

# Mother & Baby Substance Exposure Toolkit

## Best Practice No. 30

A part of the California Medication Assisted Treatment Expansion Project

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# Implement a warm handoff strategy to follow at time of discharge

Best Practice No. 30

Labor and Delivery, Nursery/NICU, and Transition of Care

## Overview

Implementation of a warm handoff process at the time of discharge, when key information can be easily lost or forgotten, will reduce the risk of communication breakdowns that compromise patient safety and jeopardize a smooth and cohesive transition to care.

## Why we are recommending this best practice

- Use of warm handoffs:
  - Increases patient safety through improved communications and provides an opportunity to question, clarify, and confirm information.
  - Builds partnerships for improved care, outcomes, and experiences.
  - Increases shared decision making and patient/family engagement.
- Use of standardized workflows (the most efficient method or approach that all follow):
  - Provides a structured communication tool and handoff process.
  - Decreases variation in practice.
  - Prevents omission of practice elements, ensuring every discharge/transition of care will benefit from all aspects of the warm handoff.
  - Allows for analysis of practice and process improvement when issues or gaps are identified.

## Strategies for Implementation

- Collaborate with discharge caregivers, receivers, and patients to develop written standard work that supports next steps of the plan of care and meets the needs of all team members.
- Warm handoff standard work should:
  - Be in person (whenever possible) and in front of the patient and/or family.
  - Include an introduction by the discharging team member to the next care provider.
  - Include pertinent details related to prenatal care and the acute care stay.
  - Include a review of the discharge goals and plan.
  - Include a review of next steps and who is responsible.
  - Include a review of what is important to the patient/family.
  - Provide an opportunity for all participants, including patient and family, to question, clarify, and confirm information.



## Kayla

The hospital caring for Kayla has both an inpatient and outpatient social worker who routinely meet to discuss cases and prepare for postpartum discharges. Both social workers rely on a newly developed, structured process for the warm handoff. The process was developed by a multidisciplinary group of stakeholders in the maternity and newborn departments, similar to the group that developed the Plan of Safe Care recommendations that are included in the discharge checklist. It was quickly realized that the discharge checklist was necessary but not sufficient to complete the warm hand off in the transition from inpatient to outpatient care. A standardized communication tool outlines the warm handoff process for each patient that: occurs in person with the patient, verbally reviews the discharge checklist and Plan of Safe Care, outlines who is responsible for specific next steps of the process, provides an introduction to the next care provider whenever possible, and provides an opportunity for the patient and family to ask questions and clarify any missing information.

Kayla agreed to meet with the outpatient social worker who will oversee her and Baby M's Plan of Safe Care. Contact with Kayla's post-discharge caregiver was completed, based on Kayla's preferences, and a comprehensive transmission of medical records was underway. The nurse caring for Kayla was able to attend part of the warm handoff meeting to review the discharge checklist and complete all medication reconciliation oversight. Kayla was discharged feeling supported.

## References

1. Agency for Healthcare Research and Quality. Design Guide for Implementing Warm Handoffs. <https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/quality-patient-safety/patient-family-engagement/pfprimarycare/design-guide-warm-handoff.pdf>. Accessed December 19, 2019.
2. Shaked, D. (2014). Strength-based lean six Sigma: building positive and engaging business improvement. New York: Kogan Page; 2013.

### Christina Oldini

MBA, RN, CPHQ

Christina is the Associate Director of Programs at CMQCC and a nurse leader dedicated to process improvement, high quality health care for all, technological innovation and staff growth & development. She has extensive experience in lean improvement, patient relations/experience, Informatics, provider relations and change management. Christina's clinical program background includes Maternal Fetal Medicine, Gynecological Surgery and Obstetrical & Gynecological Ultrasound.

**Mimi Leza**

BSN, RN, PHN, IBCLC

Mimi Leza is the Perinatal Services Coordinator for Ventura County Public Health and currently the co-chair of the Perinatal Substance Use Taskforce of Ventura County. Her background is in Pediatric nursing with extensive experience in caring for NICU babies with NAS and children with prenatal substance use exposure. As a Public Health Nurse, she specialized in providing case management for pregnant and parenting women with SUD and recruiting and training perinatal providers in the SBIRT process.