



Policy on Doctors' Handover in Emergency Department

AMRH/EP/POL/001/Vers.01
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Institution Name: Al Masarra Hospital					
Document Title: Policy on Doctors' Handover in Emergency Department					
Approval Process					
	Name	Title/Designation	Institution	Date	Signature
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Policy on Doctors' Handover in Emergency Department

1. Introduction

The Emergency Department at Al Masarra Hospital (AMH) plays a pivotal role in providing the public with access to acute mental health services for conditions which require psychiatric interventions. These may include attempted suicide, substance abuse, depression, psychosis, violence, or other rapid changes in behaviors. Psychiatric Emergency Services (PES) in Al Masarra Hospital provides emergency/urgent walk-in evaluation services 24-hours, 7 days a week with all cases relating to disturbance in mental health are accepted from all over the country. After a systematic triaging of emergency nurses, patients are promptly seen by the psychiatrist. It is significant to develop a structured handover policy towards a smooth transition of patient from emergency department to another unit. Handover refers to the transfer of information from one professional to another during transitions of care.

2. Scope

The doctors' handover policy and procedures are meant for all doctors working in emergency department including, doctors assigned to emergency department, and all on-call duty doctors.

3. Purpose

- 3.1. To establish a uniform care pathway, that will guide doctors on handing over patients' management and care during shift change.
- 3.2. To maintain proper continuity of patient care and completion of any pending work by outgoing team to the incoming team.
- 3.3 To establish a free gap, free discrepancy, team communication between on call teams and treating teams regarding the plans for patient care.

4. Definition

- 4.1. Handover refers to the transfer of information from one professional to another during transitions of care.



4.2. Emergency team comprises doctors working in the emergency department in the morning time.

4.3. On-call team is composed of doctors covering emergency unit outside working hours, during the weakened and public holidays.

5. Policy

5.1 Handing over timing involves two schedules: the 7:45am handover and the 2pm hand over which are also considered as the timings for shift change.

5.2 Any patient who comes to the emergency department from 8 am to 2 pm is under the responsibility of the Emergency team, while those who come from 2 pm (the same day) to the next day until 7:45 am will be under the responsibility of the on-call team.

5.3. The 7:45 am handover will be made from the outgoing on-call team to the incoming emergency team.

5.4. All the on-call doctors – from first to third along with bed manager should be available during hand over.

5.5. The following information must be handed over properly to the emergency team:

5.5.1. Any pending patient and in the emergency for observation or for admission including updates;

5.5.2. Any pending workup that needs to be carried out for the patient;

5.5.3. Any arrangement to be done involving transfer of the patient in and/or out the hospital;

5.5.4. Referral from other tertiary hospital.

5.6. Referred cases from another hospital must be handed over by the third on call who accepted the case should to the emergency doctor the next day or during shift change.

5.4. The 2 pm handover will be facilitated the emergency team to the on call team which comprises the first, the second, and the third on call doctors.

5.5. The following information must be handed over to the on call team: any pending patient in the emergency for evaluation; any pending work-up to carry out for the patient.



6. Responsibility

6.1. All doctors from emergency and on call teams shall adhere to this policy.

7. Document History and Version Control Table

Document History and Version Control			
Version	Description of amendment	Author	Review date
01	Initial release	Dr. Salim Al Huseini	December 2025
02			
Written by	Reviewed by		Approved by
Dr. Salim Al Huseini	Dr. Saida Al Balushi Dr. Mamduh Shihati		Dr. Badar Al Habsi Executive Director

8. Related Documents.

- 8.1 Appendix 1. Audit Tool
- 8.2 Appendix 2. Document Request Form
- 8.3 Appendix 3. Document Validation Checklist.

9. References

Title of book/journal /Articles/website	Author	Year of Publication
Communication in Clinical Handover: Improving the Safety and Quality of the Patient Experience. <i>Journal of public health research</i> , 4(3), 666. https://doi.org/10.4081/jphr.2015.666	Eggins, S.; Slade, D.	2015



10. Appendices.

Appendix1.Audit Tool

S.no	Audit process	Description of Criteria	Yes	Partial	No	N/A	Comments
1	Interview	Are the doctors from emergency team and on call teams are aware about handover policy					
	Observation Interview	Is the handover taken place at the end of each shift?					
2	Observation interview	Is the handover given face to face?					
	Observation Interview	Are the doctors involved following the steps for the handover?					
3	Observation Interview	Are the doctors involved documented the handed over information accordingly in Al-Shifa System?					



Appendix 2.Document Request Form

Document Request Form			
Section A: Completed by Document Request			
1. Requester Details			
Name	Dr. Salim Al Huseini	Date of Request	November 2022
Institute	Al Masarra Hospital	Mobile	
Department	Emergency Psychiatry	Email	salimalhuseini@gmail.com
The Purpose of Request: <input checked="" type="checkbox"/> Develop New Document <input type="checkbox"/> Modification of Request <input type="checkbox"/> Canceling of Document			
2. Document Information:			
Document Title	Policy on Doctors' Handover in Emergency Department		
Document Code	AMRH/EP/POL/001/Vers.01		
Section B: Completed by Document Controller			
<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Cancelled <input type="checkbox"/> Forward To:			
Comment and Recommendation: <i>to proceed with the document</i>			
Name	Kunooz Al Balushi	Date	November, 2022
Signature	<i>[Handwritten Signature]</i>	Stamp	





Appendix 3. Validation Checklist

Document Validation Checklist					
Document Title: Policy on Doctors' Handover in Emergency Department			Document Code: AMRH/EP/POL/001/Vers.01		
No	Criteria	Meets the Criteria			Comments
		Yes	No	N/A	
1.	Approved format used				
1.1	Clear title – Clear Applicability	✓			
1.2	Index number stated	✓			
1.3	Header/ Footer complete	✓			
1.4	Accurate page numbering	✓			
1.5	Involved departments contributed	✓			
1.6	Involved personnel signature /approval	✓			
1.7	Clear Stamp	✓			
2.	Document Content				
2.1	Clear purpose and scope	✓			
2.2	Clear definitions	✓			
2.3	Clear policy statements (if any)			✓	
3.	Well defined procedures and steps				
3.1	Procedures in orderly manner			✓	
3.2	Procedure define personnel to carry out step			✓	
3.3	Procedures define the use of relevant forms			✓	
3.4	Procedures to define flowchart			✓	
3.5	Responsibilities are clearly defined	✓			
3.6	Necessary forms and equipment are listed				
3.7	Forms are numbered				
3.8	References are clearly stated	✓			
4.	General Criteria				
4.1	Policy is adherent to MOH rules and regulations	✓			
4.2	Policy within hospital/department scope	✓			
4.3	Relevant policies are reviewed			✓	
4.4	Items numbering is well outlined	✓			
4.5	Used of approved font type and size	✓			
4.6	Language is clear, understood and well structured	✓			
Recommendations		For implementation		More revision	
Reviewed by: Kunooz Al Balushi <i>Kunooz</i>			Reviewed by: Maria Claudia Fajardo- Bala <i>Maria</i>		

