

Quality Improvement Project Improving Bedside Shift Report Compliance to Impact Patient Outcomes

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Problem Statement

- **Bedside Shift Report (BSR)** is the **gold standard of practice** for nursing turnover in the hospitalized inpatient care setting.
- Thousands of preventable **patient deaths** and **billions of dollars** are attributed to medical errors from **breakdowns in healthcare communication**.
- **Structured and standardized BSR** can improve patient safety and satisfaction, improve patient outcomes, and reduce communication errors.
- Nurses working the medical-surgical unit (MSU) at a large magnet recognized community Maryland hospital are no longer performing BSR.

Purpose of Project & Goals

Purpose: The purpose of this quality improvement project is to improve the compliance of BSR using evidence-based interventions to impact patient outcomes.

Process Measures Goals:

- Improve BSR compliance measured by observation audits to hospital policy goal of 80% or greater in 100% of nurses on the MSU.
- Improve BSR compliance measured by chart audits to hospital policy goal of 80% or greater in 100% of nurses on the MSU.

Outcome Measures Goals:

- Decrease number of total patient falls and HAPIs on the MSU
- Increase scores in patient satisfaction focused on nursing communication in the Press Ganey® Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS).

Methods

Setting for project implementation is a high acuity and turnover, 30-bed Medical Surgical Unit (MSU) in a large, Magnet® recognized community hospital.

Data Collection:

- Clinical site representative, MSU staff leadership, and project lead collected data.
- QR code to collect data directly entered a HIPAA compliant, password secure online database only accessible by project lead.
- Quality and research specialists provided outcome measures data.
- Descriptive statistics performed on process and outcome measures with data displayed on run charts for analyses.

Methods

Project implementation took place over a 15-week period.

