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Nurses' Knowledge and Practice Concerning Changing Shift

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Abstract

Objective: to evaluate nurses' knowledge about patients' handoff and to evaluate nurses' practice toward patients' handoff. to find out The relationship between nurses' knowledge and practice toward patients' handoff and for their demographic characteristic of age, gender, level of education, experience and number of training Courses.

Methodology: The descriptive cross-sectional study The design is based on questioning interviewing members of the study population in order to describe the phenomenon being studied in terms of its nature and degree of existence, as well as on observation was carried out at the Fallujah General Teaching Hospital. It started from of 20 of September 2023 to 15 June.the questionnaire items was constructed by the researcher the questionnaire based on extensive review of related previous studies and consists of the following:

First one deals with socio-demographic characteristics include nurses age, gender, level of education, years of experience and number of training. Second one deals with nurses knowledge towards Patient's Handoff which developed by the researchers according to extensive literature and previous studies. Third one with nurses practices towards Patient's Handoff which developed by the researchers according to extensive literature and previous studies

Results: The results demonstrated that of nurses expressed a poor knowledge towards Patient's Handoff The results demonstrated that of nurses expressed inadequate practices towards patient's handoff. The analysis of variance showed that there were no statistically significant differences in knowledge and practices between nurses with respect to their age groups .there were statistically significant differences in knowledge between nurses who are male or female; and no statistically significant differences in practise between nurses who are male or female or female .The analysis of variance showed that there were statistically significant differences in knowledge between nurses who are male or female of variance showed that there were statistically significant differences in knowledge between nurses with respect to their education level Through analysis of variance showed that there were statistically significant difference in knowledge and practices between nurses with respect to their years of experience . Through analysis of variance, it was established that there are statistically significant difference in knowledge and practices among nurses with regard to the number of their training.

Conclusions: There is a The results demonstrated that of nurses expressed a poor knowledge towards Patient's Handoff The results demonstrated that of nurses expressed inadequate practices towards patient's handoff.

Recommendations: Encouraging the establishment of courses and training programs related to the handoff mechanism, and providing educational brochures for nursing workers to improve their knowledge, which leads to improving their performance.

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Introduction

The members of a healthcare team must collaborate well and speak honestly and freely. It is crucial to ensure that this communication enhances patient safety and care quality while enabling the sharing of information amongst healthcare providers (Newman & Ford, 2021). Effective information flow throughout the healthcare system, which is necessary to deliver safe patient care, is one of the top five international priorities for patient safety improvements. Therefore, information must be precise, unique, relevant, and up to date. On the other side, there are a number of barriers to effectively disseminating information, including offering too much or too little information of poor quality, failing to use a checklist, and delaying the nursing hand.off (Pakcheshm, 2018). Due mostly to insufficient information transfer in critical patient care areas, such as the original diagnosis, ongoing therapy, and drug prescriptions, incomplete handoff increases the frequency of adverse outcomes. Additionally, a poor handoff may result in the wrong course of action, a delay in diagnosis and treatment, adverse effects, and higher treatment expenses (Vermeir et al., 2015). Patient injuries have increased in recent years as a result of improper nursing handoff, and communication problems between caregivers during the transfer of patient information account for 80% of serious health care errors. Additionally, 15% of people have experienced this problem's negative effects (Spooner et al., 201). Patients and nurses must deal with more complicated handover procedures when diverse health providers with varying levels of education and specialties are involved ,Ineffective patient handovers can result in care interruptions, drug dosage errors, procedures performed on the incorrect side of the body, and patient deaths (Dúason et al., 2021).

Methodology

1. Design of the Study:

The descriptive cross-sectional study design was used. The study was conducted for a period of 20 of September 2023 to 15 June.

2. Setting of The Study:

The study was conducted in the city of Fallujah, Anbar, Iraq, in the Fallujah General Teaching Hospital

3. Sample of the Study:

A non-probability (purposive) sample of (100) nurses Participants from the study population were graduates of all levels of education, bachelor's degree, higher diploma and nursing schools.

