Implementation of Charge Nurse Handoff Effectiveness

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Problem:
Ineffective Charge Nurse Handoffs create gaps in patient care and compromise patient safety due to communication failure and lack of a standardized approach to handoff communication.

Evidence:
The Joint Commission (2005) noted breakdowns in communication contribute to sentinel events and significant medical errors.

Strategy:
This quality improvement project was conducted to improve Charge Nurse communication through standardization of the Charge Nurse Handoff using TeamSTEPPS and SBAR communication strategies.

Practice Change:
The project was conducted on three acute care nursing units and included fourteen registered nurses who served in the charge nurse role. Each charge nurse attended a five hour TeamSTEPPS and SBAR training session and contributed to revisions of the Charge Nurse Handoff Form. The revised Handoff Form was arranged in SBAR format and included: description of patient problem, patient name and diagnosis, supporting information (i.e. patient history, medications and tests), analysis of pertinent medical history (i.e. vital signs and diet), and suggestions for future actions to resolve problem.

Evaluation:
Charge nurses completed a survey prior to implementation of the revised Charge Nurse Handoff Form to determine satisfaction with the previous handoff tool and knowledge of TeamSTEPPS and SBAR communication. Evaluation of the implementation phase of the Standardized Charge Nurse Handoff Form included 39 direct observations by the project director over a four week period. The Handoffs were assessed for effectiveness, duration and number of interruptions. The Charge Nurses completed a post implementation satisfaction survey.

Results:
The results showed increased efficiency, decreased duration of the handoffs, decreased interruptions, and increased satisfaction with the Charge Nurse Handoff process.

Recommendations/Lessons Learned:
This quality improvement project supports the importance of training Charge Nurses in the Handoff process to promote consistent information exchange and improved time management.

Bibliography
The Joint Commission (2005). The Joint Commission sentinel event policy: Ten years of improving the quality and safety of healthcare. Joint Commission Perspectives. 25(5)1.