



PACE FORUM: Holland Bloorview Nov 2016

# Partnering with Children and Families to Achieve Bedside Nursing Shift-Handover

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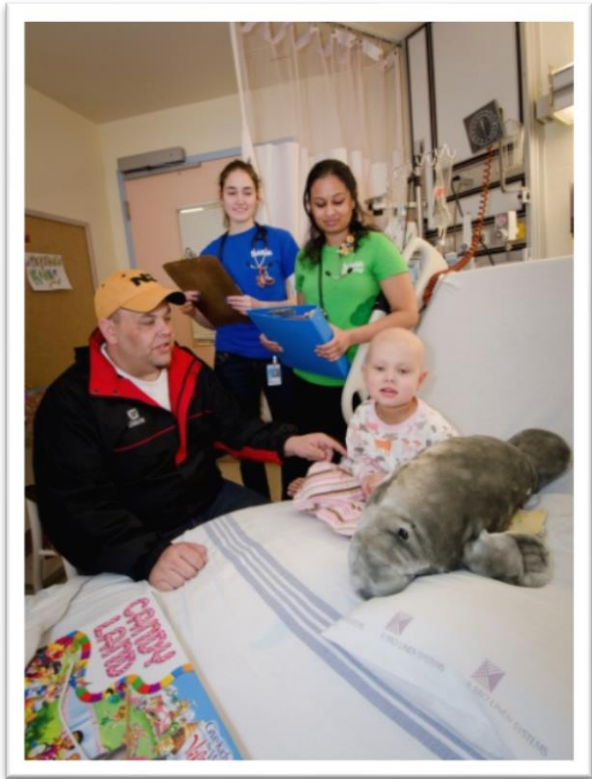
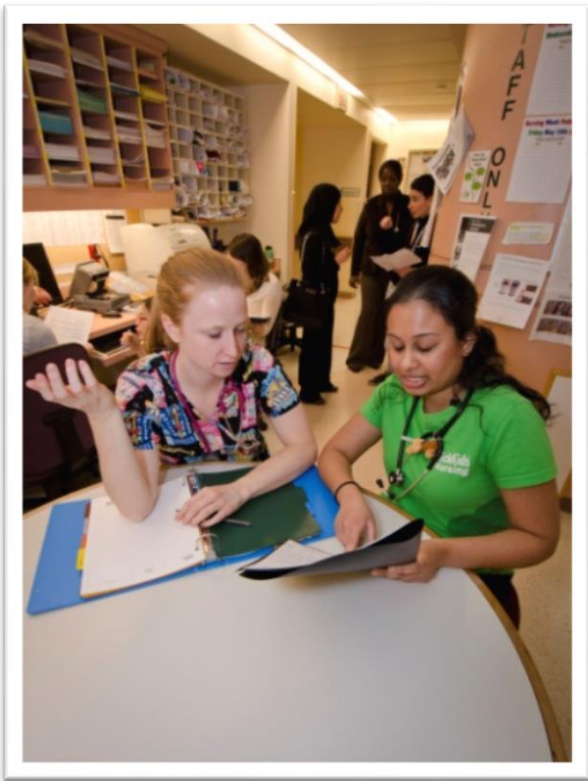
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# What is Nursing Shift Handover?



# How were families engaged in this work?



**1. AAS - (Father of Accountability) Worksheet for Nursing Shift Handover**

| Patient  |  |
|--|--|
| <b>1</b> Reason for Admission                          |  |
| <b>2</b> Isolation Status                              |  |
| <b>3</b> Allergies                                     |  |
| <b>4</b> Weight  | <b>5</b> Height  |
| <b>6</b> Code Status/Alerts                            |  |
| <b>7</b> Vital Signs                                   | <b>8</b> Pain  |
| <b>9</b> Neurological                                  |  |
| <b>10</b> Cardiovascular                               |  |
| <b>11</b> Respiratory                                  |  |
| <b>12</b> GI & GU                                      |  |
| <b>13</b> Skin/MSK                                     |  |
| <b>14</b> Metabolic (e.g., HbA1c, patient preferences) |  |
| <b>15</b> Social / Family Considerations               |  |
| <b>16</b> Patient Engagement                           | 1.   |
| • Child/Family Goals and Priorities                    | 2.   |
| <b>17</b> Action Plans                                 | 3.   |
| • Critical labs & diagnostic                           | 4.   |
| • Pending labs & diagnostic                            | 5.   |
| • Upcoming procedures                                  | 6.   |
| • Discharge Plans/Teaching                             | 7.   |
| <b>18</b> Safety & Situation Awareness assessment      | <input type="checkbox"/> Allergies band <input type="checkbox"/> IV site, flu <input type="checkbox"/> CFC/Pain risk <input type="checkbox"/> None |
| <b>19</b> Synthesis                                    |  |
| • Involving nurse authorities                          |  |
| • Asks questions                                       |  |
| • Confirms key items                                   |  |

**Child and Family Involvement by Nursing Shift Handover**

How do we build an expectation for families who give input to ensure that the most pertinent information is conveyed without interruption?

