Reinventing the Handoff Process: Bringing Standardized Bedside Report to Perioperative Services

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Background Information: The quality improvement project was implemented in a pediatric ambulatory surgery center after organizational leadership challenged units to improve patient satisfaction. An interdisciplinary unit-based task force was assembled to evaluate areas of improvement. Upon evaluation of current patient satisfaction scores and analysis of handoff, communication between staff and with families were prioritized for this project. The task force decided that the current patient handoff process from Phase I to Phase II recovery would be the main focus for improvements because this is when the family integrated into the patient’s care after the procedure.

Objectives of Project: The project aims included: (1) decrease length of handoff time from admit to Phase II to RN handoff is completed, (2) improve registered nurse (RN) workflow as evidenced by decreased time to first documented RN assessment and improved perceptions of nurse workflow (3) improved patient/family satisfaction.

Process of Implementation:
- **Plan** - The planning step begun when the leadership challenge was given for increasing patient satisfaction. A taskforce was developed and critical analysis of all processes on unit was completed. Standardized form was created with input from key stakeholders. Education and training of all staff was completed.
- **Do** - The six-month pilot period was begun. During this time, when a patient was admitted from Phase I to Phase II recovery, every patient handoff was completed using the standardized protocol at the bedside with the inclusion of the patient/family.
- **Study** - Data was collected and analyzed. Data collected included handoff time, first documented RN assessment, nursing satisfaction and patient satisfaction.
- **Act** - Due to the success of the pilot, the changes were adopted as standard practice on the unit.

Statement of Successful Practice: After implementation, improvements were noted in hand off time (reduction of 30%), increased efficiency in nursing workflow as evidenced by a quicker documented RN assessment (28% faster), nursing satisfaction with workflow (100%) and increased patient satisfaction (11.6% improvement).

Implications for Advancing the Practice of PeriAnesthesia Nursing: The use of standardized bedside report is supported by literature and The Joint Commission’s recommendation for patient handoffs, however, is not widely practiced in the perioperative setting. Integrating standardized bedside report can result in a more efficacious process, with a positive impact on nursing workflow and patient satisfaction.