Introduction
Clinical handover is an essential practice for transferring our own responsibility and accountability of patient care to ensure patient safety when patient requires transferring to other setting for further management. Poor clinical handover may lead to misdiagnosis of patient and delayed of treatment, it also has the legal implication especially when patient changes of general condition without proper clinical handover. In our extended care setting, when patient requires transferring back to the acute setting for further management of critically-ill condition, time is always limited for doing accurate documentation. Hence, “Inter-hospital transport of critically-ill adult patient record” have been developed since 2008 to facilitate proper documentation. Nonetheless, compliance rate of using this form was only 44.4% in the baseline audit in Sept 2013.

Objectives
The aim of this project is to promote the awareness of nursing staff in the proper documentation hence to maintain the effectiveness of the clinical handover during transferring critically-ill patient to acute hospital.

Methodology
Retrospective documentation audit was commenced in Sept 2013 targeting proper documentation on transferring of critically-ill cases. Ten Medical and Geriatric wards were involved in the audit. Case records of all patients required transferring to PWH/AED escorted by nurse would be included. Monthly audit report would be sent to all the ward managers for their review.

Result
From Oct 2013 to Sept 2014, totally 69 case notes were audited, average compliance rate of using the record form was 77% which showed significant improvement as
compared with the baseline data of 44% in Sept 2013. Compliance rate has reached 100% in March 2014 and Sept 2014, 18% of critical items such as vital signs and mode of respiration were documented on the record form. Nevertheless, Missing data included departure time and notifying family member of patient transfer requires further improvement on the record form. Conclusion: The audit result showed significant improvement on compliance of using of the form. However completeness on documentation on the form should require further reinforcement. Ongoing audit would be continued on every 6 months till full compliance of proper documentation was achieved to ensure effectiveness of the clinical handover when patients require transferring to AED.