

HOW TO GIVE AN END OF SHIFT REPORT



Purpose: to ensure safe continuity of patient care and the delivery of best clinical practices between givers and receivers

The process: There are several types of end of shift hand-offs. They include face-to-face with patient or family, face-to-face verbal report in a designated area, and telephone or video conferencing when face-to-face is not possible. Best practice hand-offs mandate an opportunity for discussion between the giver and receiver of patient information.

3 Steps to a Successful Face-to-Face Verbal Report

1st STEP: Preparing the report

- Check for immediate patient needs informing them that shift report will be occurring soon.
- Check IV sites, fluids, patient concerns.
- Check charts for new orders.
- Identify information to be shared in report.

2nd STEP: The verbal report

SBAR technique is a tool that allows nurses to communicate distinct elements of a patient's condition. It places emphasis on quality care. The SBAR is used for each patient during report. SBAR is an acronym for:

- S** Situation
- B** Background
- A** Assessment
- R** Recommendation

Provide discussion including Q&A.

3rd STEP: Post report

- Monitor and assist where necessary.
- Finalize any last minute documentation.
- Ensure shift change new patient admission policy is adhered to.
- Ensure that all keys/electronic equipment is received by oncoming shift.



Patient safety events are more likely to occur during shift hand-offs! Make sure your patient remains covered during all three steps.

NOTES

