Initiative Type Model of Care Status Deliver Added 26 August 2021 Last updated 22 June 2022 **URL** https://test.clinicalexcellence.qld.gov.au/improvement-exchange/telehandover-patient-centredapproach-clinical-handover

TeleHandover patient centred approach for clinical handover

Summary

A TeleHandover is a video-conferenced team-to-team clinical handover for patients transferring between hospitals or to another healthcare service or facility.

They are interdisciplinary and use a case conference format. Patients who are complex, non-critical and requiring rehabilitation or ongoing care will benefit from Tele-Handover. Tele-Handover includes

the patient (and family or carers if appropriate) and interdisciplinary teams from both sending and receiving facilities (or community teams). The Mackay Hospital and Health Service program has evolved to include Residential Aged Care Facility (RACF) patients returning to their place of residence and for assessment and acceptance of new resident placements. This program is enabling timely, shared clinical decisions to be made with patient and/or carer involvement. It facilitates the safe transfer of care of patients to the setting most appropriate to their needs, often closer to home and their support base. TeleHandover is well accepted in Mackay HHS facilities with good clinical participation and a number of clinical areas actively requesting virtual handovers before accepting patient transfers in or referring patients on to other sites.

Key dates
Apr 2020
Jul 2021
Implementation sites

Mackay HHS facilities

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Aim

The Tele-Handover model aims to improve compliance with prescribed clinical handover practice for inter-hospital transfers and transfers to other healthcare services or facilities by supporting clear and safe communication between treating teams, to enhance decision making and reduce risk of clinical incidents resulting from poor communication.

Benefits

- enables both treating teams to communicate in real time
- improved access to information
- staff from sending and receiving facilities get to know each other (improved understanding, relationships and trust)
- higher quality handovers
- better continuity of care
- efficient process phone calls between each discipline are not required
- allows all disciplines to hear each other's input
- allows patient to meet the receiving team before they transfer
- patient and family can provide input to aid decision making
- patients and family hear the recommendations from the team first-hand

Background

TeleHandover was first implemented in Mackay Hospital and Health Service (HHS) as part of a seed funding grant from Telehealth Support Unit, Health Improvement Unit. To date the program has coordinated and facilitated 60 virtual clinical handovers and 55 Case Conference Family Meetings. Telehealth Handover events have involved multiple sites in Australia and internationally (Spain), including public and private sector hospitals, primary care services and family members participating on their own devices. The service has supported clinical care decisions and handover of patients with medical conditions across a range of nineteen (19) subspecialties.

Solutions Implemented

Supporting the development and implementation of a state-wide TeleHandover service model.

Evaluation and Results

- The program has coordinated and facilitated 60 virtual clinical handovers and 55 case conference family meetings.
- The service has supported clinical care decisions and handover of patients with medical conditions across a range of 19 subspecialties.
- 43 Rural Step Downs resulting in 1152 released bed days at MBH and is supporting capacity demand, patient flow and bed management across MHHS.
- Patient and carer survey results indicate high satisfaction with the service.
- Staff survey results collected from participant clinicians at TeleHandover events evidence highly positive responses across seven domain questions.

Lessons Learnt

Coordination is key. A dedicated TeleHandover Coordinator role is critical to success.

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