
Integrated Telehandover Project

Initiative Type

Model of Care

Status

Sustained

Added

05 February 2019

Last updated

28 September 2021

URL

<https://clinicaexcellence.qld.gov.au/improvement-exchange/integrated-telehandover-project>

Summary

The Integrated Telehandover Project commenced at The Townsville Hospital in October 2017 and has concluded 30th June 2018. It was anticipated that a video-conferenced inter-facility clinical handover could provide safer, higher quality clinical handovers for inter-hospital transfers. The project operated through six phases; defining, mapping, planning, implementation, control and closure. 22 Telehandover occasions of service were recorded. Nine occurred within the THHS, 11 occurred inter-

health service, one interstate and one international. TEMSU were involved with 14 out of the 22 occasions of service. All six project objectives were accomplished. Telehandover supported person centred care, provided a higher quality clinical handover, assisted patient transfer and enhanced inter-facility communications. Telehandover supported the increase of Telehealth inpatient activity and utilised current Telehealth resources. Telehandover was also integrated into pre-existing patient flow pathways.

Key dates

Oct 2017

Jun 2018

Implementation sites

Townsville Hospital and Health Service

Partnerships

Telehealth Support Unit, TEMSU

Key Contacts

Matt Page

6008

[Anonymous](#)

Principal Project Officer

Healthcare Improvement Unit

(07 3328 9190

telehealth@health.qld.gov.au

Aim

- It was anticipated that a video-conferenced inter-facility clinical handover could provide safer, higher quality clinical handovers for inter-hospital transfers.
- Enhance person centred care, supporting inter-hospital patient transfer processes.
- Provide clear, concise clinical handovers that occur in a timely manner.
- Support early patient transfer, and the reduction of patient length of stay.
- Enhance clinical handover service, through supporting inter-facility communications and the maximization of available resources.
- Utilise Telehealth equipment and support the increase of Telehealth inpatient activity.
- Integrate Telehandover into pre-existing inter-hospital transfer processes, following current policies and procedures.

Benefits

- Safer, higher quality clinical handovers; with improved handover accuracy.
- Safer, sustainable discharge planning; through collaborative care.
- Higher quality inter-facility communications; through real time conversation.

Background

The project was expected to develop a holistic model that enhances service delivery for interhospital transfers. To achieve this, the facilitation process needed to be integrated, unsophisticated, versatile and sustainable; as well as abide with pre-existing patient flow processes and with NSQHS, Standard Six – Clinical Handover.

Solutions Implemented

Telehandover supported person centred care, provided a higher quality clinical handover, assisted patient transfer and enhanced inter-facility communications. Telehandover supported the increase of Telehealth inpatient activity and utilised current Telehealth resources. Telehandover was also

integrated into pre-existing patient flow pathways.

PDF saved 31/01/2025