Ticket to Ride, Managing Hand-Off Communications
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Problem:
Patients are transported from one area to another, frequently by a transporter with minimal medical education. Important patient information is not communicated to the right people, or not communicated at all.

Evidence:
The #2 Joint Commission safety goal for 2009 is to improve the effectiveness of communication among care givers, including managing hand-off communication.

Strategy:
Input from all nursing areas was collected to determine the most critical information that needed to be passed on during a patient hand-off. A Ticket-to-Ride form was designed to pull information from the admission database and current charting. This ticket must be presented by the transporter to the home unit and used during the transport, then used to transport the patient back to his/her home unit.

Practice Change:
The Ticket-to-Ride is utilized by any transportation personnel when transporting a patient. The Ticket-to-Ride allows the transporter and receiver to have immediate access to critical patient information. The Ticket-to-Ride also allows the transporter to document the use of oxygen during the transport.

Evaluation:
Immediate feedback from the transportation staff was very positive. The staff receiving the patient also felt the information at their fingertips was very useful.

Results:
The transporters embraced this change with open arms. It enabled all staff to have critical information on one piece of paper, without having to search thru the entire chart.

Recommendations:
This communication affects many areas of the hospital. Due to this fact, all departments need to have input into the critical information that is included on the transport form. Information technology also is critical when using an electronic form. Early inclusion of a support person helps to make the change process easier.

Lessons Learned:
Implementing a change hospital wide takes a lot of coordination, communication, and education. Be open to make changes to the process even after implementation has started.
Bibliography:
