

Using Process Improvement Strategies to Implement Bedside



MAGNET

ED to ICU Handoff

Carrie K. Buck, MSN, RN, CEN, Julie A. Craze, RN

sentara nurse



Background

Handoff from ED to ICU is often stressful for staff and delays or ineffective handoff can negatively impact the patient. When this process is not coordinated and effective, morbidity and mortality can be negatively impacted. "A structured, patient-centered bedside handoff process can reduce safety risk and promote satisfaction with care through reliable information exchange" (White-Trevino & Dearmon, 2018). Using process improvement strategies can help guide the ED and ICU staff and can work to bring them together to improve perception and outcomes. "Reliability improves with the use of a standardized, patient-centered nurse handoff process. Quality improvement methods were used to promote reliable information exchange during nurse shift handout through the implementation of standardized, patient-centered bedside report process" (White-Trevino & Dearmon, 2018).

Problem

Implementing Bedside ED to ICU handoff will reduce transfer delays and will lead to improved relationships between the ED to ICU staff.

TEAMWORK

9999999999999999999999999

coming together is a beginning keeping together is progress working together is success

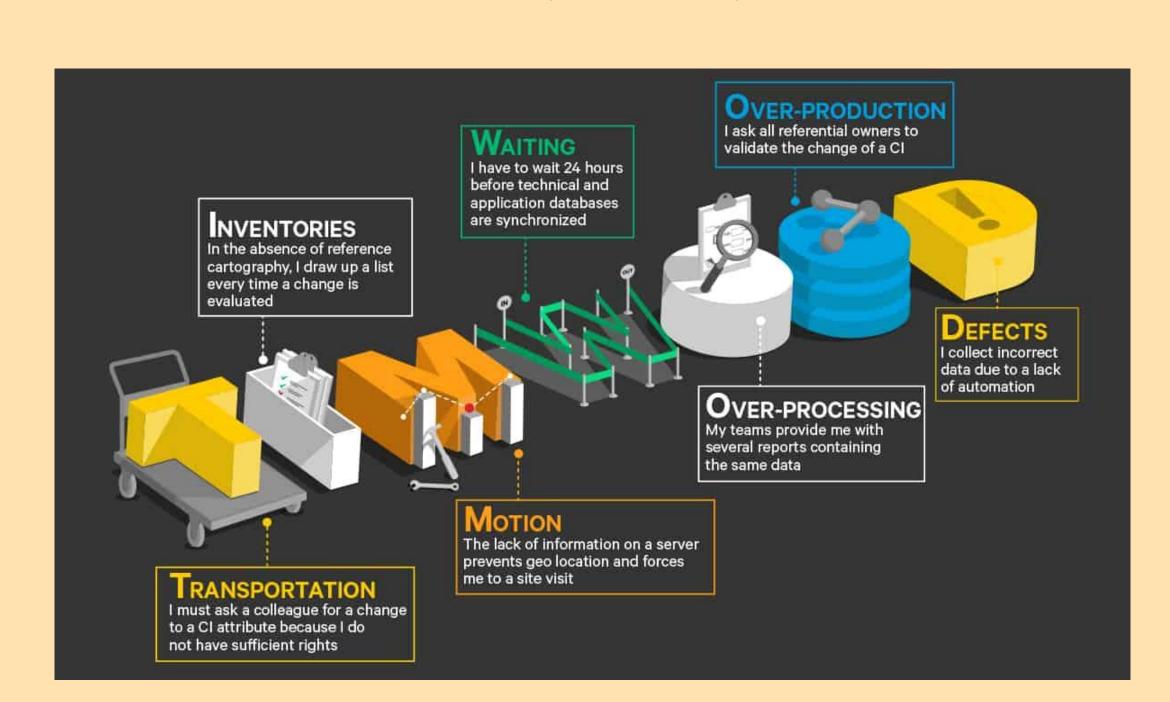
- Henry Ford

Contact Information

Julie Craze, RN Emergency Department Sentara Princess Anne Hospital jacraze1@Sentara.com

