

Appendix 1: List of questions send to participants in each round

Title: Reaching consensus on the definition of person-centred handover practices in the emergency department: A modified Delphi

Each participant completed the questionnaire via an google form link which was send via email to each participant by the researcher.

Round 1:

Please insert your email: _____

General information:

Thank you for your willingness to participate in the study. This is the first phase of a study which aims to develop clinical practice guidelines for person-centred handover practices between emergency care practitioners and healthcare professionals in the emergency department (ED). The aim of this phase is to develop a definition for the concept "*person-centred handover practices*".

The questionnaire is divided into two sections:

- Defining attributes
- Concept definition

You will be required to share your experience and expertise on person-centred care and handover practices in the emergency department.

Section 1: Defining Attributes

Section 1 refers to the defining attributes (the characteristics most frequently associated with the concept) and the formed definition of person-centred handover practices.

The following attributes were identified during a literature review on person-centred handover practices: *structure, verbal and written information transfer, interprofessional process, inclusion of the patient and/ or family, occurs at the bedside, without interruptions.*

Answer **ALL** the questions. Indicate on a scale of 1 – 4 (Strongly disagree – Strongly agree) your agreement with each attribute.

2.1 Attribute 1: Structure

Following a specific structure will ensure the transfer of all relevant information such as problems identified, procedures performed, treatment administered and vital signs.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Structure

2.2 Attribute 2: verbal and written information transfer

Handover practices should occur verbally followed by a written document. Written documents can be referred to once emergency care practitioners have left and to prevent information loss. Conducting handovers verbally ensures first-hand information is received upon arrival from emergency care practitioners and requires attentive listening from healthcare professionals to prevent information loss.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Information transfer

2.3 Attribute 3: Interprofessional process

The handover process is an interprofessional process involving at least two different professional groups. Different professionals and organizational cultures meet during handover and may not share the same values, language, and hierarchies. A team of healthcare professionals (doctors and nurses) who will be responsible for the patient's care should be involved in the handover from the start, to decrease repetition of the handover and potential information loss.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Interprofessional process

2.4 Attribute 4: Inclusion of the patient and/ or family

Handover at the bedside gives the patient the opportunity to be part of their care delivery, state their complaints to guide the planning of their care, and be part of decision-making facilitating person-centred care.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Inclusion of patient and/or family

2.5 Attribute 5: Occurs at the bedside

Handover practices must occur at the patient's bedside to reduce interruptions, reduce noise levels, and provide an opportunity for healthcare professionals to listen attentively.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Occurs at the bedside

2.6 Attribute 6: Without interruptions

Interruptions place handover practices at risk of information loss that negatively impacts patient care delivery. Therefore handovers should occur without any interruptions.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Without interruptions

Section 2: Concept definition

This concept analysis produced the following theoretical definition of the concept person-centred handover practices: *person-centred handover practices are those handovers being performed while including all identified defining attributes such as structure, verbal, and written information transfer, interprofessional process, inclusion of the patient and/ or family, occurs at the bedside, without interruption.*

2.1 On a scale of 1 – 4 rate your level of agreement with the definition developed to define person centred handover practices between emergency care practitioners and healthcare professionals in the ED.

4 - Strongly agree

3 - Agree

2 – Disagree

1– Strongly disagree

2.2 Please provide a reason for your answer for your level of agreement with the definition

2.3 Do you have any additional input?

Thank you for your participation

Round 2

Please insert your email: _____

General information:

Thank you for your willingness to participate in the study and for completing Round 1. After reviewing the feedback received in Round 1, each attribute and the concept definition was adapted. The aim of this round is to reach consensus on the attributes and concept definition of “*person-centred handover practices in the ED.*”

The questionnaire is divided into two sections:

- Defining attributes
- Concept definition

You will be required to share your experience and expertise on person-centred care and handover practices in the emergency department.

Section 1: Defining Attributes

Section 1 refers to the defining attributes (the characteristics most frequently associated with the concept) and the formed definition of person-centred handover practices.

The following attributes were identified during a literature review on person-centred handover practices and further re-defined after one round of expert review and comments to reach consensus: *structured approach, verbal and written information sharing, person-centred interprofessional activities, inclusion of the patient and/ or significant other, the dedicated space, person-centred handover culture.*

Answer **ALL** the questions. Indicate on a scale of 1 – 4 (Strongly disagree – Strongly agree) your agreement with each attribute.

2.1 Attribute 1: Structured approach

Following a context specific structure focusing on patient specific problems and needs will ensure the transfer of all relevant information.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Structured approach.

2.2 Attribute 2: verbal and written information sharing

Handover practices involves the sharing of verbal and written information.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: verbal and written information sharing.

2.3 Attribute 3: person-centred interprofessional activities

The handover process is an interprofessional activity involving different professional groups, underpinned by person-centred principles that will ultimately affect patient care. Ideally the healthcare team (doctor and nurse) who will be responsible for the patient's care should be involved in the handover from the start, to decrease repetition of the handover and potential information loss.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: person-centred interprofessional activities.

