Do interdisciplinary rounds increase patient satisfaction on WMC's HCAHP scores, after Interprofessional Bedside Rounding (IBR) tool is added to the current SBAR?

**Background-** Winchester Medical Center (WMC) is a 445-bed non-profit healthcare facility located in northern Virginia serving over 400,000 residents. Patients rate their experience at WMC as 3 out of 5 stars in the categories of satisfaction, willingness to recommend, responsiveness, and communication. Healthcare associated infections are below the standard level. Central-line associated blood infections, catheter-associated urinary tract infections, and C. difficile infections received a rating of considerable achievement. The lowest scores were in the categories of MRSA infections and surgical site infections after colon surgery which received a rating of some achievement which is below the national average

**Problem**: WMC patients show consistent dissatisfaction on Hospital Consumer Assessment of Healthcare Providers (HCAHP) scores related to interdisciplinary communication. Possible reasons may include lack of availability to communicate effectively and/or nurses not fully knowing the patients' current plan of care.

**Methods:** A team charter will first be formed, which will include nurses, physicians, the unit manager, and the director. This team will help to develop the project. The Model for Improvement framework from the Institute for Healthcare will be utilized to help the team to navigate through the steps. The three steps in the model are the theory, variables, and the process measures. The first step is to develop the theory, which will look at the connection between a process change with patient outcomes which are yet to be determined. Next is adding the variable of Interprofessional Bedside Rounding (IBR) tool to the current Situation Background Assessment Recommendation (SBAR), sheet to see if patient outcomes, satisfaction, and engagement improve. The final step is to look at the process measures that consist of HCAHP scores, compliance audit tool, and nurse satisfaction survey A root cause analysis will be used to assess possible reasons that can attributed to why WMC is receiving lower than average HCAHP scores. The Plan-Do-Study-Act (PDSA) tool will then be utilized as an additional tool to assist the applicability of the pilot interventions. The pilot will occur over a four-to-six-week period and will only involve patients whose attending physician is a hospitalist. The interprofessional rounds will take place between the hours of 0800 to 1100, depending on the availability of the physician. The physician will print their patient list, which contains the nurses updated phone number. The physician will than contact the nurse who will meet the physician at the patient's room. The nurse will be prepared to address the current plan-of-care for the patient using the interventions. The brief meeting will last approximately 3-5 minutes to allow the nurse to provide care to the other patients Interventions: Nurses and hospital physicians will participate in morning rounds using an Interprofessional Bedside Rounding (IBR) tool, which is an addition to the current SBAR. The white board, in the patients' room, will be utilized with daily updated plan of the day from the IBR tool. Communication, collaboration, and critical thinking nurse survey tool will be used to assess the nurses on how they feel about communication with physicians.

**Results:** The pilot has not begun. The results are not currently available.

**Implications:** This pilot has the potential to impact patient and nurse satisfaction rates. Medicare and Medicaid services use patient satisfaction scores when compensating healthcare facilities for the care that they provide. Consistent dissatisfaction on HCAHP scores can impact WMC financially. HCAHP patient satisfaction scores have a pivotal part in how hospitals get

reimbursed through the Hospital Value-Based Purchasing Program. In this program, the higher the hospitals reimbursements the higher the financial gain.