

Does the Implementation of a Formalized Hand-Off Process for Patients being Referred from Walk-in Care to the Emergency Department Improve Nurses' Satisfaction?

Northern Light Health...

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Background

- Communication is one of the main causes of adverse events in healthcare
- Communication breakdown is found in many different healthcare settings
- Staff members hand off patient information so frequently, they may not realize hand off communication is a high-risk process
- The SBAR (situation, background, assessment, and recommendation) communication tool was developed to improve hand off quality and improve patient safety

Practice Change

To improve nursing satisfaction between Walk-in Care and the Emergency Room (ER) by using a formalized SBAR communication process

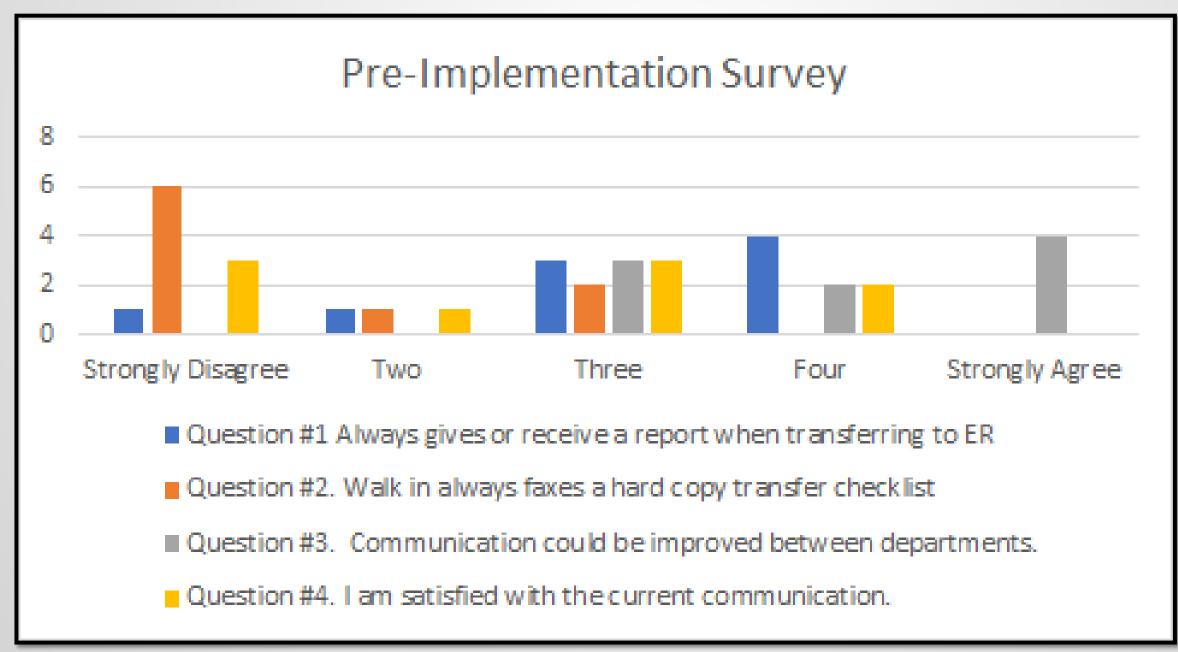
Methods

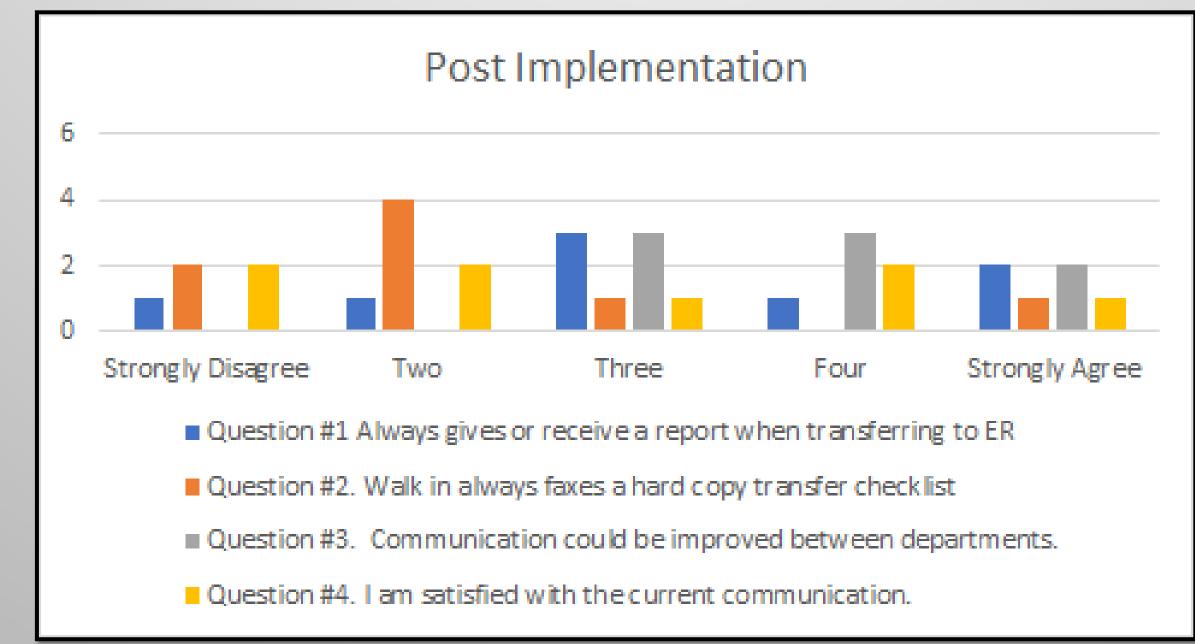
- Nursing satisfaction of communication between Walk-in Care and the ER was assessed before and after the implementation of a formalized SBAR communication process between the two facilities.
- This was done by comparing survey responses of the nursing staff before and after the implementation of the formalized communication process

tiary care hospital. International Journal of Nursing Education, 123-127. Doi: 10.5958/0974-9357.2015.00025.2 mji, H., Baier, R., Gravenstein, S., & Gardner, R. (2014). Improving the quality of care and communication during patient transitions: Best practices for urgent care centers. The Joint Commission

Measures and Results

- Data was collected from NL-MCH Walk-in Care and ER nurses.
