**TEAM: STRONG MEMORIAL HOSPITAL - 61200**

61200 is an acute medicine unit that treats chronically ill patients with complex medical and social needs. Coordination around patient’s daily plans, ongoing treatment plan, and discharge needs involves a cohesive multidisciplinary approach to ensure patient safety and satisfaction from admission to discharge. In the summer of 2012, 61200 implemented daily interdisciplinary rounding. The rounding team includes Advance Practice Providers (APP’s), bedside nurses, social work, RN care coordinator, charge RN, Physical Therapy, and the nurse manager.

Our daily interdisciplinary rounds were implemented to address significant issues with communication and unclear roles for task completion around discharge. Although daily rounds had been occurring, they typically only included the APP, charge RN, care coordinator, and social work. They were located off the unit and the bedside nurse would need to communicate his/her patient concerns to the charge RN who would then be responsible for communicating the daily plan, discharge needs, etc back to the bedside RN following rounds. The APP’s were unable to obtain a clear picture of the patient’s overnight needs and this led to frequent calls throughout the day, delayed discharges, and increased cross cover calls in the evening.

In the summer of 2012, a new approach to daily rounds was implemented. Instead of rounding off the unit, the team trialed several different approaches until our current model was born. Over the past three years, daily morning rounds have evolved into a quick, informative, and interdisciplinary approach to patient care. Bedside nurses are able to accurately report on patient’s current status, address questions, and discuss the daily plan with APP’s. Discharges are communicated early in the day and nurses are prepared to deal with needed tasks to ensure timely, safe discharges. Social work needs are discussed with a team approach and documentation needs can be communicated to both APP’s and nursing at the same time.

The 61200 model for daily rounds is now implemented on all APP medicine units and has resulted in a LEAN project to implement afternoon discharge rounds. Since implementing daily morning and afternoon rounds, 61200 has improved from 75% to 90% of all discharges occurring before 4 pm. This results in better throughput for the hospital, allows patients to arrive at their home/ facility earlier in the day, and increased patient satisfaction. In addition, the APP’s have benefited by less non-urgent calls on the evening/night shift, as needs are addressed earlier in the day.

The interdisciplinary approach to daily rounds has been extremely effective in allowing nursing ownership over the daily plan. Nurses feel included in decisions regarding their patients’ ongoing care and can effectively communicate this to patients throughout the day. Another unique aspect of daily rounds is the opportunity for educational moments between the APP’s and nurses. Medicine units often have fresh graduates and daily rounds are a time when nurses feel free to ask questions and APP’s are able to take the time to provide valuable education. Patients feel more informed of their daily and discharge plan and higher quality, safe care is being consistently delivered to a difficult patient population.