Does **SBAR** Improve The Quality of Hospital at Night Handover?

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**Introduction**
As an advanced nurse practitioner (ANP) with Hospital Emergency Care Team (HECT) the author receives multiple patient handovers during the hospital at night meet. Handovers were often unstructured, inconsistent and lacking pertinent information which can have a negative impact on patient safety, this was a key driver for this research.

**Background**
Hospital handovers have been highlighted as a major risk to patient safety. The use of a structured SBAR approach has been found to reduce the variability of Handover.

**Aim**
To assess whether introducing a SBAR Handover tool would improve the quality of handover between junior Doctors and the HECT Nurses.

**Methods**
A quasi experimental design was used to compare the quality of handover pre/post implementation of an SBAR template (figure 2), a convenience sample of junior Doctors were recruited. The HECT Nurses used a ten item questionnaire to score the quality of handover pre/post intervention. A numerical value of 1 was assigned to each yes response and a 0 to a no response whereby the higher the score the better the quality handover. The study was conducted between January and March 2017.

**Results**
As shown in figure 1 the introduction of a SBAR handover template significantly increased the quality of handover with a mean score of (3, n=27) and post (6, n=25) with a p value <0.001.

**Discussion**
This study supports previous research that has indicated that SBAR improves the quality of handover. Limitations pertain to the use of a two sample t test, small sample size, single site study and a threat to internal validity as members of the team were data collectors.

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