Interventions during handover are used to ensure that a consistent manner to ensure they understand the reason for holding their questions to the end.

The provided scripting was developed to support implementation on your unit and may be easily customized!

**NURSE SCRIPTING**

**WHEN DO I USE THE SCRIPTING?**

**SETTING EXPECTATIONS**

"Hi mom/dad, we are going to do our nursing/handover now. This is meant to stop your child's name and they will be taking care of you tonight." "To be welcome to give feedback to us right now we welcome your detailed report and want to ensure we communicate all of the information about your child with a reasonable timeframe. Once we finish, feedback from your perspective on what we did and questions regarding your child's care."

"Thank you for information on ongoing topics that need to be addressed in their ongoing quality care to care for your child/family member. We really want to hear your questions and concerns for all you're here and the staff report so that we can address them fully once we have communicated relevant and medical information of your child to ensure their ongoing quality and safety of care."

**RE-DIRECTION**

"Thank you for that information. Do parents, that is an important part of our child's care for us to consider. Let's talk about it a bit more once we finish report."

"Thank you for bringing that to our attention, we'll make sure to address that in our handover."

"I'm really glad you're bringing up these questions/concerns. Do you choose to discuss them fully with us now or during handover?"

"These are very important concerns and questions. I want to make sure that we present them fully and completely for you. We will finish our morning report and then we will make sure to get you the answers."

**STRATEGIES FOR WHEN PARENTS OR FAMILIES ACT OUTSIDE EXPECTATIONS**

"As a commitment to your involvement, handover will be done with your family member present. The staff's priority of Family/Child's needs is to be the Child & Family involvement in Nursing Shift Handover present and by the team as a whole. We are committed to the change in our management to involve a Family member."

**SETTING GOALS AND PLANS**

- "What is one goal for you and your child this shift?"
- "What does not bother? What goal do you have today?"
- "Do you have any questions about what the plan is for today/handover?"

**VOICING SPACE**

The implementation team will create a mechanism for nursing to identify where a patient/concern needs to be taken back away from the bedside. When this is the case, we will ensure a quiet space for nurses to discuss the pertinent information regarding the child and family.

Voicing space might result in a change in care so that the discussion can take place aside to change and CMC so that they are fully aware of situations that did occur or may occur.

**CHILDREN AND FAMILIES AS PARTNERS IN NURSING SHIFT HANDOVER**

**WHEN IS NURSING SHIFT HANDOVER?**

Nursing shift handover happens every morning and evening at \_\_\_\_\_ and usually lasts 5 minutes.

**WHAT ABOUT YOUR PRIVACY?**

Please note, extended family visitors may be asked to leave during nursing shift handover.

**SickKids** Enhancing partnership in care by involving children and families in nursing shift handover at the bedside.



# How was success measured?

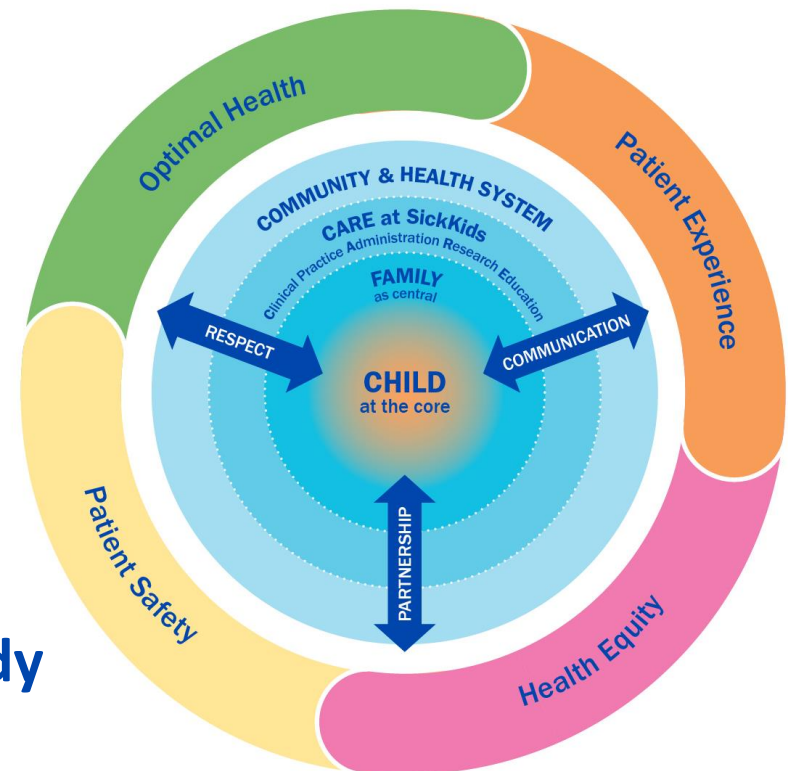
## Data were collected:

