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Effect of Change of Shift Admissions on Patient Outcomes

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Effect of Change of Shift Admissions on Patient Outcomes

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Background

The transition of patients between hospital units occurs after nurses exchange patient health information necessary for the continuation of patient care.

Admissions during nurses' change of shift can create interruptions for nurses and delays in patient care. Furthermore, patients can be overlooked resulting in patient safety incidents.

Purpose

The purpose of this study was to compare timeliness of medication administration, admission assessments and incidence of adverse events between patients admitted during nurses' change of shift and patients admitted during other times.

Methods

- ❖ Design: retrospective comparison study of electronic medical records of patients admitted to Medical Surgical units during nurses' change of shift and other times over a period of 1 year (July 2015 – July 2016).
- ❖ Study was approved by the Institutional Review Board.
- ❖ Setting: Pulmonary, Orthopedic/Neurological, Observation, Bariatrics, and Post-Operative Medical Surgical floors in a community hospital.
- ❖ Sample: 143 electronic medical records were reviewed.
- ❖ Change of shift admissions: 0653 to 0723 and 1853 to 1923.



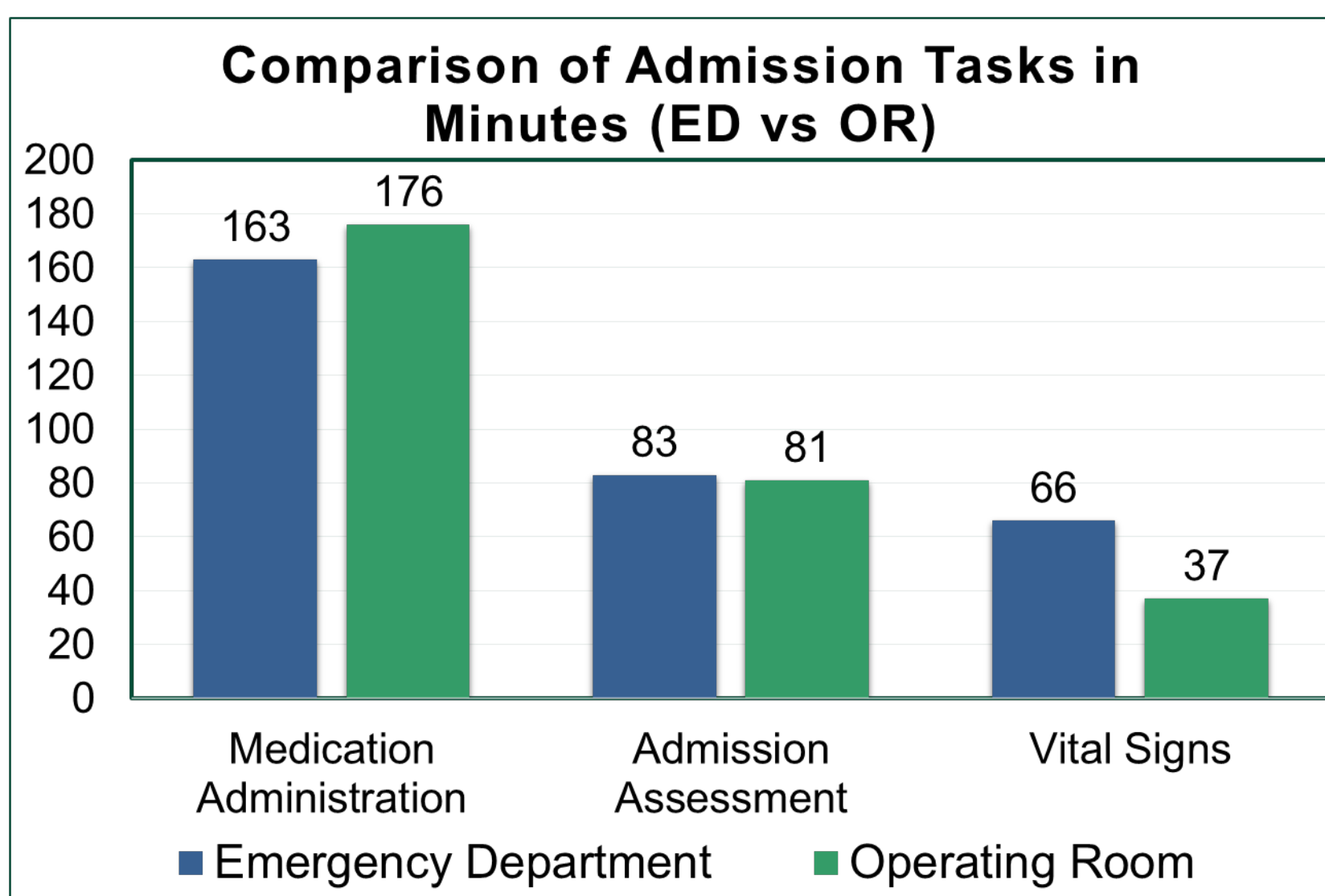
Research

Methods

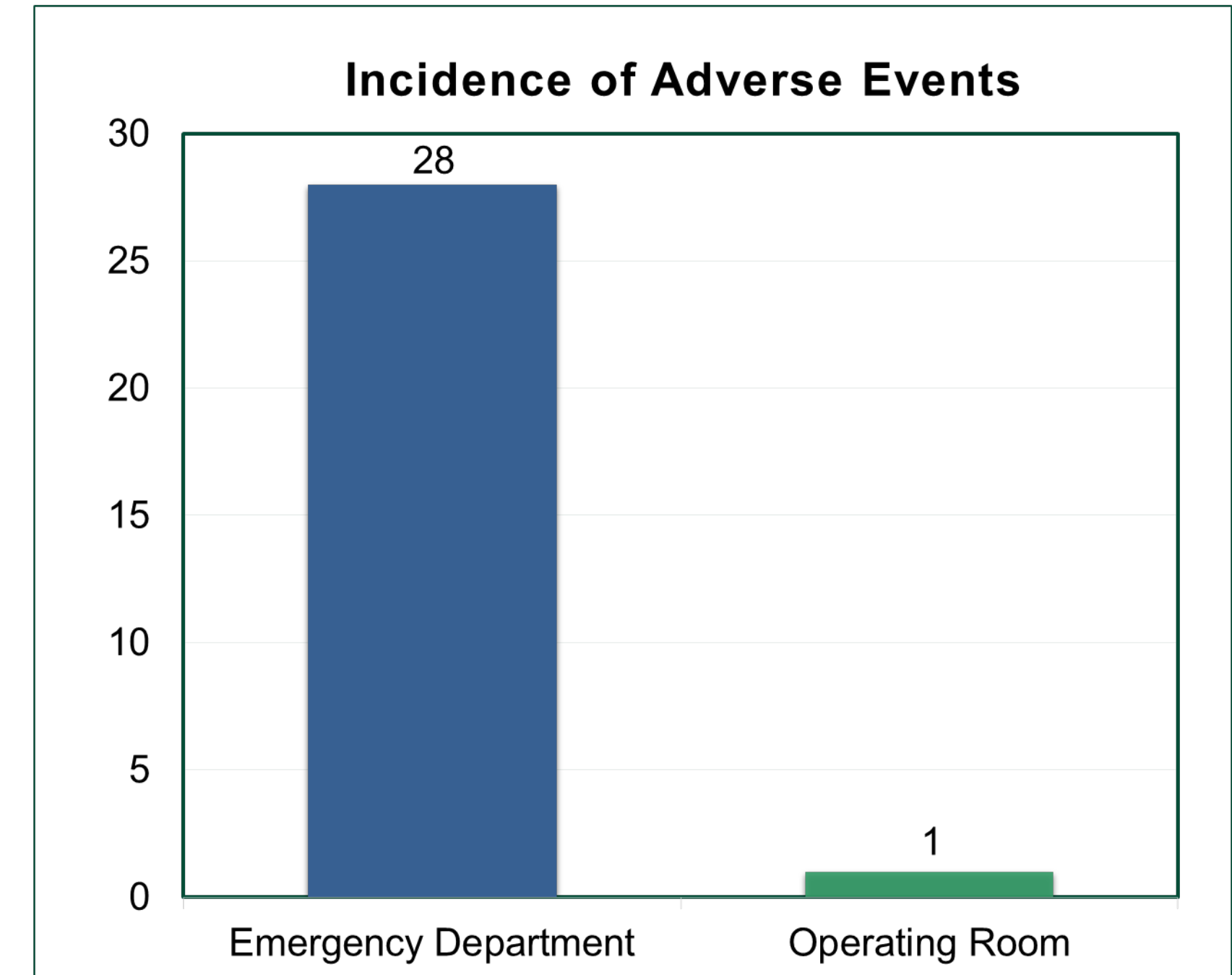
- ❖ Patient outcomes measured:
 - Medications required to be administered within two hours of patient arrival to the floor.
 - Admission assessments done within two hours of patient arrival to the floor.
 - Vital Signs
 - Adverse events occurring within two hours of patient arrival to the floor (code rescue, code blue, falls, bleeding, injuries, changes in level of consciousness, unsafe drops or increases in blood sugar levels and blood pressure).

Results

- ❖ Findings indicated that:
 - No delay in care occurred whether the patient came during change of shift or other times.
 - Out of the 143 patients, 29 adverse events occurred:
 - 57% adverse events occurred during nurses change of shift and 28 events were patients admitted from the Emergency Department (ED).
 - Significant difference ($p < .001$) in the incidence of adverse events between ED and OR admissions.



Results



Implications for Practice

- ❖ Need for a standardized process and forms.
- ❖ Patient handoff at the bedside.
- ❖ Prioritize care for newly admitted patients versus other patients.
- ❖ Consider transferring most patients pre or post nurses change of shift.
- ❖ Better communication and coordination of care between hospital units.

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