Eighty percent of serious medical errors involve miscommunication during patient handoffs. The AMA provides training for physicians to avoid those missteps.

Patient handoffs occur at hospitals at all hours of the day and for a variety of reasons, from shift to shift or from one department to another. Handoffs are taking on even greater importance as COVID-19’s surge of patients require emergency care, hospitalization and intensive care strains physicians and care teams.

Communication is at the heart of the handoff, and communication breakdowns are the root cause of most adverse events. In fact, 80% of serious medical errors involve miscommunication during patient handoffs. The AMA has an online module for medical residents and physicians to help prevent those errors as well as offer advice and handoff best practices so patients continue to receive quality care.

“Patient Handoffs” is one of more than 30 online courses available to medical and surgical residents at residency institutions that have subscribed to the AMA GME Competency Education Program.

Among the program’s experts are several who contributed to the AMA’s Health Systems Science textbook, which draws insights from faculty at medical schools that are part of the Association’s Accelerating Change in Medical Education consortium.

Modules cover five of the six topics—patient care, practice-based learning and improvement, interpersonal and communication skills, professionalism, and system-based practice—within the Accreditation Council for Graduate Medical Education’s core competency requirements. The sixth requirement, medical knowledge, is one that is typically addressed during clinical education.
How to avoid communication missteps

The main reason for the communication miscues is that, too often, time cannot always be set aside for structured, in-depth handoffs. Instead, the workflow and situation end up determining how long physicians or medical residents have for a handoff.

When that happens, information is not properly relayed, there is uncertainty about the transfer of responsibility, or there can end up being incorrect patient prioritization.

Consistency is the best way to prevent miscommunication, and the ISBARQ protocol is an attempt to help create that consistency, no matter how much time there is for a handoff.

ISBARQ stands for:

- Introduction
- Situation
- Background
- Assessment
- Recommendation
- Questions

Implementing the ISBARQ protocol should improve communications between team members and ensure patient care does not suffer during any handoff exchange.

Visit the AMA GME Competency Education Program for more information on this and other offerings or to request a demo.