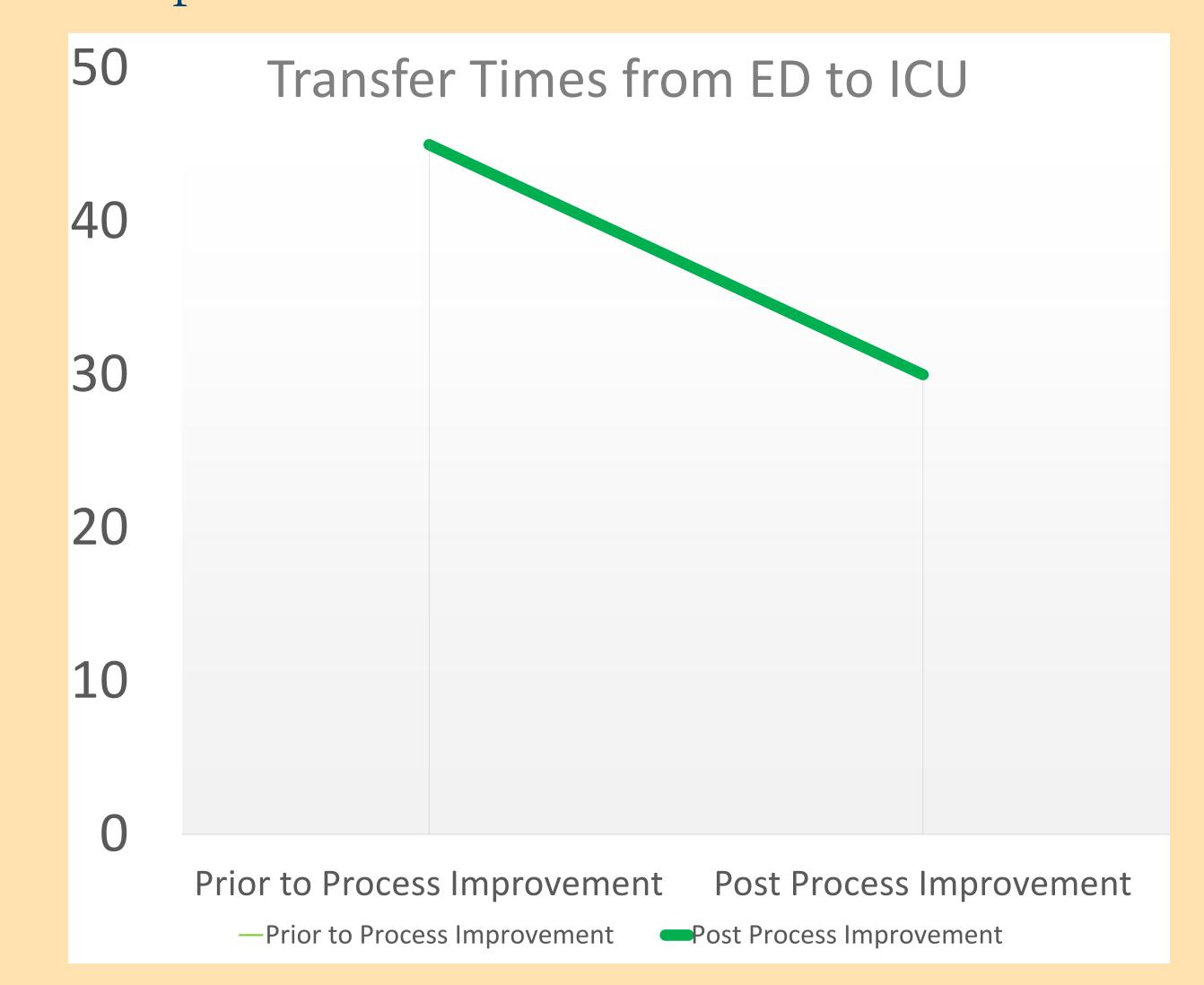
Methodology

A Kaizen event was held where case review, TIMWOOD & probability charts helped the ED and ICU staff map out the prior handoff process (phone called report). Transfer data showed an average time of 45 minutes from ED to ICU preimplementation. In addition, the staff scored the current process on a 0-10 scale in several different areas (pre=6/10). After the process improvement event, the teams worked together to develop an electronic note that is completed prior to transport of an ICU patient & agreed on bedside report in a standardized format (I-PASS).



