

Implementing and Evaluating a Structured Interprofessional Collaboration: The example of Interprofessional Bedside Rounding

John Dent, MD, MS, MHCM

Genevieve Beard, MS, RNC-OB, CHSE, CNE



Objectives

- Identify key factors in the implementation of an interprofessional bedside rounding (IBR) practice.
- Recognize facilitators and barriers to implementation, evaluation and sustainability of IBR.
- Discuss possible solutions for common problems affecting IBR, extending this to audience participants' experiences with IP implementation.

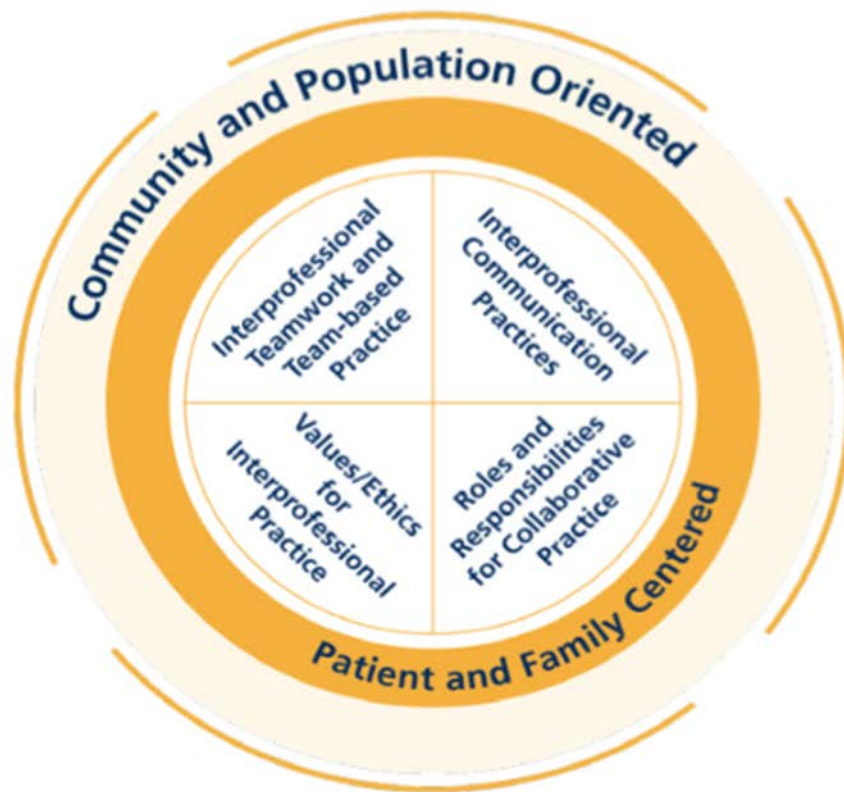
Audience Questions

- What professions are represented in the room?
- Experience with participating in IBR?
- Experience with implementing IBR?
- Experience evaluating an IBR practice?

- What is important that we should discuss today?

Introductions

- John Dent
 - Professor of Medicine and Clinical Professor of Nursing- University of Virginia
 - Rounding with Heart- an IBR initiative on an acute cardiology unit
- Genevieve Beard
 - PhD candidate- University of Virginia School of Nursing and faculty at Virginia Commonwealth University School of Nursing
 - Dissertation focus: Design features of IBR and associations with outcomes



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The Learning Continuum pre-licensure through practice trajectory



Change our inpatient rounding system to better meet the needs of patients and families:

