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Interprofessional Rounds

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**Project:** Barbara Bush Inpatient - Interprofessional Rounds  
**Last Updated:** 8/21/2017

**Executive Sponsor:** Mark Parker  
**Facilitator:** Haley Pelletier  

**Team Members:** Sarah Thompson, BBI Staff, Suneca Nayak, Stephen Tyzik, Ruth Hanselman

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### Problem/Impact Statement:

Previous to this KPI, Nursing was not included in daily rounding with the physician teams, which led to sub-optimal interdisciplinary communication. This kind of communication is considered “best-practice” at similar hospitals, which has been shown to improve patient and family satisfaction, as well as a reduction in length of stay and readmission rates.

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### Scope:

In scope: All Nursing and Resident Physician staff working within BBI at Maine Medical center  
Out of scope: Other units utilizing Operational Excellence and KPI implementation at Maine medical center

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### Goal/Objective:

100% of the time RNs will be called to AM rounds on Mon/Tues/Wed/Fri and updated on the plan of care Thur/Sat/Sun for all patients covered by the pediatric residents.

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### Baseline Metrics/Current State:

**% of RNs not called to medical staff rounds**

- **Pre KPI:** 0%  
- **16-Mar:** 20%  
- **16-Apr:** 30%  
- **16-May:** 30%  
- **16-Jun:** 30%  
- **16-Jul:** 30%

**Baseline of Care-Team Communication**

- **Attending Physicians**  
- **Nursing Staff**  
- **Resident Physicians**

**Current State:** Nurses (RNs) are not called to provider rounds, as this is not currently an expectation.

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### Root Cause Analysis:

**% of Total: Reasons why RN was not called to medical staff rounds**

- **No "normal" rounds:** 3%  
- **Unrealistic:** 28%  
- **Resident forget:** 20%  
- **Medical Specialty specific:** 6%  
- **No RN Phone # listed:** 6%  
- **Other:** 14%

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### Countermeasures

<table>
<thead>
<tr>
<th>Action</th>
<th>Owner</th>
<th>Due Date</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data collection done by residents (self-reporting)</td>
<td>BBI OpEx Committee</td>
<td>8/18/2016</td>
<td>Completed</td>
</tr>
<tr>
<td>Evaluate for culture change</td>
<td>BBI OpEx Committee</td>
<td>10/19/2016</td>
<td>Completed</td>
</tr>
<tr>
<td>Reached out to chief resident</td>
<td>BBI OpEx Committee</td>
<td>11/7/2016</td>
<td>Completed</td>
</tr>
<tr>
<td>Ensure all members of the team fully understand the process and proactively remind all residents covering the month of December</td>
<td>BBI OpEx Committee</td>
<td>11/30/2016</td>
<td>Completed</td>
</tr>
<tr>
<td>Identify a KPI Sponsor</td>
<td>BBI OpEx Committee</td>
<td>2/2/2017</td>
<td>Completed</td>
</tr>
<tr>
<td>Start monthly resident “welcome letter” with important unit reminders from nursing leadership</td>
<td>BBI OpEx Committee</td>
<td>2/6/2017</td>
<td>Completed</td>
</tr>
<tr>
<td>Rounding audit to gather detail on areas for improvement</td>
<td>BBI OpEx Committee</td>
<td>3/15/2017</td>
<td>Completed</td>
</tr>
<tr>
<td>Institute random audits by BBI OpEx Committee member, in order to ensure the behavior is hard wired. If there appears to be a relapse in behavior, the KPI will be reinstated.</td>
<td>BBI OpEx Committee</td>
<td>N/A</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

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### Outcomes

95% of the time, RNs are called to AM rounds with the medical staff team.

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### Next Steps

- Continue with random audit of RN attendance to AM rounds to confirm this behavior is hard wired  
- With Resident transition, provide expectations for interdisciplinary rounding  
- Nursing leadership and Attending Physicians must work together to further re-enforce this “best practice” measure until it is a consistent part of the care environment