- ❖ 3 diverse units
- ❖ baseline & post implementation

## Child & family QIP data:

- ❖ used 'bedside diaries'
- ❖ single & repeated observations

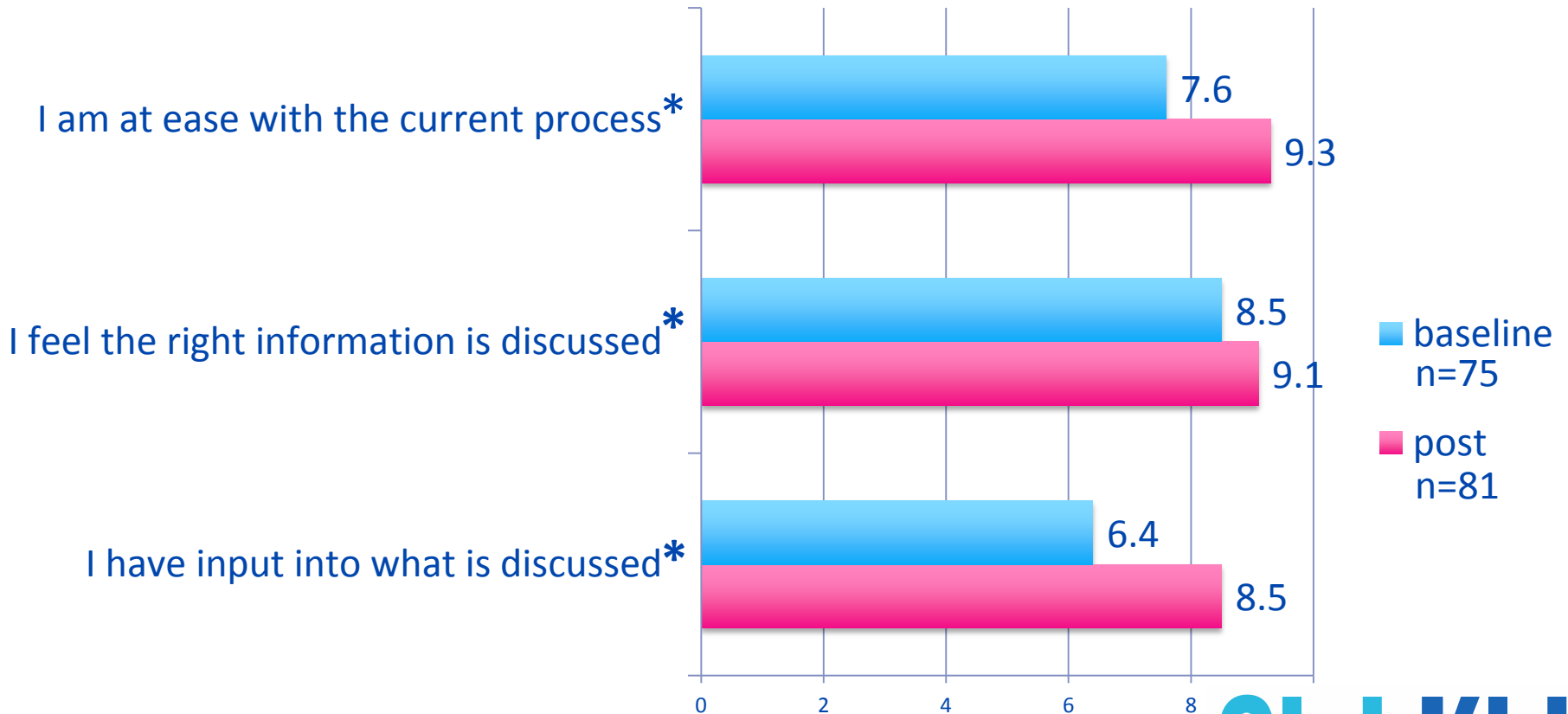
## Qualitative Research- Exploratory Study





# What did families tell you?

## On this unit at nursing shift handover...UNITS COMBINED



**Note.** \* $p < .02$ , results of MANOVA; 10 point agreement scale, with 10 being highest score possible



# ACKNOWLEDGEMENTS

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Thank you!

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