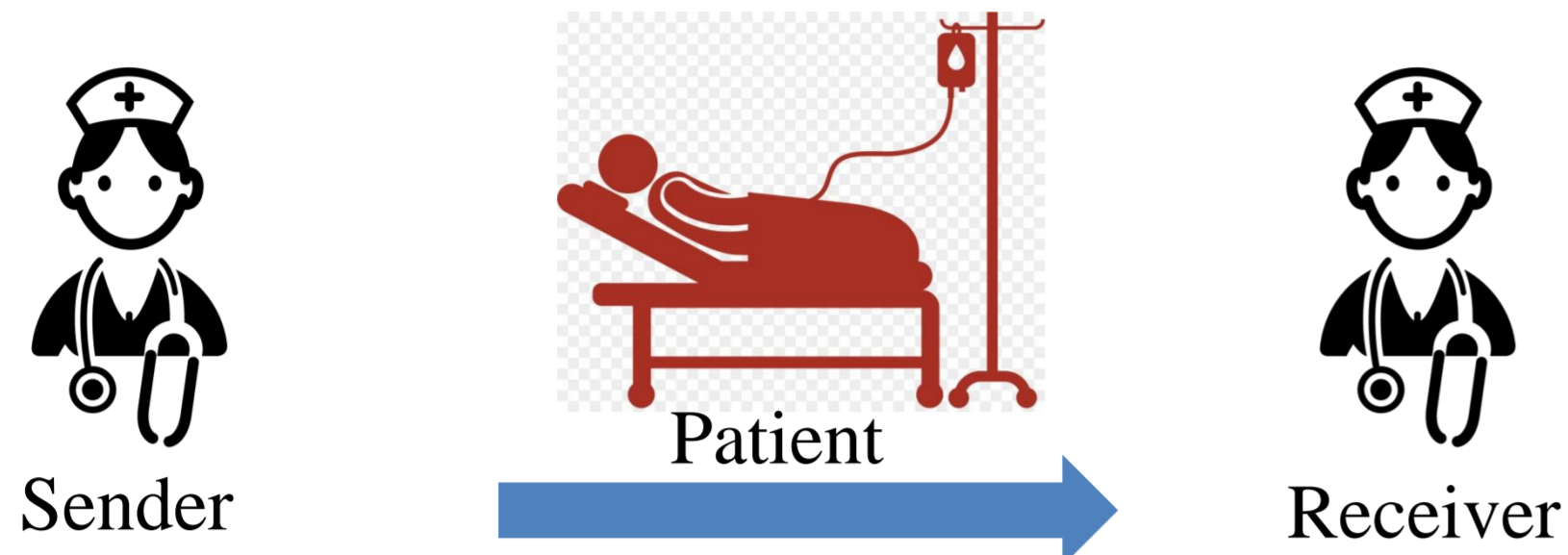


Cross-cultural comparisons of nursing staff perceptions about patient handoff safety and quality between China and Japan

Xiuzhu GU and Kenji ITOH
Tokyo Institute of Technology
Email: xiuzhu.g.aa@m.titech.ac.jp

Introduction

Patient handoff is



The transfer of professional **responsibility and accountability** for some or all aspects of care for a patient or groups of patients to another person or professional group on a temporary or permanent basis (BMA, 2005).

Focus on inter-unit and shift nursing handoff

Objectives:

- To explore differences between China and Japan
- (1) Handoff underlying conditions; and
- (2) Information sufficiency in various handoff situations

Methods

Questionnaire survey

Section 1 Underlying conditions related to quality and safety
Inter-unit handoff (24 items)
Shift handoff (6 items)