4. Study Instruments :

the questionnaire items were constructed by the researcher the questionnaire based on extensive review of related previous studies and consists of the following:

First one deals with socio-demographic characteristics include nurses age, gender, education level, years of experience and number of training.

Second one deals with nurse's knowledge towards Patient's Handoff which developed by the researchers according to extensive literature and previous studies. A total of (20) items of knowledge measured on 2-level type of Likert Scale (1= False & 2=True).

Accordingly, points can be taken range from 20-40. The higher average defined as good knowledge.

Third one with nurse's practices towards Patient's Handoff which developed by the researchers according to extensive literature and previous studies. A total of (20) items of practices measured on 3-level type of Likert Scale (1= Never, 2=Sometime & 3=Always). Three correct practices out of 3 observations were rated as always and scored (3). Out of 2-1 correct practice out of 3 observations were rated as sometimes and scored (2). No correct practice out of 3 observations was rated as never and scored (1). Accordingly, points can be taken range from 20-60. The higher average defined as adequate practices.

The researcher adhered to the rules of writing the questionnaire due to the importance of the type of information that the researcher is keen to be sufficient and comprehensive for all aspects of the problem and to be reliable and reliable. Vague and complex questions were avoided. The type of questions were of the closed type requiring an answer with reference to what is relevant.

5. Reliability of the Questionnaire:

It was performed on 10% of the study samples with a total of 10 nurses. A researcher meets the participants, introduces them here and then asks them to participate in the conduct of this study by giving their opinion on their knowledge on individual bases and practices (3 observation). Then the researcher explained to them the purpose and title of the research and asked them to fill out the study questionnaire through interview to confirm simplicity and understanding and to estimate the time required to fill out the study tool.

The researcher stays with the participants until they have finished the interview. The estimated time to fill out each form was approximately 15-20 minutes. The data obtained from the pilot study were analysed and no adjustments were made so the pilot study was excluded from the original sample. The Cronbach α value ranged from 0.70 and higher, which indicating a high degree of reliability.

6. Ethical Consideration:

The researcher distributed an informed consent sheet to all nurses in order to obtain their permission to participate in the study. The study protocol was reviewed and approved by the Ethics Committee of Baghdad University of collage of nursing, university of Bagdad, Consisting of socio-demographiccharacteristics, nurses knowledge towards patient's handoff and practices towards patient's handoff

Inclusion Criteria

- a. females Males and Males nurses.
- b. Nurses with all level of educations.
- c. Nurses who works in the morning and evening shifts.
- d. Nurses who accept to participate.

Exclusion Criteria Nursing staff who refuse to participate in the study

7. Data collection:

The actual data collection took about two months from 1 February 2023 to 1 April 2023. The questionnaire has been interviewed with study participants. After obtaining the approval of the Anbar Health Directorate and verifying the validity and reliability of the questionnaire.

The researcher interviewee the participants (Nurses), explained the instructions, answered their questions regarding the form, urged them to participate and thanked them for the cooperation. The interview techniques was used on individual bases, and each interview

(15-20) minutes after taking the important steps that must be included in the study design and include the following:

Determining the data that will be collected through the questionnaire according to the study questions.

Determining the method and format of the questionnaire.

Determining the type of criterion that determines the type of answer in the questionnaire.

Presenting the questionnaire to the supervising to express his opinion and observations in developing the questionnaire and modifying it based on his observations.

Presenting the questionnaire to a number of panel of experts to express their opinion and observations in developing the questionnaire and modifying it based on what they submitted.

Conducting a reliability test on it by distributing the questionnaire to a sample of 10 nurses for pilot study.

Writing the questionnaire in its final form, then printing, reviewing and usage it for data collection.

