Standardizing ICU Nursing Shift Notes

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Introduction, Background & Significance

• **What is handoff?**
  The communication of patient specific information and critical information that is needed by all team members for high quality care

• **Different forms**
  • Verbal, written, bedside, combined, “no changes”
  • Nurses learn inconsistently from clinical instructors, preceptors, peers, etc.

• **Why is it important?**
  • Continuity of care
  • Best utilization of resources
  • Safety
Identified Practice Problem & Purpose

- RNs
- APPs
- MD
- RTs
- PCTs
- Patient

Unintended Omission of data
Literature Review

Review of the literature with the help of trained librarian, resulting in 29 articles from CINAHL, Medline, & the Joanna Briggs Institute

<table>
<thead>
<tr>
<th><strong>Standardizing Handoff in the Literature</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Supports the use of a template (JBI, 2021)</td>
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<tr>
<td>Reduces preventable medical errors &amp; patient risk (Bourne, 2022; da Silva dos Santos, 2018)</td>
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<td>Meets legal documentation requirements (Tucker, 2009)</td>
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<td>Creates a high quality transfer of information (Festilla, 2021)</td>
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<td>Increases interoperability (Festilla, 2021)</td>
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<td>Improves patients’ plans of care (Ahn, 2020; Johnson, 2013)</td>
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<tr>
<td>Increases interdisciplinary communication (Parent, 2018)</td>
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<tr>
<td>EMRs frequently had existing tools (Arsoniadis, 2022)</td>
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</table>
PDSA

Act: Make changes based on findings

Plan: What are we going to do?

Study: What are the results?

Do: Implement the plan
# Feasibility

8 areas of focus for designing feasibility studies by Bowen (2009)

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<tr>
<th>Area</th>
<th>Question</th>
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<tr>
<td>Acceptability</td>
<td>Will a standardized form of handoff meet the need for interdisciplinary hand-off communication for both nurses and providers? (Shah, 2019)</td>
</tr>
<tr>
<td>Demand</td>
<td>Is it likely to be used by nurses to meet the need? (Wang, 2022)</td>
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<tr>
<td>Implementation</td>
<td>How can it be implemented and how will success be defined in this context? (AlAmrani, 2021)</td>
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<td>Practicality</td>
<td>How can we use current resources to meet the need? (Benton, 2020; Arsoniadis, 2022)</td>
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<td>Adaptation</td>
<td>Is there an existing handoff process that could be modified? (Edison, 2022)</td>
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<td>How can it be integrated into existing CTICU nursing practice? (Rhudy, 2022)</td>
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<tr>
<td>Expansion</td>
<td>Can it be designed in a way to be used outside of CTICU? (Seada, 2022)</td>
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<td>Limited Efficacy</td>
<td>Does the new idea show promise of being successful in small, controlled CTICU setting? (Spooner, 2018)</td>
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(Bowen et al., 2009)
Design

Reviewed concern & literature results with CUSP team

Reviewed current nursing notes being written

Collaborated with providers & nurses for content

Consulted with CNS

Cultural Awareness/Patient Centered Care

Time of Shift

Each body system

Utilized EMR capabilities

F2 Option

Patient's Primary Language: @PATIENTLANGUAGE@
Interpreter Needed: @INTERPRETER@

ICU NURSING SHIFT NOTE
Assumed Nursing care - - -
Events: - - -
Neurological: - - -
-Sleep:
-Pain:
-Agitation:
HEENT: - - -
Pulmonary: - - -
Cardiovascular: - - -
Integumentary: - - -
Musculoskeletal: - - -
Gastrointestinal: - - -
Genitourinary: - - -
Endocrine: - - -
Psychosocial: - - -
Gits/Meds: @MEDI-INFUSIONS@ @LDAPRINTGROUPLINK@ @ME@
Implementation

October 2022 – February 2023

Created shareable dot phrase with template

Education on how to access and use, & to discontinue “see flowsheets”

Sought feedback from CTICU team members

Critical Care Council

Intensivist notifies ANM if template was not used to help ensure compliance

March 2023 Launched
Results

March 40%  
April 70%  
May 80%  
June 90%  
July 80%  
August 90%  
September 100%
## Conclusions

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Future Implications

Available for RRH system use
Trend use over time and patient outcomes
Replicate and evaluate in another ICU in RGH
Replicate and evaluate in another RRH Hospital ICU
Questions?


References


