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The Impact of Nursing Hand Off Reports

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Does the Method of Delivery of a Nursing Handoff Report, Verbal or Bedside, Affect Patient Outcomes?

Selena Carrera and Bobbie Umberger

Abstract

We will be evaluating and comparing different type of nursing handoff reports. We looked at various different research articles and studies that compared bedside handoff reports to verbal handoff reports. These studies analyzed the effect that the different handoff forms have on patients, whether it be safety or satisfaction. We compiled the advantages and disadvantages of bedside and verbal reports, found strategies to improve handover reports, and ultimately came to the conclusion that bedside report is better for not only the patient, but the nurse as well.

- P-** Our population involves hospitalized patients
I- Verbal versus bedside report
C- The effectiveness between the two types of reports.
O- Patient safety observations

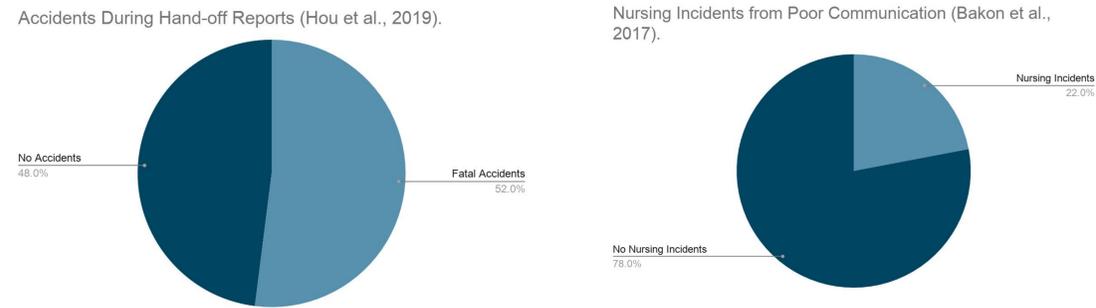
Introduction

Typically, handoff reports are given to the oncoming nurse verbally, written, or can be audio-recorded. There has been a recent shift where this status update is occurring verbally but at the bedside of the patient, which is supposed to be better for both the nurse and patient for many reasons. Our research question is does the method of delivery of a nursing handoff report, verbal vs beside, affect patient outcomes?

Verbal Handoff Reports Evaluation

Advantages	Disadvantages
<ul style="list-style-type: none"> • Gives the two nurses opportunity to interact • Allows incoming nurse opportunity to ask questions and clarify information (Dorvil, 2018). • Gives the most updated, current information on the patient (Ofori-Atta et al., 2015). 	<ul style="list-style-type: none"> • Takes longer, which leaves patients unattended (Ofori-Atta et al., 2015). • Potential HIPAA violations (Ofori-Atta et al., 2015). • It takes multiple handoff reports in order to gather important information, which can be inconsistent (Bakon et al., 2017). • It does not allow patient to intervene into their plan of care (Bakon et al., 2017). • Poor communication can lead to decreased patient safety (Hou et al., 2019). • There can be a lack of teamwork (Hou et al., 2019).

Statistics



On the left pie chart, "A report by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) noted that more than 52% of the fatal accidents that occur during nursing hand-offs are caused by negligence" (Hou et al., 2019, p. 1056). On the pie chart on the right, "22% of nursing incidents arise from poor communication during the handover process" (Bakon et al., 2017, p. 2).

Analysis

iSoBAR	Identity, Situation, Observations, Background, Agreed Plan, Read Back (Bakon et al., 2017).
PIVITAL	Used in emergency departments Patient, Vital Signs, Input/Output, Admission/Discharge, Legal Documentation (Bakon et al., 2017).
REED	Enforces patient safety and proper documentation (Bakon et al., 2017).
ICCCO	Identification, Clinical Risks, Clinical History and Presentation, Clinical Status, Care Plan, Outcomes/Goals of Care (Bakon et al., 2017).
Training and Improvement Programs	Train nurses on how to give a proper handoff report to increase patient safety, teamwork, and satisfaction (Bressan et al., 2020).
Written and Verbal Handoff Report	Allows nurse to have a written summary along with an opportunity to ask questions during verbal handoff reports (Bressan et al., 2020).

Bedside Handoff Reports Evaluation

Advantages	Disadvantages
<ul style="list-style-type: none"> • More cost effective because it reduces overtime (Dorvil, 2018). • Reduces risk of medication errors (Galarzan and Carrington, 2018). • Includes patient in care, providing them with more opportunities to ask questions as well (Ofori-et al., 2015). • Decrease in general adverse effects (Bukoh & Siah, 2019). • Overall, improved patient satisfaction (Ofori-Attal et al., 2015). • Increased nurse satisfaction (Dorvil, 2018). • Allows patient to get to know the incoming nurse (Bakon et al., 2017). 	<ul style="list-style-type: none"> • Patient complaints of lack of privacy (Ofori-Atta et al., 2015). • Experienced nurses reluctance to change (Dorvil, 2018). • Third-person narrative inhibits patient-nurse interaction (Forde et al., 2020). • Solely focused on physical and physiological information (Forde et al., 2020). • Nurses are often not trained on how to give report (Bressan et al., 2020). • There can be a lack of communication between nurses (Bressan et al., 2020).

Conclusion and Implications for Future Research

Overall, bedside report has been proven to be better for the patient because patients are more satisfied with the care that they are receiving. In addition, patients are able to take part in their plan of care, as well as reduce any medication errors, miscommunication, or misinformation. Being able to complete a bedside report, allows patient safety to increase because there is also a relationship being formed between the patient and incoming nurse. The patient is given autonomy by being able to be present and give more vital information. Some implications for further research include researching the effectiveness of handoff training programs, measuring the nurse's satisfaction on a type of handoff report, comparing handoff reports in different units, and continuous evaluations in effectiveness.

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