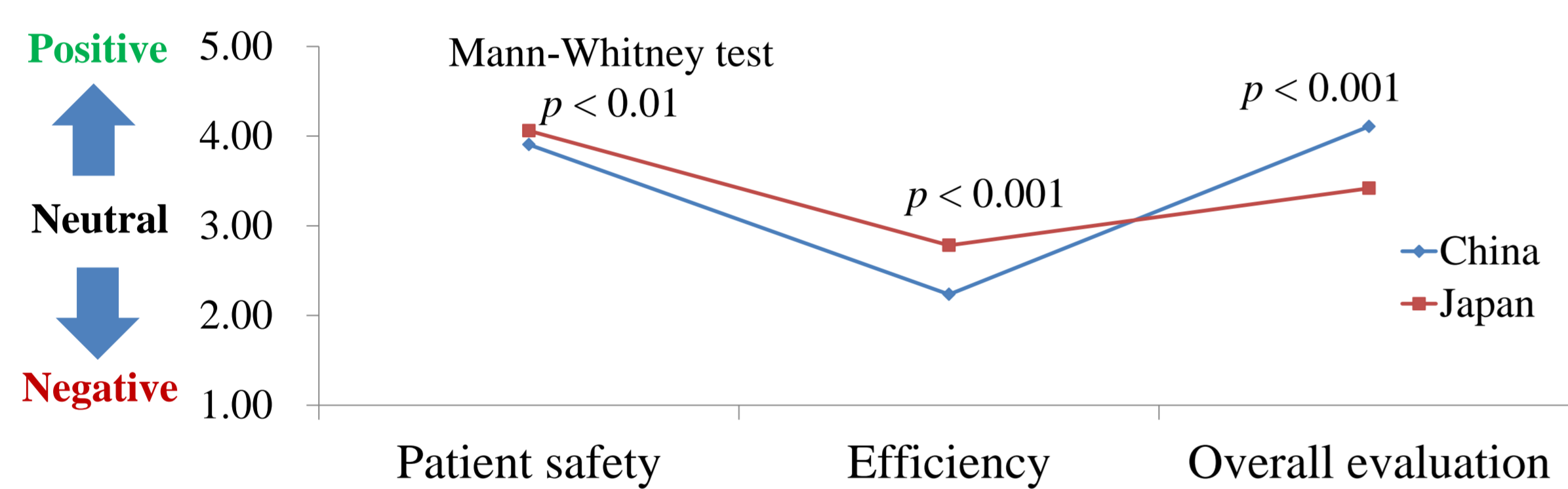
Section 2 Frequency of insufficient information (11 cases)

Samples collected

Country	Survey period	Valid responses	Response rate
China	Dec 2016 ~ Mar 2017	211	Online survey
Japan	Oct 2017 ~ Dec 2017	5,117	69%