- Data was collected via an anonymous survey to assess nursing satisfaction before and after implementing a formalized SBAR communication process for 1 month.
- Question 1: had a 25% increase in people who strongly agreed.
- Question 2: 12.5% in people who strongly agreed.
- Question 3: 19% decrease in people who strongly agreed.
- Question 4: 12.5% increase in people who strongly agreed.





Summary/Discussion

- Our project was the first step in improving the communication between Walk-in Care and the ER.
- It would be useful to have had an additional survey in 6 months as Walk-in care has had a change in staffing. The Walk-in care is now staffed with previous ER nurses that are committed to and understand the importance of providing nurse to nurse report before sending patients to the ER.
- Overall there were 8 participants: 6 Emergency Room Charge Nurses and 2 Walk-in Care nurses that participated in this project.

Barriers:

- At the start of implementation the project had 9 participants, at the end of implementation only 8 participants remained.
- Over the course of implementation, due to COVID-19, there was an intentional decrease in the number of patients sent to the ER from Walk-in care.
- Compliance of implementation from participants. Not all participants from the walk-in care felt it was necessary to call report to the ER charge nurse if a provider to provider report had occurred.

Conclusion

- By using a formalized SBAR report, it was shown to improving nursing satisfaction between departments.
- Questions to consider:
 - O Now that the Walk-in care is staffed with ER nurses, would there be an even greater increase in compliance and nursing satisfaction with communication?