Evaluation of a Standardized Electronic Change of Shift Report
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Problem: Phase I (2004), nursing staff identified gaps in communication during shift report that can impact patient safety. Phase II (2005), What shift report practice changes are needed to reduce gaps in communication?


Strategy: Stetler’s Model was the theoretical model. A quality improvement team facilitated the development and implementation of a standardized, computer generated nursing shift report.

Practice Change: 1) An electronic standardized nursing shift report was developed for all MED/SURG wards. 2) Tape reporting was discontinued on all MED/SURG wards. 3) All nurses perform face-to-face reporting and have the opportunity to ask and respond to clarifying questions.

Evaluation: Outcomes measured include satisfaction of current shift report practice, nurse awareness of reason for practice change and knowledge of the implementation process. Outcomes were evaluated by staff surveys, interviews and feedback sessions. As a quality improvement project, presentations were conducted with management and executive level nursing to evaluate the utility and feasibility of a change in practice at shift change.

Results: After implementation of a standardized, computer generated shift report 1) satisfaction with information received during shift report decreased 10% 2) belief that information received was accurate increased 2%, and 3) the belief that shift report is a necessary component of practice remained at 90% pre and post implementation.

Recommendations: 1) Ensure up-to-date technical infrastructure to support clinical care. 2) obtain buy-in from all levels of nursing. 3) Identify potential road blocks such as, a) timing of post-survey occurred too soon after initial implementation, b) novice to expert nurse considerations c) individual nurse comfort and perception of computer charting, d) hospital culture related to shift report.
REFERENCES:


