Introduction
Clinical handover is an essential process of in-patient care and is crucial to ensure continuity of patient care via effective communication. Serious consequences and poor patient management outcome such as treatment delay can be resulted from any breakdown during the handover process. Traditional paper record is not effective for handover purpose as poor handwriting leads to misinterpretation of treatment, clarification of hand writing is time consuming. Missing of part of the paper record may cause adverse consequence. In the past, utilization of different handover methods, approaches can lead to significant loss of patient information especially in complicated clinical condition resulted in staff frustration. By implementing paperless handover via electronic platform, those potential risks can be eliminated.

Objectives
Firstly, to ensure continuity of care is maintained, patient safety and ongoing optimal patient management is achieved. Secondly, to avoid misinterpretation of treatment due to poor hand writing. Thirdly, to ensure time efficiency communication by avoid using different types of knowledge during handover. Lastly, staff satisfaction can be boosted up due to effective communication among multidiscipline professionals

Methodology
1. A standardized electronic template for clinical handover was designed 2. Training of staff competency on information technology was provided 3. Trial implementation to nursing staff 4. Evaluation by conduction survey within nursing staff was performed 5. Enhancement on the format was done accordingly 6. Full implementation in Coronary Care Unit to all multidiscipline staff was performed in 2014 7. Evaluation on staff satisfaction

Result
The development and utilization of electronic handover system showed positive feedback from nurses. Firstly, improvement in accuracy and completeness of patient information was achieved. Secondly, 70% showed "agree" & 20% showed "strongly agree" that continuity of care was achieved as information could be retrieved even though from the previous admission episode. Thirdly, time efficiency was achieved as tracing record from Medical Record Office was no longer required and the risk of missing part of the paper record was also minimized. 100% the nurses reported that there was no increased time requirement to complete the electronic form and some even reported that the time was less than by hand writing. Fourthly, all of them agreed or strongly agreed that communication among multi-disciplinary professional staff was enhanced by using the same electronic format without clarification of message due to illegible hand writing. Lastly, 60% showed "agree" & 10% showed "strongly agree" that staff satisfaction was enhanced for effective communication among multidiscipline professionals. More appreciation was received from patients and their relatives for receiving high quality of nursing care. As there is a trend of advocating green environment, paperless handover system is definitely addressing this global issue.