Statistical Analysis

In order to statistically analyze the data collected from the study sample to arrive at the results, the researcher used the SPSS-20 and Microsoft Excel (2010) program to analyze this data and deal with it statistically, to find the relationships between the variables, and obtain the final results of the research based on a set of statistical tests.

Results:

SDVs	Classification	No.	%			
	20-24 years	44	44.0			
	25-29 years	32	32.0			
	30-34 years	6	6.0			
	35-40 years	4	4.0			
Age	40-45 years	12	12.0			
	>45 years	2	2.0			
	Total	100	100.0			
	27.36 ± 6.80					
	Male	42	42.0			
Gender	Female	58	58.0			
	Total	100	100.0			
	School nursing	20	20.0			
	Diploma nursing	67	67.0			
Education level	B.Sc nursing	13	13.0			
	Total	100	100.0			
Years of experience	Less than 5 years	61	61.0			

Table 1: Socio-Demographic Characteristics of Study Sample

	5-10 years	23	23.0
	>10 years	16	16.0
	Total	100	100.0
	Not once	68	68.0
	Once	19	19.0
Number of training	More than once	13	13.0
	Total	100	100.0

Table (1.) The results show the characteristics of the participants; the average age is 27.36 (\pm 6.80) years among the age group 20-24 years was the highest recorded (44%). Regarding gender, more than half of the participants were female nurses (58%). Respect to the education level, most of participants were diploma graduated. In regards with years of experience, among those, the less than 5 years were predominated (51%). Training courses related findings, the majority of participants were not trained (68%).

Table 2: Distribution of Nurses' Practices toward Patient's Handoff:

List	Practices Items	Responses	No.	%	M.s	Ass.
		Never	55	55.0		
1	The nurse introduces himself to the patient	Sometime	3	3.0	1.87	Moderate
		Always	42	42.0		
		Never	75	75.0		
2	Determine where he works	Sometime	10	10.0	1.40	Poor
		Always	15	15.0		
			56	56.0		
3	Mention the patient's full name	Sometime	14	14.0	1.74	Moderate
		Always	30	30.0		
		Never	61	61.0		Moderate
4	ocument the patient's gender	Sometime	9	9.0	1.69	
		Always	30	30.0		
		Never	92	92.0		
5	Documenting the patient's age	Sometime	2	2.0	1.14	Poor
		Always	6	6.0		
		Never	95	95.0		
6	Documenting the patient's location (unit name, bed number)	Sometime	2	2.0	1.08	Poor
		Always	3	3.0		
		Never	58	58.0		
7	Documenting the date of admission of the patient to the hospital	Sometime	2	2.0	1.82	Moderate
	to the hospital	Always	40	40.0		
		Never	89	89.0		-
8	Document the patient's medical diagnosis	Sometime	2	2.0	1.20	Poor

		Always	9	9.0		
		Never	58	58.0		
9	Briefly state the problem and when it started	Sometime	2	2.0	1.82	Moderate
		Always	40	40.0		
		Never	79	79.0		
10	Documenting the patient's medical history	Sometime	3	3.0	1.39	Poor
		Always	18	18.0		
		Never	79	79.0		
1	Documenting the type of allergy that the patient suffers from	Sometime	1	1.0	1.41	Poor
		Always	20	20.0		
		Never	55	55.0		
2	Documenting the clinical procedures performed for the patient during the shift	Sometime	3	3.0	1.87	Moderate
		Always	42	42.0		
	Documenting the diagnostic procedures and	Never	55	55.0		
13	laboratory tests that were conducted for the patient	Sometime	1	1.0	1.89	Moderate
	during his stay in the hospital	Always	44	44.0		
	Determine the list of medications that were	Never	55	55.0		
14	prescribed to the patient during his stay in the	Sometime	1	1.0	1.89	Moderate
	hospital	Always	44	44.0		
		Never	42	42.0		Moderate
15	Determine the duration of the patient's stay inside the unit	Sometime	27	27.0	1.89	
		Always	31	31.0		
	Documentation of the last clinical observation of	Never	29	29.0		Moderate
16	the patient, who made the observation and the	Sometime	24	24.0	2.18	
	time/date of the observation	Always	47	47.0		
		Never	29	29.0		
7	Document when the patient's condition began to	Sometime	12	12.0	2.30	Moderate
	deteriorate? What is the patient's problem?	Always	59	59.0		
		Never	76	76.0		
8	Provide psychological support to the patient	Sometime	5	5.0	1.43	Poor
		Always	19	19.0		
		Never	87	87.0		
19	Telling the receiving nurse about the priorities of	Sometime	3		1.23	Poor
	patient care according to his condition	Always	10	10.0		
	Documentation of the method and nutritional	•	60	60.0		
20	status of the patient	Sometime	1	10.0	1.70	Moderate

