

SE1EOa – PROFESSIONAL DEVELOPMENT

Using the required empirical outcomes (EO) presentation format, provide an example of an improved patient outcome associated with the participation of clinical nurse(s) serving as a member(s) of an organization-level interprofessional decision-making group.

Problem

The NewYork-Presbyterian/Columbia University Irving Medical Center (NYP/Columbia) Patient Experience Council is an interprofessional decision-making body at the organizational level. This council convenes monthly to assess patient experience metrics, examine best practices, and formulate implementation strategies with the goal of enhancing the patient experience. Membership in the NYP/Columbia Patient Experience Council is comprised of interprofessionals, including clinical nurses, nursing leaders, a quality and patient safety specialist, providers, leaders/designees from Patient Experience, Support Services, Environment Health and Safety, Security, Pharmacy, Food and Nutrition Services, Procurement/Strategic Sourcing, and Rehabilitation Medicine.

During council meetings, Aimee Rizzi, DNP, RN, CEN, Director of Nursing, Medicine, and executive sponsor of the Patient Experience Council, reviews the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) patient experience survey data at the organization and unit levels for the inpatient units. In the HCAHPS survey, the Communication with Nurses domain score is a combined score (% Always) for the following three questions:

1. During this hospital stay, how often did nurses treat you with courtesy and respect?
2. During this hospital stay, how often did nurses listen carefully to you?
3. During this hospital stay, how often did nurses explain things in a way you could understand?

In June 2023, Ms. Rizzi reported that the “% Always” Communication with Nurses domain score was low for the Neuro Surgery (8HS-605158) [8HS] Unit.

Pre-Intervention

June 2023:

- The HCAHPS “Communication with Nurses” domain “% Always” response score for 8HS was 74.3.
- During the June 2023 monthly Patient Experience Council meeting, members, including Claudia Charles, BSN, RN, clinical nurse, identified that a key factor contributing to the low Communication with Nurses score was a significant and widespread knowledge gap related to Bedside Shift Report. Bedside Shift Report is a standardized process involving nurse-to-nurse hand-off communication concerning patient status and care delivered at the bedside at the start of each shift.
- After attending the Patient Experience Council meeting, Ms. Charles met with Lauren English, MSN, RN, APRN, SCRNP, Patient Care Director (nurse manager), 8HS, to discuss reeducation of clinical nurses on Bedside Shift Report to hardwire the practice.

Goal Statement

To increase the HCAHPS patient satisfaction “Communication with Nurses” domain “% Always” response score for 8HS.

Participants

Name/Credentials	Discipline	Title	Department/Unit
Claudia Charles, BSN, RN	Nursing	Clinical Nurse and Member, Patient Experience Council	8HS
Kevin Schlegal, BSN, RN	Nursing	Clinical Nurse	8HS
Agnieszka Warenica, MSN, MPA, RN, CNRN	Nursing	Clinical Nurse	8HS
Edna Romanos, BSN, RN	Nursing	Clinical Nurse Manager (clinical nurse)	8GS/8HN/8HS
Lauren English, MSN, RN, APRN, SCRNP	Nursing	Patient Care Director (nurse manager)	8HS
Aimee Rizzi, DNP, RN, CEN	Nursing	Director of Nursing	Medicine

Daniel DiCello	Patient Experience	Director, Patient Centered Care	Patient Experience
Amanda Pallet	Patient Experience	Patient Services Ambassador	Patient Experience

Intervention

July 2023:

- At the 8HS tier 1 huddle, Daniel Dicello, Director of Patient Centered Care educated the 8HS clinical nurses on the utilization of the Bedside Shift Report 5 Step Performance Checklist. Ms. Charles provided education on the Bedside Shift Report 5 Step Performance Checklist to the remaining 8HS clinical nurses.

The Bedside Shift Report 5 Step Performance checklist consisted of the following:

- Logistics of Bedside Shift Report
 - Inform patient and family about Bedside Shift Report process prior to first shift change
 - Briefly review patient's past medical history and sensitive information prior to entering patient's room
 - Consider language/interpreter needs
 - Utilize Rover to report out pertinent information (orders, vitals, meds, feeding, etc.)
 - Include patient and family (with permission) in Bedside Shift Report
 - Maintain patient privacy during Bedside Shift Report process
- Conducts Bedside Shift Report
- Conducts Two Registered Nurse Patient Safety Check, which includes:
 - Presence of patient ID bracelets
 - Call bell within reach
 - Bed in lowest position with appropriate number of side rails up
 - Equipment functioning properly
 - Clinical alarms functioning and appropriately set (if applicable)
 - IV lines, IV insertion site, pumps (right rate, right fluid), Foley catheter
 - Environment of care (safety and cleanliness)
- Sets goal for the shift
- Documents Bedside Shift Report in the electronic medical record (EMR)

- Ms. English integrated this checklist into her daily leader rounds as she validated Bedside Shift Report compliance and provided feedback to the team.

Impact Statement: Education and the subsequent utilization of a performance checklist addressed the identified knowledge gap, ensured compliance of all elements of Bedside Shift Report, and enhanced the communication practices among clinical nurses and nurse managers, contributing to an improved patient experience.

August 2023:

- Mr. Dicello and Amanda Pallet, patient services ambassador, scheduled an education session with the unit nurses using role playing scenarios of Bedside Shift Report. Mr. Dicello and Ms. Pallet played the roles of patient and family members, while two clinical nurse volunteers acted out the Bedside Shift Report. The other participants in the group observed and provided feedback.

Impact Statement: Role play allowed clinical nurses to gain a deeper understanding of Bedside Shift Report by applying theoretical knowledge to practical situations, improving RN communication. This safe space allowed for transparency and feedback.

- Ms. Charles, Mr. Schlegal, and Ms. Warenica educated new members of the team as part of their orientation.

Impact Statement: Educating new hires on Bedside Shift Report set the standard for clinical nurse communication at NYP/Columbia and 8HS from the beginning of their employment, improving the patient experience.

- Ms. Charles; Kevin Schlegal, BSN, RN, and Agnieszka Warenica, MSN, MPA, RN, CNRN, clinical nurses and 8HS patient experience champions; and Edna Romanos, BSN, RN, Clinical Nurse Manager (clinical nurse) validated the adoption and performance using the Bedside Shift Report 5 Step Performance Checklist to ensure full integration into daily practice. This validation was complete by August 31, 2023.

Impact Statement: Validation of practice using a checklist promoted standardization by outlining Bedside Shift Report performance criteria to ensure compliance and improve clinical nurse communication and exchange of information.

○ **Key references:**

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Clark, A., Wolgast, K. A., Mazur, N., & Mekis, A. (2020). Leading Change in Nurse Bedside Shift Report. *Nursing Clinics of North America*, 55(1), 21-28. <https://doi.org/10.1016/j.cnur.2019.10.002>

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Malfait, S., Van Hecke, A., Van Biesen, W., & Eeckloo, K. (2019). Is privacy a problem during bedside handovers? A practice-oriented discussion paper. *Nursing Ethics*, 26(7-8), 2288-2297. <https://doi.org/10.1177/0969733018791348>

Outcome

