AHRQ’s Guide to Patient and Family Engagement in Hospital Safety and Quality: Overview and Spotlight on Nurse Bedside Shift Report

NoCVA: Reducing Injuries from Falls and Hospital Acquired Pressure Ulcers

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Learning objectives

1. Discuss tools available in AHRQ’s Guide to Patient and Family Engagement in Hospital Safety and Quality
2. Identify resources available in the Guide to help implement nurse bedside shift report
3. Review lessons learned from three hospitals that implemented nurse bedside shift report
Let’s hear from you

• What are your goals for today?
• What do you want to get out of today’s session?
Underlying it all: Patient and family engagement

Patients, families, and health professionals working in active partnership at various levels across the health care system

For what purpose?

• To improve systems and processes of care
• To realize better outcomes
  – Improved patient outcomes
  – Improved HCAHPS scores
  – Increased employee satisfaction and retention
  – Enhanced market share and competitiveness
  – Responsiveness to standards, reimbursement, and accreditation requirements
The Guide to Patient and Family Engagement in Hospital Safety and Quality: Overview
The Guide’s key principles

• Include evidence-based strategies that:
  – Create behavior change as a path to larger culture change
  – Reflect priorities and represent meaningful opportunities for engagement
  – Create shared partnerships and collaborations around the same goals

• Strategies must contain detailed guidance and action-oriented tools to help hospitals implement and sustain practices
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``“Information to Help Hospitals Get Started”``

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Spotlight on nurse bedside shift report
What is bedside shift report?

• Clinical expression of engagement and working with patients and families as essential partners in the health care team

• Nurses going off duty share information about patients’ care with nurses coming on duty – in front of patients and families

• More than just moving the typical nurses’ shift report into the patients’ rooms!
Bedside shift report: two tales

Hospital A

Hospital B
5 key elements to successful BSR

1. Introduce and invite
2. Conduct verbal SBAR in plain language
3. Conduct focused assessment of patient, safety assessment of room
4. Review labs, tests, medications, forms
5. Identify the patient and family’s needs and concerns
Bedside shift report in action

- [Effective bedside shift report](video)
The Guide tools to support implementation

• Implementation handbook

• Tools for patients and families
  – Tool 1: Nurse Bedside Shift Report: What is it? How can you get involved?

• Tools for nurses
  – Tool 2: Bedside shift report checklist
  – Tool 3: Bedside shift report training
# Implementation handbook

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Nurse Bedside Shift Report

What is it?

How can you get involved?

Being a partner in your care helps you get the best care possible in the hospital. Taking part in nurse bedside shift report is one way you can be a partner.

This brochure explains what nurse bedside shift report is and how you can get involved.

What is nurse bedside shift report?

Nurse shift changes occur when nurses who are going off duty share information about your care with nurses coming on duty. At [insert hospital name], we want you to be involved in shift changes to make sure you get high-quality care.

Nurse bedside shift report is when the nurses going off and coming on duty meet by your bedside to talk about your care. This gives you a chance to meet the nurse taking over your care, ask questions, and share important information with your nurses. Nurse bedside shift report does not replace the conversations you have with your doctor.

You can invite a family member or friend to stay during nurse bedside shift report. We will only talk about your health with others when you say it is okay.

When is nurse bedside shift report?

Nurse bedside shift report happens every day between 7:30 a.m. and 8:30 p.m. It usually lasts 5 minutes.

What should I expect?

During nurse bedside shift report, the nurses going off and coming on duty will:

- Introduce themselves to you and anyone with you. The nurse coming on duty will write his or her name and phone number on the white board in your room.
- Invite you to take part in the nurse bedside shift report. You should decide who else can take part with you.
- Talk with you about your health, including the reason you are in the hospital and what is going on with your care. The nurses will look at your medical chart.
- Check the medicines you are taking. The nurses will look at your IVs, injuries, and bandages. They will also follow up on any tests that were done or lab work that was ordered.
- Ask you what could have gone better during the last shift and what you hope to do during the next shift. For example, you may want to get out of bed or just sleep. The nurse will try to help you meet this goal.
- Encourage you to ask questions and share your concerns. If needed, the nurse coming on duty may come back after the bedside shift report to spend more time discussing your concerns.

What should I do?

- Listen. You are an important part of the health care team. We want to make sure you have complete and timely information about your care.
- Speak up. If you have questions or concerns, nurse bedside shift report is the perfect time to raise them.
- Ask questions if something is confusing. If the nurses use any words or share any information you don’t understand, feel free to ask them to explain it.

[Insert hospital name] wants to make sure that you get the best care possible.

If you have any concerns about the quality or safety of your care during your hospital stay, please let your nurse or doctor know.

If you are still concerned, call our [insert quality coordinator name and title] at [insert phone number].