	Always	30	30.0		
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Level of Assessment (Poor = 1-1.66; Moderate = 1.67-2.33; Good=2.34-3)

Table (2) :In terms of statistical mean, this table demonstrated that the nurses expressed a moderate responses at all items of the scale as indicated by moderate mean scores (M.s=1.67-2.33) except, the items number (2, 5, 6, 8, 10, 11, 18 and 19) the responses were poor (M.s \leq 1.66).

Table 3 : Overall Nurses' Practices toward Patient's Handoff

Practices	No.	%	M (±SD)	Ass.
Inadequate	52	52.0		
Partially	35	35.0		
Adequate	13	13.0	32.94 ± 9.87	quate
Total	100	100.0		Inadequate

M: Mean for total score, SD=Standard Deviation for total score

[Inadequate=20-33.33; Partially = 33.34-46.66; Adequate= 46.67-60]

The results demonstrated that (52%) of nurses expressed inadequate practices towards patient's handoff at average equal to $32.94 (\pm 9.87)$.

Sig.

.832

.926

Table (4) :Knowl	edge and Practices betw	ween Groups	of Age:			
Age groups	Source of variance	Sum of Squares	d.f	Mean Square	F-statistic	
	Between Groups	.151	5	.030		
Knowledge	Within Groups	6.698	94	.071	.423	
	Total	6.849	99			1
	Between Groups	.346	5	.069		

Table (4) showed that there were no statistically significant differences in knowledge (F=.423; p=.832) and practices (F=.274; p=.926) between nurses with respect to their age groups.

23.788

24.134

94

99

.253

.274

Table (5) : Knowledge and Practices between Groups of Gender

Within Groups

Total

Practices

Variables	Gender	Mean	SD	t-value	d.f	Sig.
	Male	1.43	.288			
Knowledge	Female	1.16	.170	5.882	98	.000
	Male	1.67	.513			
Practices	Female	1.62	.482	.563	98	.575

Table (5) showed that there were statistically significant differences in knowledge (t=5.882; p= .000) between nurses who are male or female; and no statistically significant differences in practise (t= .563; p= .575) between nurses who are male or female.

Education level	Source of variance	Sum of Squares	d.f	Mean Square	F-statistic	Sig.
	Between Groups	2.313	2	1.157		
Knowledge	Within Groups	4.536	97	.047	24.732	.000
	Total	6.849	99			
	Between Groups	.857	2	.429		
Practices	Within Groups	23.277	97	.240	1.786	.173
	Total	24.134	99			

Table (6):Knowledge and Practices between Groups of Education Level:

Table (6) showed that there were statistically significant differences in knowledge (F=24.732; p=.000) between nurses with respect to their education level and no statistically significant differences in practices (F=1.786; p=.173) between nurses with respect to their education level.