Results (1): Overview & Factor Structure

Inter-unit handoff – overview

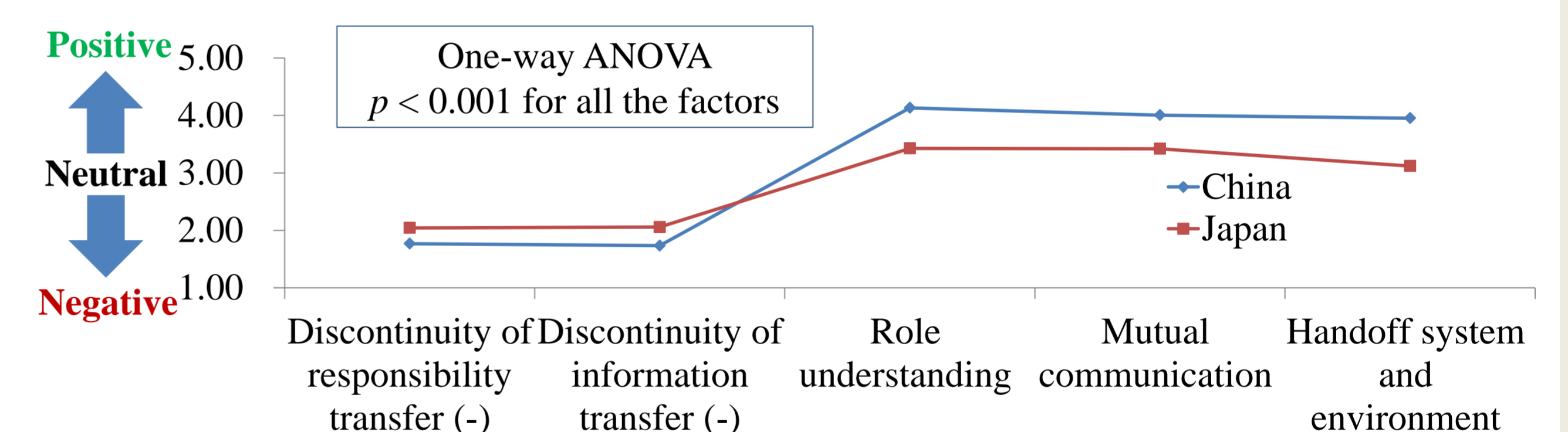


Inter-unit handoff – 5-factor structure

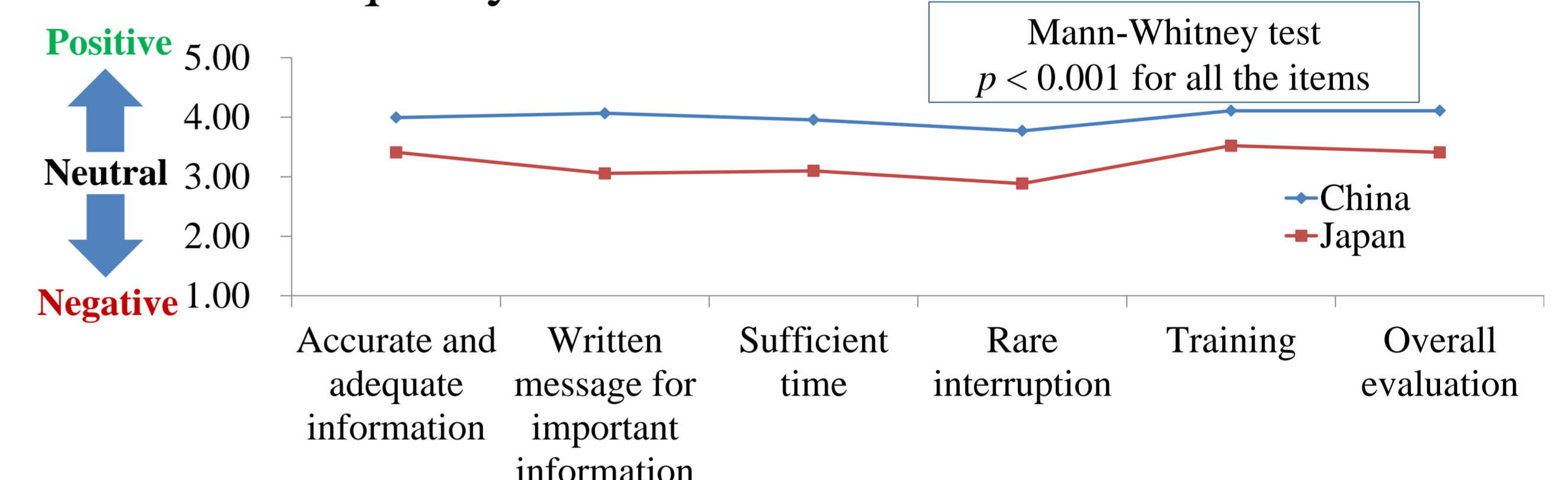
Factor	By using Chinese sample	By using Japanese sample
1. Discontinuity of responsibility transfer	Principal component analysis 44% cumulative variance	Confirmative factor analysis $\chi^2 = 2541.156$; $p < 0.001$ CFI = 0.845; RMSEA = 0.057
2. Discontinuity of information transfer		
3. Role understanding		
4. Mutual communication		
5. Handoff system & environment		

