Implementing Evidence-Based Interdisciplinary Patient Care Rounds
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Statement of Problem
- Weekly Interdisciplinary Patient Care Rounds (IPCRs) based on two-decade old practice
- Team belief that IPCRs were conducted solely to fulfill regulatory requirements
- Ineffective coordination of care with lack of shared decision-making
- Lack of patient-centered individualized plans of care

Supporting Framework

Outcomes
- Eleven of 13 evidence-informed practices included in final implementation
- Improved work efficiency: fewer interruptions and distractions, no change in rounding time allowed more patient focus
- Use of patient story contributed to a more patient-centered process
- Data Collection in Process: Length of stay, patient and family satisfaction, and care provider satisfaction

Recommendations
- Actual presence of the patient and family during IPCR may further enhance patient-centered care
- Team training using an interprofessional communication skills lab may enhance respect between various professionals and invite additional, active participation from all team members
- Outcome evaluation of the new IPCR process should include comparison of project on clinical outcomes
  - Length of stay
  - Patient satisfaction
  - Care provider satisfaction

Interdisciplinary Patient Care Rounds Revisions

- Eleven of 13 evidence-informed practices included in final implementation
- Improved work efficiency: fewer interruptions and distractions, no change in rounding time allowed more patient focus
- Use of patient story contributed to a more patient-centered process
- Data Collection in Process: Length of stay, patient and family satisfaction, and care provider satisfaction

Project Purpose
Improved IPCRs by identification of evidence based practices and inclusion of interprofessional collaboration and patient-and-family centered care

Methods
- Team consideration of 13 evidence-informed practices for IPCRs
- Review of team centered communication strategies
- Team determination for including input from the patient and family in IPCRs
- 4-week pilot
- Structured observations and appreciative inquiry debriefings
- Real-time incorporation of team feedback during pilot

Pre-Rounding
- Patient Story gathered and input on structured note Sunday night
- Unit charge nurse and unit secretary ensure IPCRs checklist reviewed on Monday morning
- Team members input goals on the electronic structured note
- Unit charge nurse or unit secretary prepares conference room

Gathering the Team
- Pediatric team members paged if pediatric patients on service
- All other team members gather at standardized time of 2:30 pm

Presentation of Information
- Pediatric patients discussed first, then patients in the burn unit, then patients outside of the burn unit
- Electronic structured note and patient photos projected on white-board and workstation on wheels

Flow of Discussion
- Resident physician presents brief patient history
- Bedside nurse presents patient story
- Discussion prompts followed for remainder of discussion

Deciding Goals of Care
- At the conclusion of the discussion each patient’s top care priorities are identified and documented

Documentation of IPCRs
- One team member assigned each week to record IPCRs discussion and goals of care

Let’s talk about your concerns regarding surgery.