

## Background

In today's healthcare market, we often see care that is fragmented, inefficient, and could potentially harm the patient. As healthcare workers, we want to deliver the best quality care to our patients. There are many disciplines in and out of a patient's room, providing information, often leaving gaps in the care continuum, and leaving the patient with disjointed information. Multidisciplinary rounds is a patient-centered approach that brings multiple members of the care team together to provide safe, efficient, collaborative care to the patient.

## Questions

Will Multidisciplinary patient rounding

- decrease patient length of stay?
- foster collaborative interprofessional relationships among disciplines?

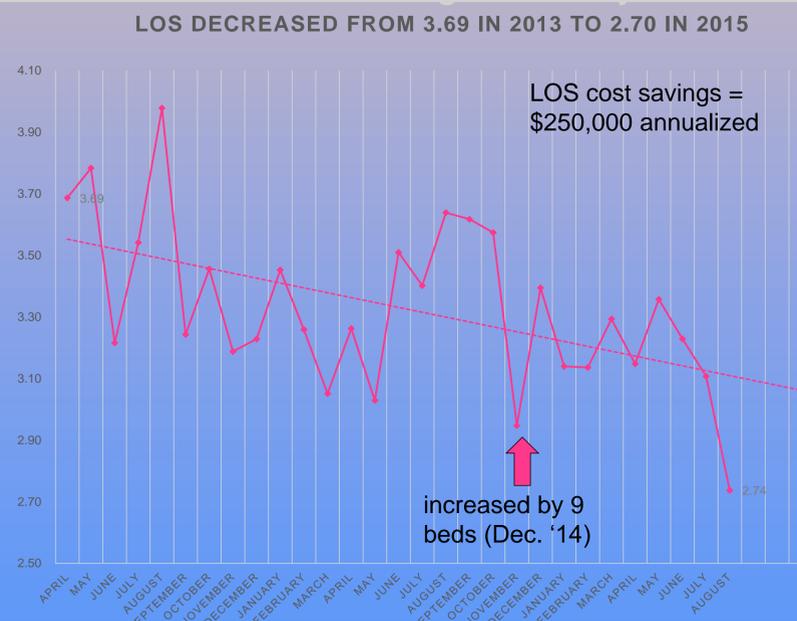


\*COMMUNICATION, COLLABORATION AND CRITICAL THINKING=QUALITY PATIENT OUTCOMES NURSE SURVEY TOOL  
Adapted from: Vazirani, S., Hays, R., Shapiro, M., & Cowan, M. (2005). Effect of a multidisciplinary intervention on communication and collaboration among physicians and nurses. American Journal of Critical Care, 14(1), 71-77.

## Methods

- On March 6, 2013, multidisciplinary patient rounding was set to be conducted every day at 9am.
- Staff was educated on the rounding process.
- The multidisciplinary team is composed of consistent team members: a Hospitalist, Physician Assistant, Charge RN, Registered Nurse, Pharmacist, Care Manager (CM), Social Worker (SW), Physical Therapist, and Dietitian.
- The rounds began outside of the patient's room.
- The team entered the patient's room together.
- The patient was able to participate in his/her plan of care. Since all members of the patient care team were present, a more collaborative plan of care was developed.

## Results: Length of Stay



## Survey Results\*

Questions: Survey; N= 24	Rating Scale					Average
	4 Always	3 Sometimes	2 Rarely	1 Never		
1. Do nurses and physicians share in decision making?	4	3	2	1		3.42
2. Are patients and families included in the rounding process and decision-making?	4	3	2	1		3.54
3. Do members of the healthcare team plan together before making decisions?	4	3	2	1		3.42
4. Is there open communication among the healthcare team in making decisions?	4	3	2	1		3.50
5. I get relevant information on the status of patients from physicians.	5 All of the time	4 Most of the time	3 Some of the time	2 Rarely	1 Never	4.21
6. There are fewer delays in relaying information regarding patient care since the initiation of multidisciplinary rounding.	5 Strongly Agree	4 Agree	3 Neutral	2 Disagree	1 Strongly Disagree	4.17
7. I have good communication with physicians.	5 Strongly Agree	4 Agree	3 Neutral	2 Disagree	1 Strongly Disagree	4.25
8. I enjoy collaborating with physicians.	5 Strongly Agree	4 Agree	3 Neutral	2 Disagree	1 Strongly Disagree	4.29
9. It is easy to ask the physicians questions.	5 Strongly Agree	4 Agree	3 Neutral	2 Disagree	1 Strongly Disagree	4.17
10. Multidisciplinary rounding has enhanced the nurse's knowledge of the patient's overall condition.	5 Strongly Agree	4 Agree	3 Neutral	2 Disagree	1 Strongly Disagree	4.54

## Implications/Opportunities

This rounding process is a strategy that has demonstrated a positive impact on meeting patient needs and improving interprofessional relationships. It would have been more advantageous if pre-survey data was collected before beginning the QI project. The rounds have the potential to impact quality indicators (healthcare associated infections, Falls, Pressure Ulcers). There have been no CAUTI, CLABSI, MRSA on the department thus far in FY2014-15. Other areas that may be impacted by multidisciplinary rounding are adverse drug events (near misses), mobility, and patient satisfaction.



## Discussion

- 24 nurse surveys were returned (66% return rate). Two physicians, 1 Physician Assistant (PA), and 1 pharmacist completed a similar survey on communication and collaboration.
- The physicians, PA, and pharmacist strongly agreed that there was good communication and collaboration with nurses.
- Nurses and physicians believed that since the rounding process began, there has been improved teamwork among disciplines.
- The team expressed that there are fewer delays in relaying information regarding patient care since the initiation of rounding.
- Additionally, since rounding is done at the bedside, the relationships with patients and families have improved and provided an opportunity to address needs and concerns.
- Nurses agreed/strongly agreed (100%) that multidisciplinary rounding enhanced their knowledge of the patient's overall condition; 82% agreed/strongly agreed that there are fewer delays in relaying information regarding patient care.

## Conclusions

Accessibility of the physician on the department has facilitated better interprofessional relationships. The rounds have improved quality, efficiency, and reduced patient days in the hospital.