Years of experience	Source of variance	Sum of Squares	d.f	Mean Square	F-statistic	Sig.
	Between Groups	.524	2	.262	_	
Knowledge	Within Groups	6.325	97	.065	4.019	.021
	Total	6.849	99			
	Between Groups	7.498	2	3.749		
Practices	Within Groups	16.636	97	.172	21.860	.000
	Total	24.134	99			

Table (7):Knowledge and Practices between Groups of Years of Experience

Table (7) showed that there were statistically significant differences in knowledge (F=24.732; p=.000) and practices (F=1.786; p=.000) between nurses with respect to their years of experience.

Table (8):Knowledge and Practices between Groups of Number of Training:

Training	Source of variance	Sum of Squares	d.f	Mean Square	F-statistic	Sig.
	Between Groups	3.694	2	1.847		
Knowledge	Within Groups	3.154	97	.033	56.801	.000
	Total	6.849	99			
	Between Groups	2.133	2	1.067		
Practices	Within Groups	22.001	97	.227	4.703	.011
	Total	24.134	99			

Table (8) showed showed that there were statistically significant differences in knowledge (F=56.801; p=.000) and practices (F=4.703; p.011) between nurses with respect to their number of training.

Discussion

Results in table (4.1) show that The characteristics of the participants in the present study indicated that the half percentage of age group 20-24 years old, was 44%, high percentage was female which of 58%. This study is consistent with the study conducted by Beigmoradi et al (2019) the result of the study showed that the majority of nurses (68%) high percentage was female. also found a study conducted by Na'el & Mohammed, (2019) who carried out a study titled "Nurses' Knowledgetoward Care of Unconscious Adult Patients at Teaching Hospitals in Al-Hilla City" showed that the majority of nurses high percentage was male . according to years of experience in nurse, the majority of nurses have experience Less than 5 years (61%). This study is consistent with the study conducted by Ebadi and Hassan (2021). The results of the study showed that the majority of nurses have less years of experience (52%). Also, this study is consistent with the study conducted by of Khadyer, A. Y., & Ahmed, S. A. (2023). who carried out a study titled "Evaluation of Nurses' Knowledge about Chest Physiotherapy Techniques for Patients with COVID-19" showed that most of the nurses had few yearsof experience. high percentage of nurses have Education level Diploma in nursing which of (67%), This study is consistent with the study conducted by Beigmoradi et al (2019) the result of the study showed that the majority of nurses (55%) high percentage of nurses have Education level Diploma in nursing. This conclusion was reinforced by Mardis et al. (2016), who conducted a study on "Bedside shift-to-shift handoffs" and discovered that more than one-third of nurses possessed a nursing diploma .Regarding the nursing handoff courses, most nurses not have handoff training courses, which compromises (68%).

Results of table (4.2) showed that The results demonstrated that (65%) of nurses expressed a poor knowledge towards patient's handoff. This discovery was consistent with a study by John and Michelle (2016), who investigated "Bed Reporting When Shift Changed" and discovered that most of the nurses examined possessed an inadequate level of expertise.

Results of table (4.3) showed that (52%) of nurses expressed inadequate practices towards patient's handoff. This finding is in line with the research done by Kim et al in 2021. The study's findings revealed that the majority of nurses made mistakes during handoffs and that most lacked ward-wide rules and checklists. this study is consistent with the study conducted by Hadi & Fadhil (2020). where The majority of the staff nurses have poor level of overall evaluation of the staff nurses' performance.

A study conducted by Abdulhameed (2020) which showed that the majority of active nurses underperformed in relation to continuity of care at the stage before they were given an education program upon handoff

Results of table (4.3) showed that there were no statistically significant between knowledge differences. and practices of nurses with respect to their age groups. This study is consistent with Chong et al (2020 (there was no discernible correlation between nurses knowledge and practices and their age groups .

this study is no consistent with the study conducted by bader, T., & Kadhim, H. (2012). who carried out a study titled "Evaluation of nurses' practices toward orthopaedic wound infection" The results showed that there is a significant relationship between the practices of orthopedic nurses and their ages.

