Background

• The Joint Commission (TJC) has established the effectiveness of communication among nurses as a National Patient Safety goal requiring institutions to develop a standardized approach to handoff communication (The Joint Commission 2007).

• TJC also added to the National Patient Safety goal to encourage patients to be actively involved in their own care as a patient safety strategy.

• Recommendations from the literature included:
  ❖ Utilizing focus groups
  ❖ Including a structured approach with a standard set of information
  ❖ Interacting with the patient is essential
  ❖ Improved handovers require education of staff and monitoring of ongoing effectiveness

Purpose

• To transform the traditional change of shift handover between nurses from a process based on the memory of the off going nurse into a standardized, patient centered interaction focused on goal setting and patient engagement.

Methods (cont’d)

• Repeat of the “Modified Handover Evaluation Scale” (O’Connell, MacDonald, and Kelly, 2008)
• Descriptive statistics were used to analyze this data

Setting/Sample

• A tertiary care hospital in the Midwest
• All medical and medical/surgical units (N=3)
• All RN staff (N=approx. 75)

Study Flow

• Presentation of proposal content to the site leadership to gain support
• Recruitment of site liaison
• Submit document for IRB approval
• Listening sessions held (6 sessions on various shifts)
• Recruitment of program planning team members
• Brainstorming sessions with small tests of change following each
• Created education (various modalities)
• Implementation
• 6 month follow up
  ❖ Direct observations
  ❖ Repeat “Modified handover evaluation scale”
• Data analysis

Results

• Direct observations showed that RNs were able to verbalize protocol but question whether it is embedded into practice
• Repeat of the Nurse’s Perception’s survey demonstrated no change from the results of the 2015 study
• Identified gaps in peer accountability
• Identified potential unclear leadership expectations during the study time period
• Potential patient satisfaction improvement under communication with nurses

Conclusions

• Leadership support is crucial
• Clear expectations need to be designed for clinical nurses championing the protocol
• Post-implementation survey showed no change in nurses’ perceptions from the 2015 study

Implications

• Clear communication of leadership expectations during program rollout and sustainability
• Further research is needed to identify sustainability

References


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Standardizing Bedside Handover Utilizing Improvement Science Methodologies

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