

**Sign-Out Improvement Project:
A Needs Assessment of the Sign-Out Process at Fletcher Allen Health Care**

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Abstract

Duty hour restrictions for residents have resulted in increased sign-outs, the transfer of patient treatment information and responsibility from one physician to a cross-covering physician, leading to a discontinuity in patient care. The American College of Graduate Medical Education (ACGME) and Fletcher Allen Healthcare (FAHC) aim to ensure residents are competent in the sign-out process. This project is a needs assessment that seeks to create a knowledge foundation required to implement improvements and aid in the development of a sign-out curriculum at FAHC in internal medicine, surgery, obstetrics and gynecology, family medicine, neurology, pediatrics, and psychiatry departments. From July to October 2013, all residents and attendings from the 7 departments were targeted for evaluation using an online anonymous survey. It assessed resident and attending opinions on the current written and verbal sign-out processes. Narrative comments were analyzed qualitatively. We had a 42.3% (66/156) resident response rate and 26.8% (68/253) attending response rate. The written sign-out report was more important for cross-covering physicians as the information it contained was relied upon more heavily. Qualitative comments on the surveys suggested distrust in the written sign-out report because it often contained inaccurate information. Departments that felt the sign-out report was reliable and trustworthy were ones that had more standard written templates. The majority of residents believed that verbal sign-out should be observed and evaluated to some capacity by upper level residents or attendings. Most attendings agreed in the need for sign-out supervision, but also lacked formal education themselves in the process and felt they had a poor sense of evaluative criteria for resident sign-out. Both residents and attendings believed senior residents could provide the same level of supervision as an attending. This suggests that the departments should consider using senior residents as teachers and supervisors for verbal sign-out.