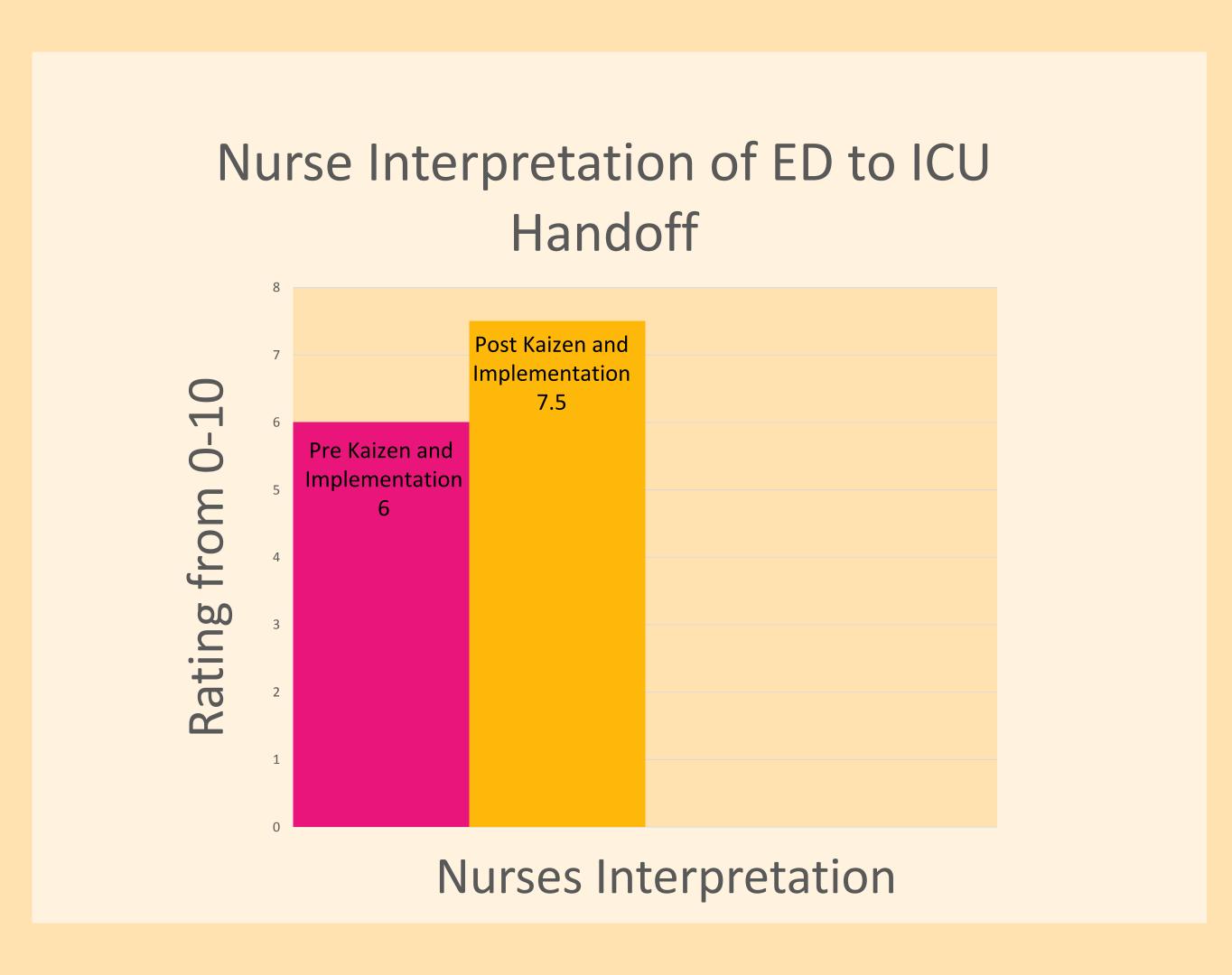
Results

Post-implementation average transfer time is 35 minutes. In addition, the staff scored the process as a 7.5/10 after the process improvement. Both of these results impact our ability to positively deliver patient-centered care.



Conclusions

This project has helped us to create a more effective and more efficient handoff process between the ED and ICU at Sentara Princess Anne Hospital. This project could be easily duplicated in other hospitals that need to improve their handoff process between ED to ICU. We also implemented an ICU Alert process at the same time as the improved handoff process, which may have also positively influenced the results of this project. Using process improvement strategies to implement change in a healthcare setting is recommended, as it promotes objective, strategydriven results.



References

Kaizengoal.co.nz. (2019). [online] Available at: https://kaizengoal.co.nz/wpcontent/uploads/2018/04/Kaizen-TIMWOOD.jpg [Accessed 13 Apr. 2019].

Teamwork coming together is a beginning keeping together is progress working together is success. Henry Ford. (n.d.). Retrieved April 16, 2019, from https://www.askideas.com/105-most-inspiring-work-quotes-andsayings/teamwork-coming-together-is-a-beginning-keeping-together-is-progressworking-together-is-success-henry-ford-2/

White-Trevino, K., & Dearmon, V. (2018). Transitioning Nurse Handoff to the Bedside. Nursing Administration Quarterly, 42(3), 261-268. doi:10.1097/naq.00000000000000298

Additional Kaizen Participants

Ashley T. Caviness DNP, RN, AGCNS-BC, CCRN Joanna Pascua-Colasito, BSN, RN, CCRN Melissa Lynch, BSN, RN, CEN Samantha Giles, BSN, RN, CCRN Teri Diloy, BSN, RN, CEN, CPEN