



# Evaluating a Structured Handover Intervention for Community Health Workers and Clinic Nurses to Improve Patient Follow-up in Mozambique

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## Abstract

Fragmented communication between community health workers and clinic nurses disrupts patient follow-up, creating gaps in care continuity within Mozambique's primary healthcare system. The absence of a standardised handover process is a recognised systemic weakness. This study evaluated the effect of a structured handover communication tool on improving patient follow-up rates from community to clinic level. The primary objective was to measure changes in documented follow-up completion. A quasi-experimental design was employed across six health centres in two provinces. Community health workers and nurses in intervention sites were trained to use a standardised handover form for referred patients, while control sites continued with usual practice. Routinely collected referral and follow-up data for a patient cohort were analysed. Clinics using the structured handover tool demonstrated a significant increase in documented follow-up completion. The follow-up rate in intervention sites was 68%, compared to 42% in control sites. Qualitative feedback indicated the tool improved clarity of referral reasons and nurse preparedness. The structured handover intervention effectively improved the rate of documented patient follow-up between community and clinic levels. Standardising communication appears to enhance care coordination within the primary healthcare system. Scale-up of the structured handover tool across similar primary healthcare settings is recommended. Integration into routine health management information systems and provision of ongoing supportive supervision are advised for sustainability. community health workers, patient handoff, referral and consultation, continuity of patient care, Mozambique, primary health care This study provides original evidence on the utility of a low-cost, standardised communication tool to bridge the community-clinic interface in a resource-constrained setting, contributing to health systems strengthening literature.

**Keywords:** *community health workers, primary healthcare, patient follow-up, Mozambique, handover communication, continuity of care, intervention study*

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