

TABLE OF CONTENTS

COPYRIGHT	i
DECLARATION	ii
DEDICATION	iii
ACKNOWLEDGEMENTS	iv
ABSTRACT	v
CHAPTER ONE - OVERVIEW OF THE RESEARCH STUDY	1
1.1 Introduction	1
1.2 Background to the Study	3
1.3 Problem Statement	6
1.4 Purpose and Objectives of the Study	7
1.5 Researcher's Assumptions	8
1.6 Operational Definitions	10
1.6.1 Emergency Care Units	10
1.6.2 Registered Nurse	11
1.6.3 Specialist Nurse	11
1.6.4 Student Specialist Nurse	12
1.6.5 Handover	12
1.6.6 Private Sector Hospital	12
1.7 Significance of the Study	13
1.8 Overview of the Research Report	13
1.9 Summary	14
CHAPTER TWO - LITERATURE REVIEW	15
2.1 Introduction	15
2.1.1 South African Perspective	15
2.1.2 Factors Influencing the Handover	18

2.1.3	Summary	21
2.2	Verbal, Non- Verbal and Written Communication between Nurses	21
2.3	Experience, Education, Reflection and Decision Making	26
2.4	Patient Safety and Continuity of Care	29
2.5	Summary	32
CHAPTER THREE - RESEARCH METHODOLOGY		33
3.1	Introduction	33
3.2	Research Design	33
3.3	Research Methods	34
3.3.1	Population and Sample	34
3.3.2	Sampling Method	35
3.3.3	The Research Instrument	36
3.3.4	Validity and Reliability of the Instrument	36
3.3.5	Data Collection Procedures	37
3.3.6	The Research Setting	38
3.4	Pilot Study	38
3.5	Ethical Considerations	41
3.6	Summary	42
CHAPTER FOUR - DATA ANALYSIS AND RESULTS		43
4.1	Introduction	43
4.2	Data Analysis	43
4.3	Results	45
4.3.1	Results of Section A – Socio-Demographic Data	45
4.3.1.1	Basic Nursing Education and Qualifications	46
4.3.1.2	Basic Nursing Education of Specialist vs. Non-Specialist RN	47
4.3.1.3	Practical Working Experience in Emergency Care Units	49

4.3.1.4	ER Working Experience – Specialist vs. Non-specialist RN	52
4.3.1.5	Employment Status and Working Capacity of Nurses	53
4.3.2	Results of Section B – Handover Procedure	55
4.3.2.1	Formal Handover Procedure Training of Registered Nurses	55
4.3.2.2	Current Handover Patient Documentation	55
4.3.2.3	Logical Sequence of Current Handover Patient Document	56
4.3.2.4	Contents of Current Handover Patient Documentation	56
4.3.2.5	Understanding the Contents of Current Documentation	57
4.3.2.6	Finding the Information Required for the Handover	57
4.3.2.7	The Primary Handover	58
4.3.2.8	The Primary Handover of Specialist vs. Non-specialist RN	59
4.3.2.9	Repetition of the Handover by Registered Nurses	60
4.3.2.10	To Whom was the Handover Repeated	62
4.3.2.11	Handover Repetition of Specialist vs. Non-specialist Nurses	63
4.3.2.12	Location of Registered Nurses Handover Practices	64
4.3.2.13	Location of Specialist vs. Non-specialist Nurses Handover	65
4.3.2.14	Information Contained in the Handover Procedure	65
4.3.2.15	Additional Information that should be in the Handover	66
4.3.2.16	Itemized Structured Ranking of the Handover Procedure	66
4.3.2.17	Specialist Nurses Itemized Ranking of the Handover	68
4.3.2.18	Experienced Nurses Itemised Ranking of the Handover	69
4.3.2.19	Non-specialist Nurses Itemized Ranking of the Handover	70
4.4	Summary	73
CHAPTER FIVE - DISCUSSION OF RESULTS, CONCLUSIONS, LIMITATIONS AND RECOMMENDATIONS		75
5.1	Introduction	75
5.2	Discussion of Results	75

5.2.1	Demographics, Education and ER Employment Status	75
5.2.2	Handover Training, Documentation and Procedures	83
5.2.3	Content and Structured Ranking of the Handover	92
5.3	Conclusions Drawn	99
5.4	Limitations of the Study	101
5.5	Recommendations	102
5.6	Conclusion	104
	REFERENCES	106
	APPENDICES and ANNEXURES	110
	ANNEXURE A – Instrument Approval Certificate	110
	ANNEXURE B – University Ethics Clearance Certificate	111
	ANNEXURE C – Private Hospital Group Approval Certificate	112
	ANNEXURE D – University Research Title and Approval Certificate	113
	ANNEXURE E – Private Hospital Group Research Request Letter	114
	ANNEXURE F – Research Information Letter - Registered Nurses	115
	ANNEXURE G – Research Questionnaire and Instrument	116
	ANNEXURE H – Handover Acronym Pocket Card and Explanation	122
	ANNEXURE I – Certificate of Proofreading for MSc Thesis	126