



The Effect of Bedside Report on Patient Satisfaction

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Research Question

Will change of shift report exchanged at the bedside yield better patient satisfaction scores than report exchanged without the patient present?

Introduction

Change-of-shift report allows communication of patient data from one nurse to another and is a vital part of continuity of patient care. This report can occur at a nurse's station, in the hallway, or at the patient's bedside. The change-of-shift report is vital because it allows nurses to make informed clinical decisions and prioritize patient care. The location at which change of shift report is exchanged can greatly impact how involved a patient feels in their care, and how satisfied a patient is with their time spent in a hospital.

The Joint Commission (TJC) has identified communication failures as the leading cause of sentinel events in the United States and lists shift report as a contributing factor. These sentinel events caused by change of shift report problems can also negatively affect patient satisfaction. Since quality of patient care relies tremendously on this form of nurse communication, the purpose of this field study is to determine which form of report yields better patient satisfaction scores. A comparison will be made between patient satisfaction survey scores from a unit that performs bedside report versus a unit that performs report elsewhere. Our expectation is that patient satisfaction scores will be better on the unit where report is exchanged at the bedside as opposed to the unit where report is exchanged in locations such as the nurse's station, the hallway, or over the phone.

Literature Review

Change-of-shift report is essential to ensuring the quality and safety of patient care in nursing. In a change of shift report, all information about a patient's plan of care must be clearly communicated from the off-going to the oncoming nurse. There is currently no standard regarding how and where change of shift report should occur, and ineffective communication during change of shift report is the most frequently cited cause of sentinel events in United States Hospitals (Dufault, 2010).

In a study conducted by Wakefield et al in 2012, nursing change of shift report at the bedside increased patient satisfaction scores by 11 points within six months of implementing the change, and an increase of 6.9 more points after a year of switching to bedside report. Another study found that performing change of shift report at the bedside "improved nurse satisfaction and increased direct care time to patients" (Evans, 2012 p292). It has also been found that environments such as the unit hallway or the nurse's station can be conducive to interruptions during change of shift report and can lead to important patient information being lost (Scovell, 2010).

The previously mentioned study performed by Wakefield et al also found that nurses reported that bedside report violated patient confidentiality and did not save time. Patient confidentiality is a barrier to bedside report that is mentioned in many research articles. If a patient is in a semi-private room with another patient, exchanging change of shift report at the bedside could be a violation of the patient's privacy if the other patient in the room is able to overhear the report. Other barriers to performing change-of-shift report at the bedside include time restrictions and a lack of computers at every bedside in older facilities.

Methods

To determine which form of report brings forth higher patient satisfaction scores, a comparison will be made between two units located in a local hospital. Both of these units are a type of critical care unit where patients require very high acuity care.

When patients go home after their visit to the hospital they are mailed a patient satisfaction survey, which they complete and return to the hospital. Patient Satisfaction Survey scores from July 2015 to January 2016 will be evaluated from each unit and compared to one another.

Results

Patient Satisfaction Survey Scores

Unit	Nurse Communication	Environment	Medications	Care
Unit A (Bedside Report)	99%	98%	95%	93%
Unit B (Report at Nurses' Station or Elsewhere)	20%	27%	16%	28%

The numbers displayed on this chart represent the percentage of patients that rated their satisfaction in each category as 9 or 10 on a scale of 1-10, 1 being not satisfied at all and 10 being very satisfied.

- ◆ **Nurse Communication:** This category represents how the patient perceived the communication between the nurses that were responsible for their care and between the nurse and the patient themselves.
- ◆ **Environment:** This category represents the safety and comfort that the patient experienced during their stay on each unit.
- ◆ **Medications:** This category represents the patient's view of the timeliness of medication administration, accuracy of medications administered, and management of medication side effects.
- ◆ **Care:** This category represents how the patient feels about their care as a whole during their stay on each unit.

References

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Comparison of Patient Satisfaction

	Local Hospital	Kentucky Average	National Average
Patients who reported that their nurses "Always" communicated well	80%	81%	79%
Patients who reported that their doctors "Always" communicated well	79%	85%	82%
Patients who reported that they "Always" received help as soon as they wanted	70%	70%	68%
Patients who reported that their pain was "Always" well controlled	71%	73%	71%
Patients who reported that staff "Always" explained about medicines before giving it to them	65%	67%	65%
Patients who reported that their room and bathroom were "Always" clean	74%	75%	74%
Patients who reported that the area around their room was "Always" quiet at night	59%	66%	62%
Patients who reported that YES, they were given information about what to do during their recovery at home	87%	87%	86%
Patients who "Strongly Agree" they understood their care when they left the hospital	54%	53%	52%
Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)	71%	73%	71%
Patients who reported YES, they would definitely recommend the hospital	75%	71%	71%

Clinical Implications

The findings of this study reveals that exchanging report at the bedside results in a dramatic difference in patient satisfaction scores when compared to a unit where change-of-shift report does not involve the patient. The unit that performed bedside report scored over 90% satisfaction in each of the four categories, whereas the unit that did not perform bedside report scored under 30% in each of the four categories.

Patients' satisfaction with their care determines how much a patient will cooperate with their care regimen, whether or not the patient will return to the hospital for care in the future, and is therefore important to healthcare institutions. Hospitals need to maintain high patient satisfaction scores in order to keep patients returning to their institution for all of their healthcare needs. The findings of this research project have determined that change-of-shift report exchanged at the patient's bedside yields significantly high patient satisfaction. To improve patient care hospital-wide, the findings of this study will be conveyed to nursing leadership in hopes that they will implement a new protocol regarding where change-of-shift report is exchanged. To follow up, patient satisfaction scores will be reevaluated hospital-wide within 6 months of implementation of a new shift report protocol.

