.

#### Standardised Late Handover Reason

The late handover reasons provided through the MDT differ slightly from those provided through the AAS. To enable clearer analysis the reasons given through the MDT system have been standardised to fall in line with the SHA approved reasons in the AAS.

#### Reconciliation

Any challenges from an Acute Trust to the handover times given here should be forwarded to the SWAST clinical hub via: [logisticscell@swast.nhs.uk](mailto:logisticscell@swast.nhs.uk)

### Macros

This workbook requires macros to be enabled to switch on interactivity in some elements of the graphs. In order to enable macros in Excel 2003 go to Tools (at the top of the page)> Options> Security> Macro Security> Medium >OK. Or Press F1, search for "enabling macros", and follow instructions.

### Exclusion Criteria

Calls with a call-stopped reason of "Test Call", "Duplicate Call", "Call Entered in Error", "For Information Only", "Hoax" and "Done by Another Service"

Any handovers greater than 6 hours in duration are excluded because investigation has shown that the very infrequent occurrences of this event are not cause by late handovers in Hospitals.

From 01st of April 2010 handovers involving Helicopters and Sea Ambulances are excluded from all late handover reporting as the logistics of their handover process are significantly different from other vehicles.

### Areas covered

As of 01 February 2013 this report covers the following areas within the Trust: Cornwall & Isles of Scilly, Devon, Dorset & Somerset.