Vanderbilt Medical Center
Bedside Change of Shift Report

Desired outcomes

• Understand the importance and necessity of including the patient and a designated family member in rounds/change of shift report.

• Identify a consistent process for change of shift report.
Problem areas identified

- No clear definition of what constitutes a “bedside report”
- No protocol or process consistently implemented
- Report content too expansive in some areas
- Unauthorized disclosure of the patient’s past history and current diagnosis to visitor and family members
- Inconsistent responses by management over questions and challenges raised by the nurses
Workgroup

- Debbie Gardner, VCH
- Reta Higgins, GI
- Diane Johnson, Neuro Care
- Lou Kaelin, CSRC
- Gaye Smith, Privacy office
- Terrell Smith, Patient/Family-Ctr. Care
Why include the patient?

• “Patients should have unfettered access to their own medical information and to clinical knowledge. Clinicians and patients should communicate effectively and share information.”*

• “Nothing about me without me.”

*Institute of Medicine report Crossing the Quality Chasm: A New Health Care System for the 21st century.
Why include a family member?

- The majority of patients have some connection to family or natural support.

- Individuals, who are most dependent on hospital care, are most dependent on families…
  - the very young
  - the very old
  - those with chronic conditions
But what about HIPPA?

Patients have the right to decide who will be involved in their care. They also have the right to define the word “family”.

Vanderbilt has an approved form:

Communication with Family and others involved in your care.
What if the patient is unable to communicate?

Notice of Privacy Practices

Family Members and Friends Involved in Your Care or Payment for Your Care: We may share information about you with family members and friends who are involved in your care or payment for your care. Whenever possible, we will allow you to tell us who you would like to be involved in your care. However, in emergencies or other situations in which you are unable to tell us who to share information with, we will use our best judgment and share only information that others need to know. We may also share information about you with a public or private agency during a disaster so the agency can help contact your family or friends about your location and tell them how you are doing.
What constitutes bedside report?

- Plan of care
- Past shift /activity/observations
Draft for discussion:

**Before** going into the patient’s room

- Review diagnosis
- Past pertinent history
- Social or sensitive issues
- Review communication form with oncoming shift nurse as to who is authorized to be present for rounds/change of shift
In the room

• Introduce yourself and oncoming nurse to patient/family.
• Say that we are going to be giving a shift report that will take a few minutes.
• Identify who is in the room. Are they on the list? If on list-then proceed.
• If not on the list, say “we will now be giving shift report. If you could just step outside while report is being given, it will only take a few minutes. If the patient speaks up and says it is ok, then add the name to the list. **DO NOT** put the patient on the spot by asking them it is is ok for them to stay in front of the visitor.
In the room

• Give report of past shift and plan of care for the next shift
• Give patient and family member an opportunity to provide their observations and ask any questions they might have or any goals they have for the day.
• If patient is unconscious and the form has not been signed, then refer to policy on Legal next of kin.
Issues/questions

• Communication form- goal: electronic implementation of form. Would still need to be updated each admission as family dynamics can change notably between admissions. Link with STAR panel and HED

• Can we standardize the access code given to families for phone information so that when they are transferred they don’t get a new code? If yes, what would that be?

• Involvement in report- link to patient satisfaction surveys. Specifically privacy and including in decision making.
Next steps?