Results (2): Cross-cultural Comparisons

Inter-unit handoff factors

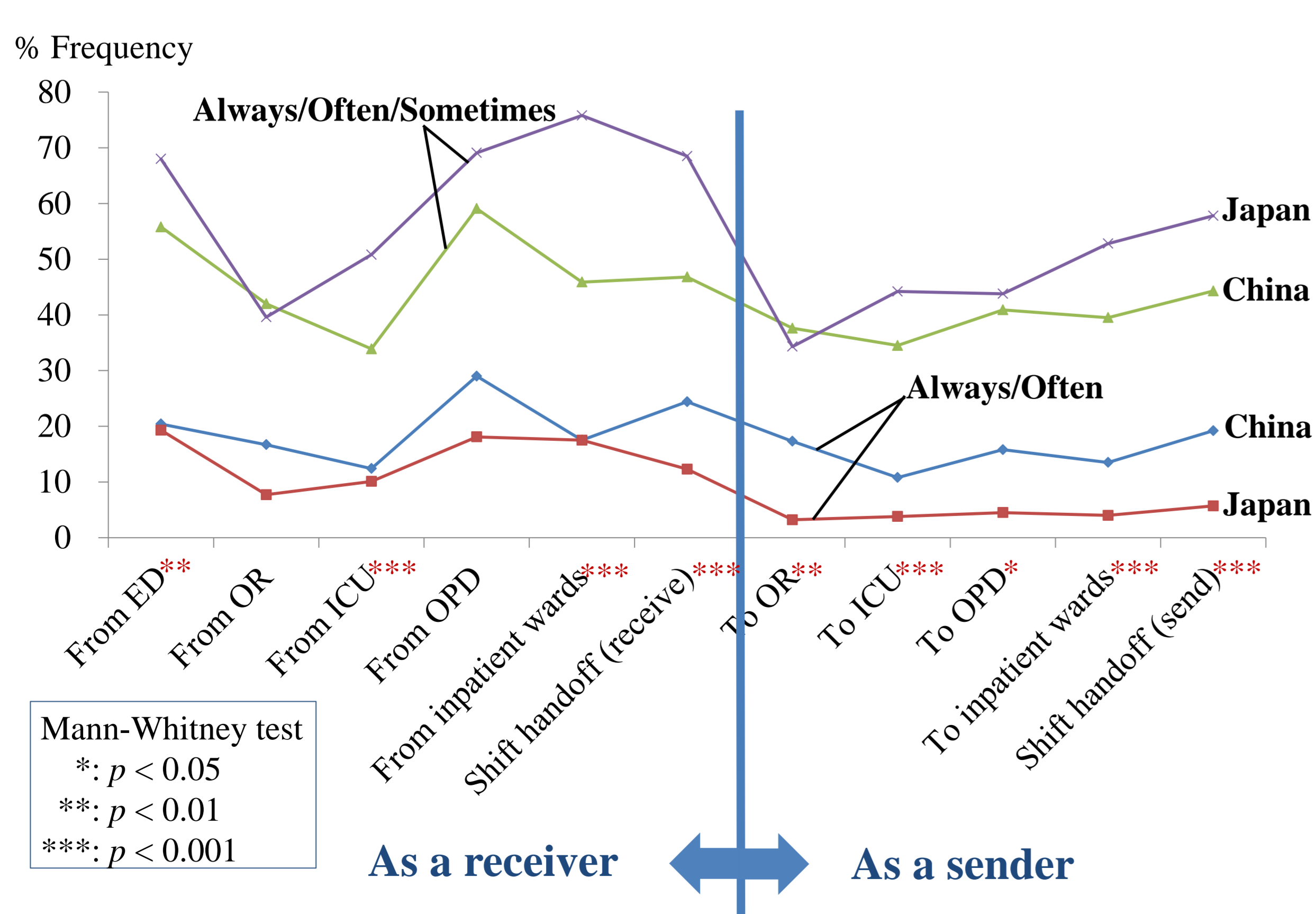


Shift handoff quality



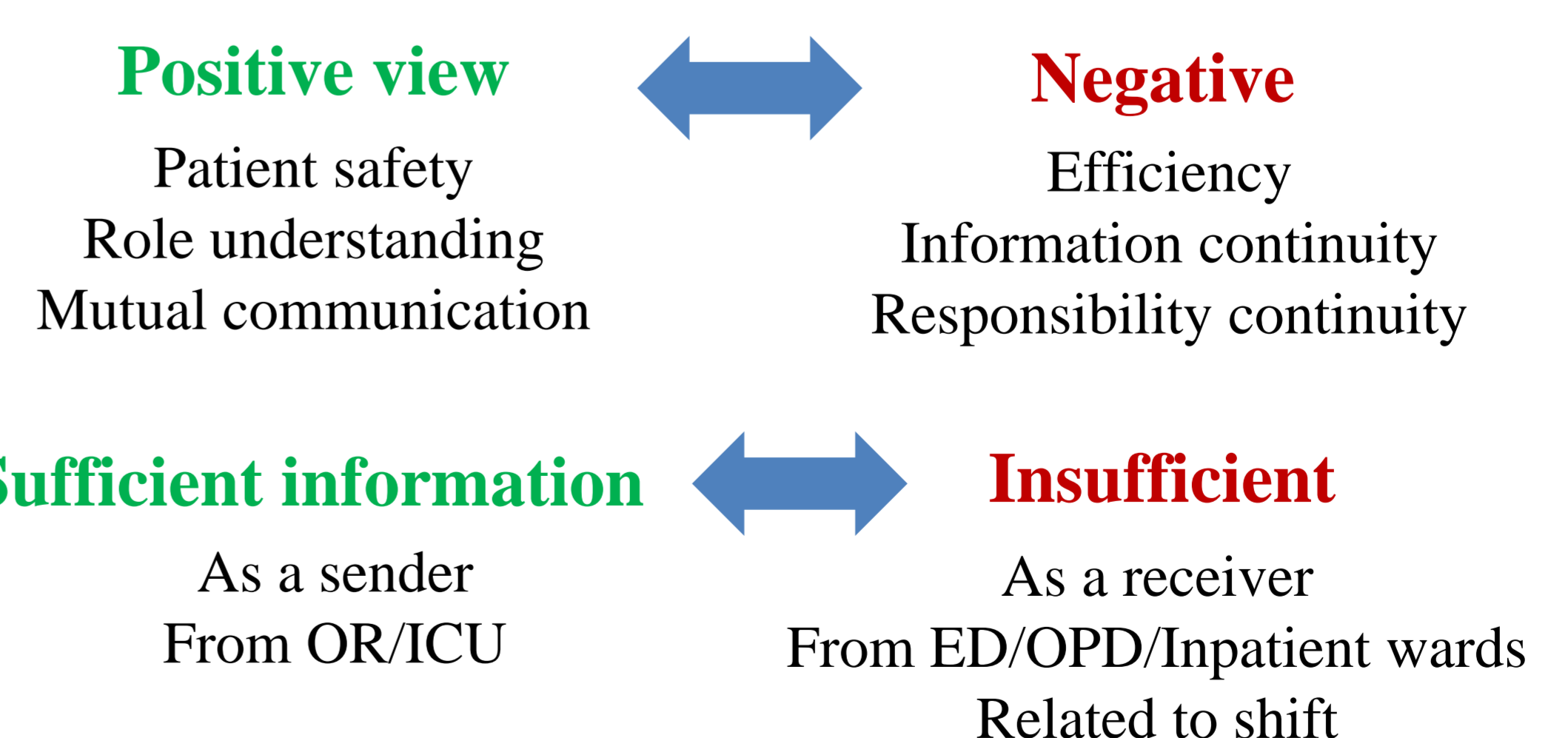
Results (3): Frequency of Insufficient Transfer

% of transfers with insufficient information



Conclusions

Similarities of two countries



Differences

- Chinese nurses **more positive than** Japanese
- Other than** Patient safety
- Efficiency
- Insufficient information transfer (often/always)