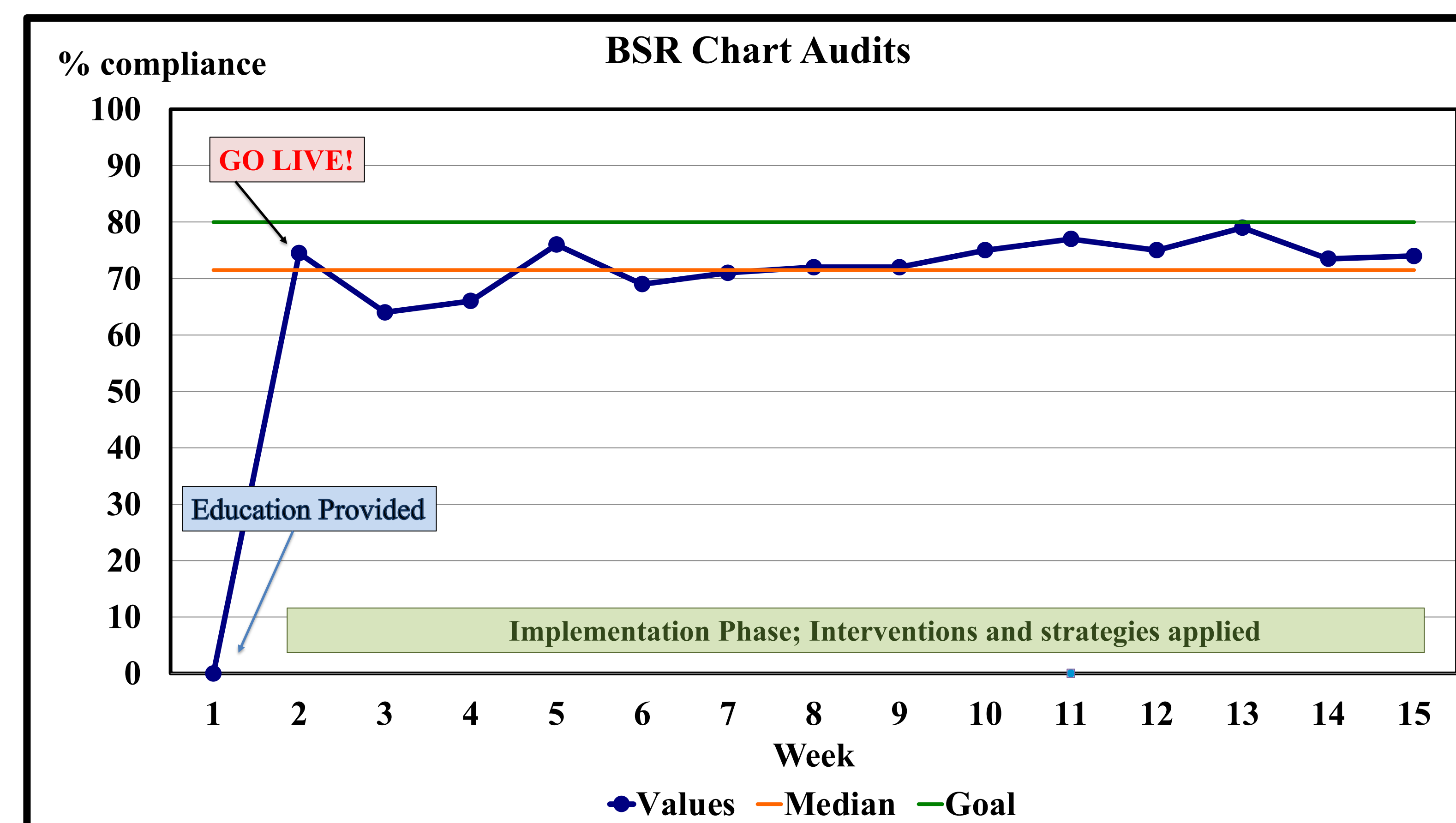
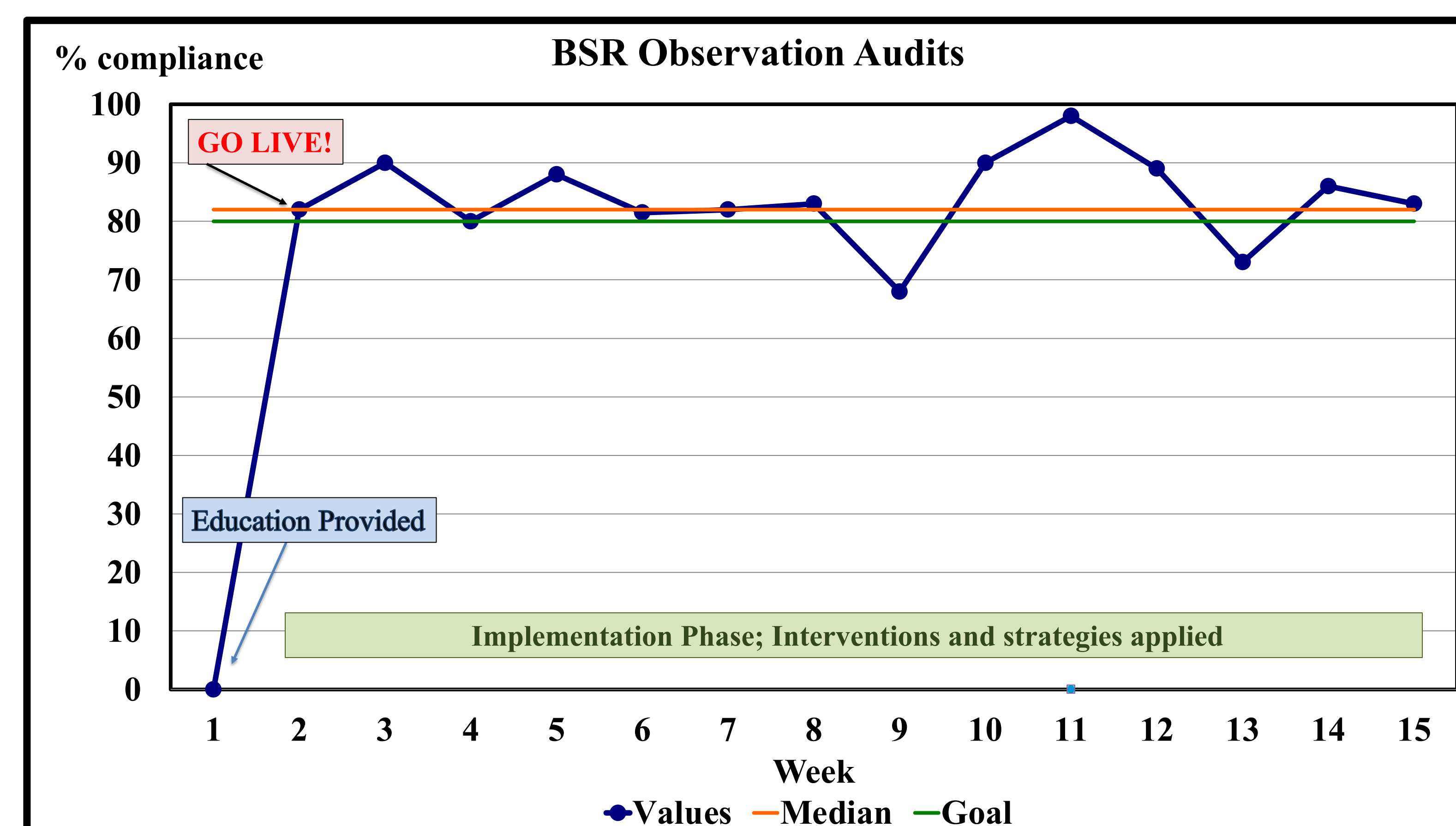
Strategies:

- Daily shift huddle reminders encouraging BSR
- Biweekly leadership meetings
- Sharing performance results with nurses at huddles
- Discussing patient safety benefits with BSR
- Reminding staff of hospital policy

Intervention(s):

- Streamlining eSBAR within the EHR for ease of use and eliminating redundancy.
- Creating a BSR checklist, guided by hospital policy and AHRQ (2017) *Bedside Shift Report Checklist*.
- Education provided to all nurses

Results



Discussion

Findings in Process and Outcome Measures:

- Process measures for BSR compliance averaged 82% (120/146) with observation audits and 72% (489/652) with chart audits.
- Outcomes measuring patient falls (n=9) and HAPIs (n=11) did not show improvement with BSR compliance. Patient satisfaction improved with BSR compliance over the project timeline.

Limitations include short project time frame, being an outsider to the organization, competing projects with EHR changes, and unforeseen circumstances/events impacting outcome measures

Barriers to success:

- Culture change
- High rate of attrition in nurses
- High patient census and acuity unit
- Heavy nurse patient ratios

Impact: Greatest impact comes from strategies utilized to impact goal achievement with observation audits and near goal achievement with chart audits.

Conclusions

- Using a streamlined eSBAR and a BSR checklist has demonstrated an increase in compliance of BSR and observations meet hospital policy goal of 80%.
- Outcomes observed with BSR compliance included improved nursing communication and safer patient care with nurses verifying hanging medications and patient armbands and performing face to face introductions.
- Strategies and interventions used improve BSR compliance and motivate change for better nursing practice.

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References

