

Bedside Shift Report (Nurses)

Site Applicability

Critical Care Units only

Skill Level:

Basic: within the scope of practice of every RN

Related Documents and Resources:

1. [CPT3100](#): Family Presence (Visitation)
2. [Infection Prevention and Control Manual](#)
3. [Appendix A](#): Reducing the Risk of Transmission for BSR Materials Used at the Patient's Bedside

Clinical Indication:

This guideline applies to all patients admitted to an area where Bedside Shift Report takes place.

Policy

When appropriate, all nurses will conduct bedside shift report at the beginning and end of nursing shifts in respective patient care area

Need to Know:

- Bedside Shift Report (BSR) improves transfer of accountability and responsibility of patients between nurses.
- BSR develops patients' and their families' illness knowledge and improves their engagement in care.
- BSR improves patients' and their families' inclusion as partners in their care and increases their satisfaction and safety
- BSR aligns with Providence Health Care's values regarding patient and family centered care.

PRACTICE GUIDELINE

Equipment & Supplies:

Side table with nursing flowsheet

Medication administration record binder

[Patient and family education pamphlet](#)

Guideline:

- Obtain verbal agreement from the patient before each bedside shift report. Clarify who the patient wishes to be present. Re-affirm agreement every shift.
- Include more explanation of the content covered in BSR at the initial agreement
- Introduce all parties involved, including nurses, patient and family
- Conduct safety checks (2 IDs, IV tubing/fluids/medications, equipment)
- Conduct nursing handover
- Invite patient's and family's participation
- Ask & answer any questions
- Clean side table and clear plastic flowsheet board with approved agent once a shift

Side Table and Nursing Flowsheet

Avoid taking the side table or clear plastic flowsheet board into the patient room if:

- There is confirmed or suspected gastrointestinal or influenza outbreaks. The patient is demonstrating signs and symptoms of gastrointestinal infection including vomiting, diarrhea or C. difficile infection.
- The patient is demonstrating signs and symptoms of a respiratory infection with fever, rash, chronic and productive cough.
- Times during patient care where it is determined the patient environment is exposed to uncontrolled blood or body fluids.

Clean side table and clear plastic flowsheet board with approved agent (e.g. Cavi-Wipe) prior to removing from patient room if:

- The side table and clear plastic flow sheet comes into contact with the patient's immediate environment. This includes the patient's bed, over-bed table, night stand, or equipment that is frequently touched by the patient or healthcare provider while providing direct care.
- The side table and clear plastic flow sheet becomes visibly soiled.

Approved Agents for Cleaning and Disinfection:

- Use an approved cleaning agent (e.g. Cavi-Wipe, Sani-Cloth, Virex-256, Precept or household bleach).

Cleaning and Disinfection Technique:

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- Use gloves as per manufacturer guidelines (see label of cleaning product selected).
- Select a disposable wipe or cloth that is moist.
- Ensure that all surfaces of the side table and any other binders/clipboards have been wiped.
- Ensure that the wipe is leaving moisture on the surface of the objects being cleaned.
- Dispose the wipe and gloves into the regular garbage when wiping is completed.

This statement is based on the IPAC recommendation for shared patient equipment:

Patient Care Equipment (also see [Appendix A](#))

- Do not take extra equipment or unnecessary supplies into the room.
- Dedicate equipment for a single patient whenever possible, e.g. stethoscopes, blood pressure cuffs
- When common use equipment or items that must be shared between patients, ensure adequate cleaning and disinfecting between patients and when visibly soiled
- Avoid placing equipment on patient's bed or commonly touched areas

Expected Outcomes:

- Improved information sharing between nurses.
- Improved information sharing between nurses, patients and families.

Patient Education:

- Explain the reasons for and general process of BSR to patient and family as soon after admission as appropriate, including obtaining their verbal agreement
- Reiterate intention to conduct BSR before every report and confirm patient's agreement
- Provide [Nurse Bedside Shift Report](#) handout during initial discussion and as necessary

References:

1. Davidson, J., Powers, K., Hedayat, K., Tieszen, M., Kon, A., Shepard, E., & Armstrong, D. (2007). Clinical practice guidelines for support of the family in the patient-centered intensive care unit: American College of Critical Care Medicine Task Force 2004-2005. *Critical Care Medicine*, 35(2), 605-622 18p.
2. Infection Prevention and Control (2010). http://phc-connect/programs/infection_control/infection_control_manual/cleaning_disinfection/Pages/default.aspx

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3. Maxson, P. M., Derby, K. M., Wroblewski, D. M., & Foss, D. M. (2012). Bedside nurse-to-nurse handoff promotes patient safety. *Medsurg Nursing*, 21(3), 140-145 6p.
4. Radtke, K. (2013). Improving patient satisfaction with nursing communication using bedside shift report. *Clinical Nurse Specialist: The Journal for Advanced Nursing Practice*, 27(1), 19-25 7p. doi:10.1097/NUR.0b013e3182777011
5. Reinbeck, D. M., & Fitzsimons, V. (2013). Improving the patient experience through bedside shift report. *Nursing Management*, 44(2), 16-17 2p. doi:10.1097/01.NUMA.0000426141.68409.00
6. Sherman, J., Sand-Jecklin, K., & Johnson, J. (2013). Investigating bedside nursing report: a synthesis of the literature. *Med-Surg Matters*, 22(5), 308-318 11p.

Persons/Groups Consulted:

Clinical Nurse Leader
Clinical Nurse Specialist. Cardiology
Director of Professional Practice and Nursing
Nurse Educator, CICU
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Appendix A: Reducing the Risk of Transmission for BSR Materials Used at the Patient's Bedside

Methods to reduce the risk of transmission from contaminated hands and equipment are:

- Hand hygiene before and after patient contact, contaminated equipment contact, and glove use. When documentation is brought to the bedside, it is important to perform hand hygiene between contact with documentation and contact with the patient or their immediate environment.
- Wiping the side table and clear plastic flowsheet board with a disinfectant wipe at the beginning and end of the shift and if becomes visibly soiled or inadvertently comes into contact with the immediate patient environment.