## "I PASS THE BATON"

## Tools for FD Handoffs

"I PASS THE BATON": A Tool for Care Handoffs TeamSTEPPS®, developed by the Agency for Healthcare Research and Quality (AHRQ) and the U.S. Department of Defense, offers a structured tool for care handoffs between care team members. This tool can be used for more effective care handoffs between emergency and primary care physicians.

1	Introduction	Introduce yourself and your role/job (include patient).
P	Patient	Name, identifiers, age, sex, location.
A	Assessment	Present chief complaint, vital signs, symptoms and diagnosis.
S	Situation	Current status/circumstances, including code status, level of (un)certainty, recent changes and response to treatment.
S	Safety	Critical lab values/reports, socioeconomic factors, allergies and alerts (falls, isolation, etc.).

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Background	Comorbidities, previous episodes, current medications and family history.
Actions	Explain what actions were taken or are required. Provide rationale.
Timing	Level of urgency and explicit timing and prioritization of actions.
Ownership	Identify who is responsible (person/team), including patient/family members.
Next	What will happen next? Anticipated changes? What is the plan? Are there contingency plans?
	Actions Timing Ownership

## TIPS for Patient Education in the Emergency Department



When the emergency physician can't connect with the primary care physician, the patient will need to take the lead in home care and communication with their doctor. Below are some tips to improve patient education in the emergency department to increase the chances of a successful handoff.

- Good education starts with what people already know. Ask the patient what they know and understand about their condition.
- Ask the patient to tell you how they will describe the problem to their doctor. Offer any additions or corrections. This is a form of the "teach-back" method, a proven method for patient education.
- When possible, use everyday language to explain the problem and treatment. When it's necessary to use medical terms, define them clearly.
- Ask the patient to tell you what they will do for home care, or what their next steps will be. If the patient needs medication, ask the patient to tell you when and where they will take it. Patients increase their chances of taking the medication correctly when they visualize it happening in the context of their lives.
- Tell the patient what signs or symptoms to look for and when it's time to call the doctor. Use teach-back to make sure the patient understands—ask the patient to tell you what to watch for and what to do in these cases. Make corrections as needed without shaming the patient for getting it wrong. Do this with normalizing statements like, "Don't worry, lots of people miss this part."