If nurse bedside shift report does not happen, call the nurse manager at [insert phone number].
Tool 2: **Bedside Shift Report Checklist**

- Introduce the nursing staff to the patient and family. Invite the patient and family to take part in the bedside shift report.
- Open the medical record or access the electronic work station in the patient’s room.
- Conduct a verbal SBAR report with the patient and family. Use words that the patient and family can understand.
  - **S** = Situation. What is going on with the patient? What are the current vital signs?
  - **B** = Background. What is the pertinent patient history?
  - **A** = Assessment. What is the patient’s problem now?
  - **R** = Recommendation. What does the patient need?
- Conduct a focused assessment of the patient and a safety assessment of the room.
  - Visually inspect all wounds, incisions, drains, IV sites, IV tubings, catheters, etc.
  - Visually sweep the room for any physical safety concerns.
- Review tasks that need to be done, such as:
  - Labs or tests needed
  - Medications administered
  - Forms that need to be completed (e.g., admission, patient intake, vaccination, allergy review, etc.)
  - Other tasks: _______________________________________________________________________
- Identify the patient’s and family’s needs or concerns.
  - Ask the patient and family:
    - "What could have gone better during the last 12 hours?"
    - "Tell us how your pain is."
    - "Tell us how much you walked today."
    - "Do you have any concerns about safety?"
    - "Do you have any worries you would like to share?"
  - Ask the patient and family what the goal is for the next shift. This is the patient’s goal — not the nursing staff’s goal for the patient.
    - "What do you want to happen during the next 12 hours?"
    - Follow up to see if the goal was met during the verbal SBAR at the next bedside shift report.

Adapted from the Emory University Bedside Shift Report Bundle.
Tool 3: Nurse bedside shift report training

Potential challenges

- Unknown visitors or family in the room
- New diagnosis or information patient is not yet aware of (e.g., waiting for doctor to discuss)
- Patient is asleep
- Patient is noncompliant and you need to share information with oncoming nurse
- Patient or family has a complex question or needs a lengthy clarification
- Semi-private rooms and HIPAA concerns

Benefits of bedside shift report for patients

- Acknowledges patients as partners
  - “You do get the feeling of at least being wanted. You’re not just a patient in the bed.”
  - “It makes you feel like you’re involved.”
- Builds trust in the care process
  - Shows the patient how much nurses know and do for them
  - Shows teamwork among the nursing staff, reassuring the patient that everyone knows what is going on with them
Results and lessons learned from hospitals that have implemented bedside shift report
Implementation and evaluation at 3 hospitals

Advocate Trinity Hospital – Chicago, IL
• 250 beds
• Non-profit, part of Advocate Health System
• Predominantly minority population, more than half of patients at or below poverty level

Anne Arundel Medical Center – Annapolis, MD
• 380 beds
• Non-profit, not part of larger system
• Small percentage of patients living below the poverty level

Patewood Memorial Hospital – Greenville, SC
• 72 beds
• Non-profit, part of Greenville Health System
• Rural population, more than 1/3 are Medicare beneficiaries
Results of implementing BSR

- HCAHPS scores trended upward at all three hospitals
- Patients and family members provided positive feedback
- Staff reported more positive views of patient- and family-centered care

“The nurse’s bedside shift report; that’s a very good thing. The nurses come into your room and they talk with you, right in front of you, about your medicines and your health. That way, everybody is on one page.”
Results of implementing BSR

• Nurses reported improved time management — bedside shift report took less time
• Improved accountability associated with implementation of bedside strategies
• At least one hospital reported fewer patient falls and improved IV pump compliance (medication safety)
• Sustainability and spread!
Big picture keys to successful implementation

1. Specific implementation goals and a clear vision for how the Guide aligns with and supports organizational priorities
2. Visible support from senior leaders
3. Start small: Initial implementation on one unit
4. Day-to-day implementation oversight from a well-respected point person
Big picture keys to successful implementation

5. Specific implementation roles and responsibilities for unit-level staff
6. Staff training to introduce the initiatives, explain changes in care practices, outline expectations for behavior, address concerns
7. Ongoing monitoring, feedback, and coaching
Getting started
How to get started with implementing BSR: Step 1

• Form a team to identify areas for improvement
  – Engage patients and families in the process
  – Assess policies that support or hinder implementation
  – Assess current staff views
  – Identify, acknowledge, and address challenges
  – Set goals
How to get started with implementing BSR: Step 2

- Decide how to implement bedside shift report
  - Identify logistic issues and develop plans
  - Decide how to use and adapt the Guide tools
  - Decide on a training approach for staff
How to get started with implementing BSR: Step 3

• Implement and evaluate
  – Inform staff of changes
  – Train staff
  – Roll-out bedside shift report
  – Assess implementation intensely at first, periodically thereafter
  – Get feedback from everyone involved
  – Refine the process
  – Spread the process
Key take-aways

• Bedside shift report isn’t about location change — it’s about process change
• Involve patients and families in planning
• Recognize and address barriers head on, and play to your positive outliers
• Hardwire from the beginning — make it non-negotiable
• It’s a journey, not a destination!

“It’s like Nike, just do it. And you can tweak it and get better as you go along, so just get out there and get that experience of doing it.”
For more information

• Download the *Guide* at AHRQ’s website:
  

• Contacts
  
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