**NURSE PRE-SURVEY RESULTS**

1. 63% of RNs had awareness of clinician rounding time.
2. 31% of RNs had recognition of rounding clinician. RNs unsure of which clinician would be rounding.
3. 75% of RNs had additional communication with providers. They frequently had to reach out to the clinician by various means (page, phone call, message) to gain clarity of the patient’s plan for the day.

**BASELINE DATA**

**LITERATURE REVIEW**

Standardized interdisciplinary rounding leads to:
- Effective communication
- Improved patient experience
- Improved patient safety
- Less adverse events

**PLAN**

**KEY FINDINGS:**

- Prevention of clinician phone call to individual nurses
- Collaboration with Ortho Clinic RNs for trends on HUC to place rounding information into Ortho Unit message
- Solidifying the change in practice
- Improved patient satisfaction regarding patients wanting to know and understand their rounding times
- Monitoring readmission data

**GLOBAL AIM**

The team aims to improve care plan communication among the nurse, clinician, and patients on the Orthopedic Unit. The process begins with the care team rounding on the first day of admission and ends with the patient and nurses’ clear understanding of the daily plan of care.

**EXPECTED OUTCOMES INCLUDE:**

- Improved nurse and clinician communication regarding patient care plans
- Improved patient satisfaction regarding receiving consistent information
- It is important to work on this now because the patients on the Orthopedic Unit have reported receiving inconsistent information from the care team during their stay on the unit and gaps exist among current rounding processes on the unit and best practices.

**QUALITY IMPROVEMENT TEAM**

**LEADER:** CNI student

**MEMBERS:** Clinical manager, Professional Development Nurse, Quality Improvement Nurse, bedside Registered Nurses & Physician Assistants

**STAFF:**

- RNs who received clinician rounding
- Unsatisfied with provider who called
- Not knowing provider
- Unable to change, process created
- Goal: increase residents awareness of rounding clinician

**FUTURE PLANS:**

- Expand interdisciplinary rounding to other clinician teams to meet benchmark
- For patient experience survey
- Monitor for decrease in patient adverse events
- CLINICIAN POST-SURVEY RESULTS

1. 50% of the time, clinicians were able to contact RNs by phone prior to rounding.
2. 100% of clinicians answer never or occasionally getting additional communications from RN.
3. 100% of clinicians answer they are somewhat confident that rounding with the bedside nurse has created a more comprehensive care plan for care of their patients

**DISCUSSION**

- **STRENGTHS:**
  - 100% response rate with Ortho Trauma Team clinicians
  - Engaged RNs and clinicians

- **CHALLENGES:**
  - Consistent communication
  - Rounding times
  - Solidifying the change in practice

**FUTURE PLANS:**

- Collaborate with Ortho Clinic RNs for trends on follow up phone calls
- Collaborate with Telephone Nurse Advisor RNs for trends in knowledge gaps among the patients
- Monitor for increase in patient discharges by 10 am
- Monitor for decreases in patient LOS
- Monitor readmission data
- Expand interdisciplinary rounding to other clinician teams to meet benchmark for patient experience survey

**REFERENCES & MORE INFORMATION**

**GO-LIVE:** December 1

- Daily targeted rounding with RNs and clinicians
- Frequent communication updates in Ortho Unit Newsletter
- Weekly data updates to communication board
- Posted clinician pictures to increase recognition

**STUDY December 1-February 5**

1. RN Awareness of Rounding Time
2. Recognition of Rounding Clinician
3. Percentage of Additional Communications from RN to Clinician

**SURVEY RESULTS**

**DO**

1. Goal 30% of nurses aware of rounding clinician
2. Result: 80%