Standardized Communication

Care coordination

Interprofessional model

Rounding with Heart: Alignment



Kotter's 8 Steps to Effective Change

Create a strong sense of urgency

Build a powerful guiding coalition

Create a vision

Communicate the vision over and over and over

Demolish obstacles

Create short term wins

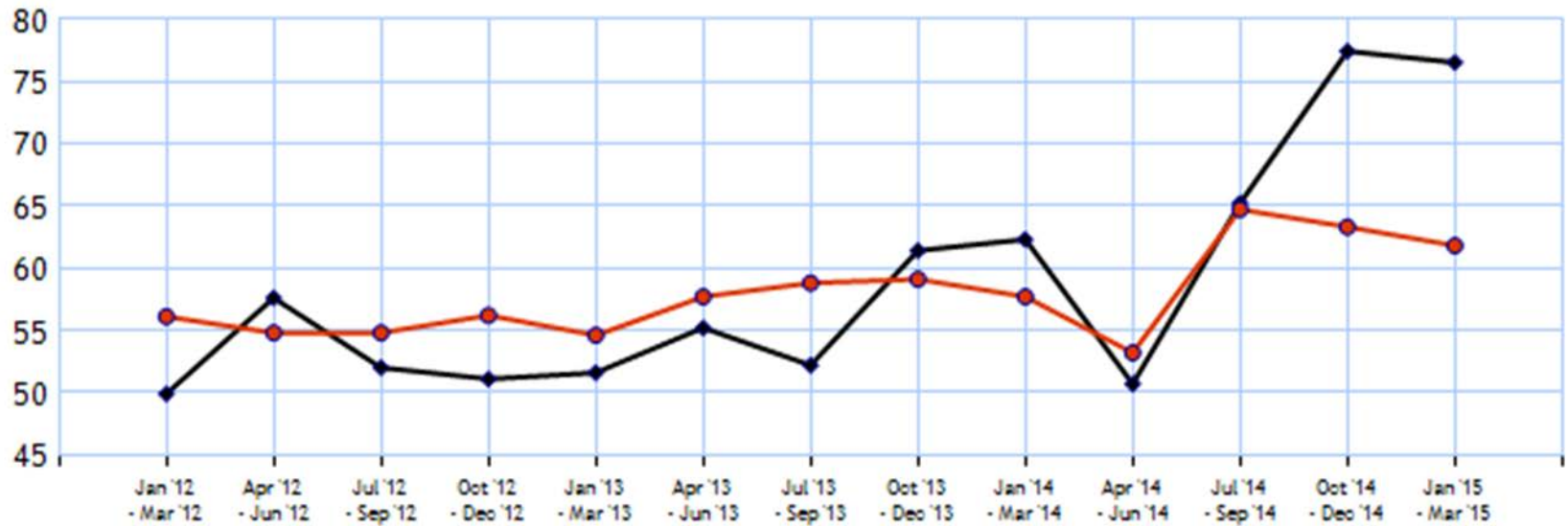
Don't let up

Make change stick

Rounding with Heart: Evaluation Tools

- Patient experience metrics (HCAHPS)
- Staff engagement (Press Ganey)
- Culture of Safety (AHRQ)

Rounding with Heart: Evaluation



4EAST



Inpatient Overall



Rounding with Heart: Evaluation

October 1, 2013 - September 30, 2014

HCAHPS results by Received date - Raw data - % Always Scores	4 East
n	87
Rate Hospital Overall (9's-10's)	71.3
Recommend Hospital	82.6
Comm w/ Nurses	75.5
Nurses treat with courtesy/respect	89.8
Nurses listen carefully to you	67.0
Nurses expl in way you understand	69.8
RESPONSE OF HOSP STAFF	49.0
Call button help soon as wanted it	50.7
Help toileting soon as you wanted	47.4
COMM W/ DOCTORS	79.9
Doctors treat with courtesy/respect	92.0
Doctors listen carefully to you	76.1
Doctors expl in way you understand	71.6
HOSPITAL ENVIRONMENT	52.6
Room and bathroom kept clean	66.3
Area around room quiet at night	38.8
PAIN	58.3
Pain well controlled	42.9
Staff do everything help with pain	73.8
COMM RE MED	58.0
Tell you what new medicine was for	71.2
Staff describe medicine side effect	44.9
DISCHARGE	90.0
Staff talk about help when you left	89.3
Info re symptoms/prob to look for	90.7
CARE TRANSITIONS	48.5
Hospital Staff took Preference into account	42.2
Good understanding managing health	49.4
Understood purpose of taking meds	53.9



October 1, 2014 - September 30, 2015

HCAHPS results by Received date - Raw data - % Always Scores	4 East
n	181
Rate Hospital Overall (9's-10's)	83.4
Recommend Hospital	82.5
Comm w/ Nurses	82.9
Nurses treat with courtesy/respect	89.1
Nurses listen carefully to you	79.8
Nurses expl in way you understand	79.8
RESPONSE OF HOSP STAFF	61.1
Call button help soon as wanted it	58.2
Help toileting soon as you wanted	64.0
COMM W/ DOCTORS	85.5
Doctors treat with courtesy/respect	92.3
Doctors listen carefully to you	81.9
Doctors expl in way you understand	82.4
HOSPITAL ENVIRONMENT	63.3
Room and bathroom kept clean	76.7
Area around room quiet at night	50.0
PAIN	71.3
Pain well controlled	65.4
Staff do everything help with pain	77.2
COMM RE MED	62.2
Tell you what new medicine was for	76.9
Staff describe medicine side effect	47.5
DISCHARGE	92.2
Staff talk about help when you left	89.4
Info re symptoms/prob to look for	95.0
CARE TRANSITIONS	61.0
Hospital Staff took Preference into account	51.4
Good understanding managing health	58.9
Understood purpose of taking meds	72.7

Rounding with Heart: How Does this Work?



PIVOT Survey

I thought the team worked well together

I felt the team was considerate of one another

I was told how the team worked together as a whole

I heard team members use each others' names as they worked together



Rounding with Heart: How Does this Work?

- Patient perceptions of teamwork
 - Patient Insights and Views on Teamwork Survey

Rounding with Heart Group	Traditional Rounding Group	<i>P-value</i>
<i>N</i> = 32	<i>N</i> = 31	---
4.54±0.49	4.17±0.58	<i>p</i> = .006



Improving Patient Experience with Intentional Interprofessional Design and Implementation: The Virtuous Cycle



Nurse
(and staff)



Doctor



Patient
(and family)

Measurement is good, but seeing is believing....



Future Work

- How does this work: Beard's Dissertation Study:
 - 14 inpatient units, associations of design features with perceptions of team collaboration, team effectiveness and patient experience data
- Building on the foundation: Interprofessional Unit of Excellence:
 - Spread the method
 - Simulations
 - Engage learners in IP QI and Patient Safety

Challenges and Solutions

- Sustaining the effort
- Staff perception of time: busy, busy, busy!
- Training and development
- Getting everyone to the table: WIFM?
- Institutional culture
- Keeping it patient-centered
- Learners: key to success, or afterthought?
- How (and on what) to give feedback?
- Finding the right metrics, and SHARING DATA