VUMC Hospital at Home RN Response to Current Shift Change Process

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INTRODUCTION

Topic

RN response to current shift change process of the VUMC Hospital at Home Program

Problem

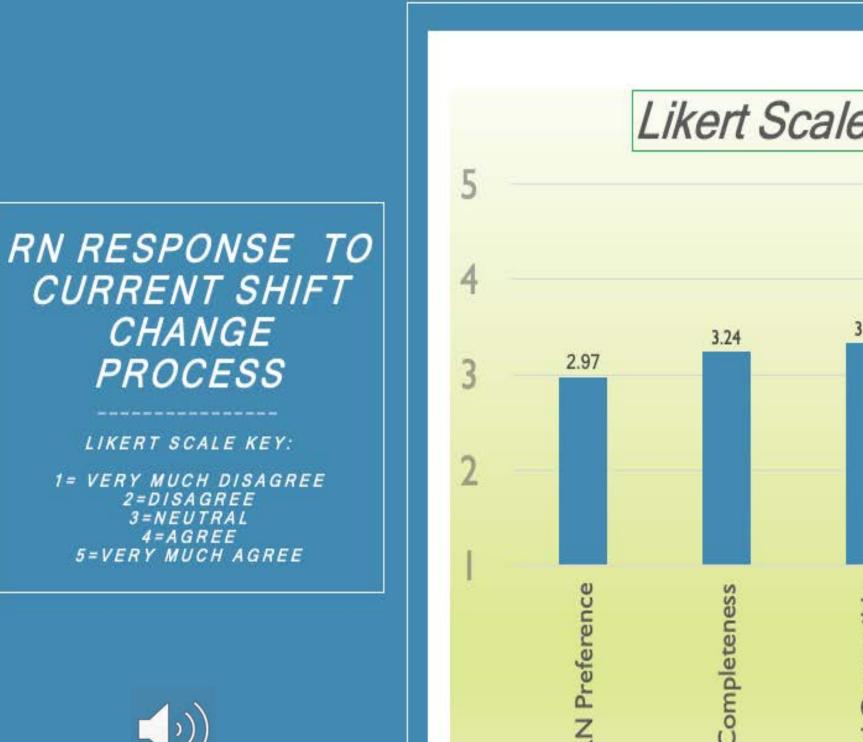
- National patient safety has been compromised during shift change turnover
- 80% of national adverse effects are tributed to shift change
- 50,000 deaths were caused annually by medical errors, many during shift change nationwide
- Factors include time restraints, low staffing, omissions of information, and inexperience
- SBAR communication has become the standard for healthcare communications
- H@H challenges: no access to EMR, lack of internet, family interference, comfort and security of nurses

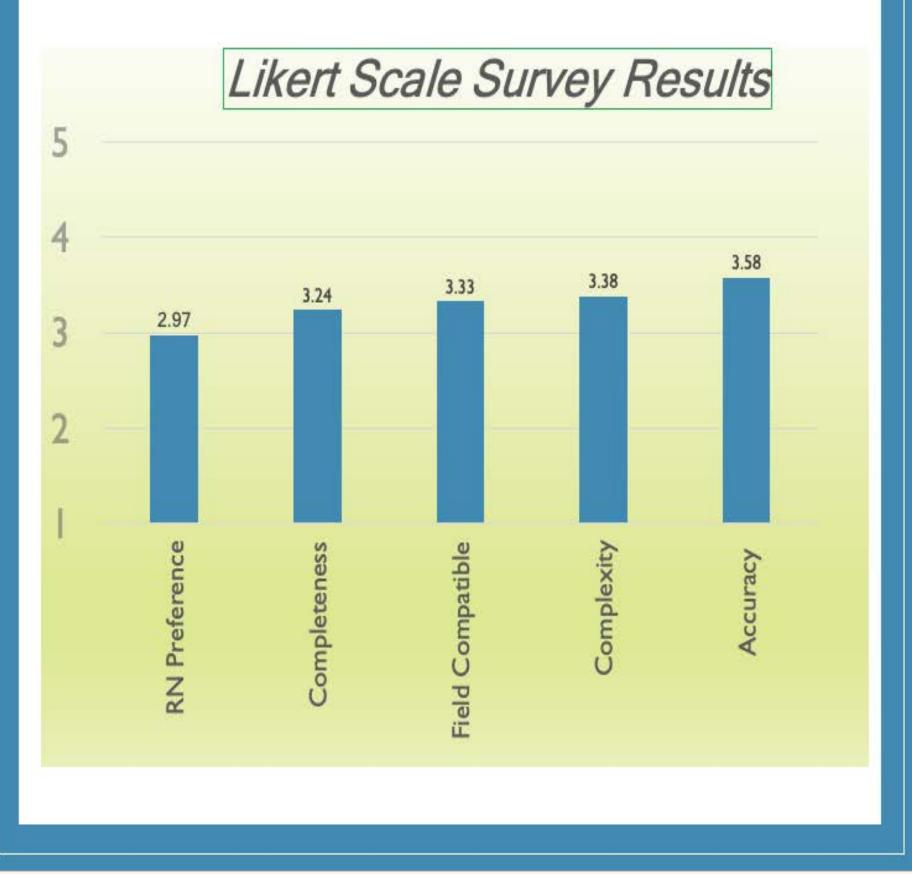
Aim

Aim for healthcare to be effective: communications between nurses at shift change need be effective, as purposed by the 2022 Hospital National Public Safety Goal NPSG.02.03.01

METHODS

- Develop a Likert style survey, specifically addressing the efficiency of the current shift change
- Categorize questions that describe effective communication: accuracy, efficiency, completeness, also insight into preferences and field application
- Disseminate survey through REDCap to nursing staff working with H@H with goal of 100% participation rate
- Aggregate, evaluate and correlate data from Likert scale survey
- Develop a synopsis of the effectiveness of the current shift change process
- Share results of survey and interpretive results with VUMC H@H





RESULTS

Near total agreement endorsing process as accurate, efficient, and complete.

Positives:

- accuracy, appropriate complexity, and time efficiency
- opportunity for questions and clarification of turn over information
- near total agreement of shift change importance
- nurses are confirming information with the patient

Concerns:

- clarity of patient medication regimen
- challenges accessing patient information in the field

IMPLICATIONS FOR PRACTICE

- Hospital at Home RN face unique challenges in the field
- Survey results will inform future shift change process to reduce risk of harm to patients.

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