2.4 Attribute 4: inclusion of the patient and/ or significant other

Handover practices should be flexible and include the patient's participation. Following the handover from the emergency care practitioner, if possible, the patient's preference to include their significant other should be allowed. This will provide the patient and/ or significant other the opportunity to be part of the decision-making process.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: inclusion of the patient and/ or significant other.

2.5 Attribute 5: the dedicated space

Handover practices should occur in a dedicated space where there is minimal interruptions and noise to provide an opportunity for healthcare professionals to listen attentively.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: the dedicated space.

2.6 Attribute 6: person-centred handover culture

A dedicated healthcare professional should actively participate and facilitate the handover process towards nurturing person-centred handover culture.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: person-centred handover culture.

Section 2: Concept definition

This concept analysis produced the following theoretical definition of the concept person-centred handover practices: *Person-centred handover practices are the interprofessional sharing of structured verbal and written information that happens in a dedicated space without interruptions allowing the patient and/or significant other to participate.*

3.1 On a scale of 1 – 4 rate your level of agreement with the definition developed to define person centred handover practices between emergency care practitioners and healthcare professionals in the ED.

- 4 - Strongly agree
- 3 - Agree
- 2 – Disagree
- 1– Strongly disagree

3.2 Please provide a reason for your answer for your level of agreement with the definition

3.3 Do you have any additional input?

Thank you for your participation

Round 3

Please insert your email: _____

General information:

Thank you for your willingness to participate in the study and for completing Round 1. After reviewing the feedback received in Round 2, each attribute and the concept definition was adapted. The aim of this round is to reach final consensus on the attributes and concept definition of “*person-centred handover practices in the ED.*”

The questionnaire is divided into two sections:

- Defining attributes
- Concept definition

You will be required to share your experience and expertise on person-centred care and handover practices in the emergency department.

Section 1: Defining Attributes

Section 1 refers to the defining attributes (the characteristics most frequently associated with the concept) and the formed definition of person-centred handover practices.

The following attributes were identified during a literature review on person-centred handover practices and further re-defined after one round of expert review and comments to reach consensus: *structured approach, verbal and written information sharing, person-centred interprofessional activities, inclusion of the patient and/ or significant other, the dedicated space, person-centred handover culture.*

Answer **ALL** the questions. Indicate on a scale of 1 – 4 (Strongly disagree – Strongly agree) your agreement with each attribute.

2.1 Attribute 1: Context specific approach

Following a context specific approach focusing on patient needs will ensure the transfer of relevant information.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: Context specific approach

2.2 Attribute 2: verbal, non-verbal and written information sharing.

Handover practices involves the sharing of verbal, non-verbal and written information.

4 - Strongly agree

3 - Agree

2 – Disagree

1 – Strongly disagree

Explain your rating of the attribute: verbal, non-verbal and written information sharing.

2.3 Attribute 3: person-centred interprofessional activities

The handover process is an interprofessional activity, underpinned by person-centred principles that will ultimately affect patient care. Ideally the healthcare team who will be responsible for the patient's care should be involved in the handover from the start, to decrease repetition and information loss.

- 4 - Strongly agree
- 3 - Agree
- 2 – Disagree
- 1 – Strongly disagree

Explain your rating of the attribute: person-centred interprofessional activities.

2.4 Attribute 4: inclusion of the patient and/ or significant other

Handover practices should be flexible and encourage patient and their significant other's participation and provide an opportunity for shared decision-making.

- 4 - Strongly agree
- 3 - Agree
- 2 – Disagree
- 1 – Strongly disagree

Explain your rating of the attribute: inclusion of the patient and/ or significant other.

2.5 Attribute 5: dedicated space

Handover practices should occur in a dedicated space around the patient's bedside where there are minimal interruptions which is conducive to effective communication and handover.

- 4 - Strongly agree
- 3 - Agree
- 2 – Disagree
- 1 – Strongly disagree

Explain your rating of the attribute: dedicated space.

2.6 Attribute 6: person-centred handover culture

A dedicated healthcare professional should actively participate and facilitate the handover process towards nurturing a person-centred handover culture.

- 4 - Strongly agree

- 3 - Agree
- 2 – Disagree
- 1 – Strongly disagree

Explain your rating of the attribute: person-centred handover culture.

Section 2: Concept definition

This concept analysis produced the following theoretical definition of the concept person-centred handover practices: *Person-centred handover practices is a context specific approach involving the interprofessional sharing of verbal, non-verbal and written information that happens at the patient's bedside with minimal interruptions and facilitate patients and/or their significant others' active engagement.*

3.1 On a scale of 1 – 4 rate your level of agreement with the definition developed to define person centred handover practices between emergency care practitioners and healthcare professionals in the ED.

- 4 - Strongly agree
- 3 - Agree
- 2 – Disagree
- 1 – Strongly disagree

3.2 Please provide a reason for your answer for your level of agreement with the definition

3.3 Do you have any additional input?

Thank you for your participation