Table (4.4) showed that The independent sample t-test statistically demonstrated. differences in knowledge between nurses who are male or female; and no statistically significant differences in practice between nurses who are male or female. this study is consistent with the study conducted by Kassar & Khudur, (2021) who carried out a study titled "Evaluation of Nurses' Practices Regards Diabetic Foot Care Management at Teaching Hospitals in Al-Nasiriya city where it was found that no relationship between

practice, and gender. table (4.5) showed that The analysis of variance showed that the differences were statistically significant in knowledge between nurses with respect to their education level . result was supported by Helal et al. (2022) who carried out a study titled "Assessment of Nursing Shift-to-Shift Handover in Intensive Care Unit" and discovered a statistically demonstrated correlation between nurses' knowledge and their education level. Also, the results by Al-Jubouri & Jaafar (2018). who carried out a study titled "Nurses' Knowledge and Practice Toward Oral Care for Intubated Patients" showed that there is a significant correlation between nurses' educational levels and their knowledge. and no statistically demonstrated differences in practices between nurses with respect to their education level. this study is no consistent with the study conducted by Atiyah &Khudhur, (2012) who carried out a study titled "Evaluation of nurses' practices toward postoperative wound dressing in surgical wards" where it was found that The findings of the study indicated that academic nurses had performed adequate practices relative practical ones. The analysis of variance showed that there were differences that were statistically demonstrated. in knowledge and practices between nurses with respect to their years of experience . In a study titled "Nurses' shift reports: a systematic literature search and critical review of qualitative field studies," Buus, Hoeck, and Hamilton (2017) discovered that there is a large statistical difference. relationship between nurses' overall level of performance regarding the shift exchange handoff and their gender and years of experience. . This study is no consistent with the study conducted by Abbas W. And Muhammad Wadad. (2013), a study entitled "The Effectiveness of the Continuing Nursing Education Program on the Nursing Staff and Knowledge in Kidney Transplant Units in Baghdad Teaching Hospitals" and there was no statistically significant relationship between the nurse's knowledge and demographic characteristics (age, sex, educational level, and years of experience in the kidney transplant unit).

Table (4.4) showed that Analysis of variance demonstrated that the differences were statistically significant. in knowledge and practices among nurses with regard to the number of their training, and this study is consistent with the study conducted by Kim et al (2021), where it was found that nurses who graduated from a training program had higher information and better experience than those who had other levels of education . this study is consistent with the study conducted by Ahmed & Radha (2020). who carried out a study titled "Nurses' Knowledge and Skills regardingOxygen Administration Methods at Pediatric Teaching Hospitals in Mosul City where it was found that significant relationships between knowledge, skills and training courses

Conclusions

The results demonstrated that of nurses expressed a poor knowledge towards Patient's Handoff The results demonstrated that of nurses expressed inadequate practices towards patient's handoff. The analysis of variance showed that there were no statistically significant differences in knowledge and practices between nurses with respect to their age groups, there were statistically significant differences in knowledge between nurses who are male or female; and no statistically significant differences in practice between nurses who are male or female .The analysis of variance showed that there were statistically significant differences in knowledge between nurses with respect to their education level and no statistically significant differences in practices between nurses with respect to their education level. The analysis of variance showed that there were statistically significant differences in knowledge and practices between nurses with respect to their years of experience. Analysis of variance showed that there were statistically significant differences in knowledge and practices among nurses with regard to the number of their training. there were significant correlation (positive) between nurses knowledge and their practices.

Recommendations

Adopting a training program to develop the nurses' skills and knowledge about the handoff mechanism .The staff must have many years of experience in handoff with others exchanging experiences in the various units, due to the practical experience they have over the years in their work and their frequent dealings with inpatients. Encouraging the establishment of courses and training programs related to the handoff mechanism, and providing educational brochures for nursing workers to improve their knowledge, which leads to improving their performance.

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