

Large-scale implementation of the I-PASS handover system at an academic medical centre.

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<https://psnet.ahrq.gov/issue/large-scale-implementation-i-pass-handover-system-academic-medical-centre>

[Handoffs](#) among providers remain suboptimal despite the development of effective strategies to improve them. This [quality improvement](#) report described the implementation of [I-PASS](#), an evidence-based handoff strategy that has shown to reduce adverse events, at an academic medical center. Investigators utilized a comprehensive implementation strategy that included [leadership](#) support, training of all staff, integrating electronic health record templates to facilitate performance of I-PASS, and engaging frontline staff. This multi-faceted approach is similar to [prior work](#) implementing patient safety strategies. To evaluate the intervention, the researchers conducted surveys of clinicians and observed handoffs to determine if I-PASS was actually in use. They found that I-PASS was more consistently used on medical and pediatric services than on surgical services, where it was felt to be less applicable to stable postsurgical patients. The prevalence of asynchronous handoffs posed a barrier to consistent implementation. This report demonstrates the complexity of implementing and evaluating an evidence-based safety intervention and underscores the need for frontline staff involvement in improving safety.