Rounding with Teams: Evaluation of Interprofessional Collaborative Practice
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Study Background
Over the past 25 years, much attention has been placed on how interprofessional teams can improve the quality of care. Improved teamwork is now a near-universal goal in health care. This HRSA funded study (Grant U77HP28853; “Nurse Education, Practice, Quality, and Retention Interprofessional Collaborative Practice”), recognizes patients as members of the interprofessional team, as suggested by Reeves et al. (2011) and seeks to improve health outcomes of vulnerable acute care patients through an academic partnership.

Specific Grant Aims include: Improving access to safe quality care by establishing an academic-service partnership, Increasing the numbers of nurses, nurse leaders, other health professionals, and students delivering interprofessional collaborative care while strengthening the capacity for sustained and replicable interprofessional collaboration; Engaging prepared nurse leaders to facilitate team building opportunities.

Methodology

The Quality Health Outcomes Model (QHOM) suggests that teams with IPEC (interprofessional education of collaboration) can improve patient outcomes.

Observations
• 5 Researchers (in pairs) conducted a prepared observation instrument using the 5 established IPEC core competencies
• A total of 28 observations were conducted in 14 observation days spanning over a two-month period (April and May).
• The instrument asked observers to evaluate and rate the teams using a Likert Scale (1=Never, 2=Rarely, 3=Occasionally, 4=Mostly, 5=Always).

Patient Evaluations
• After rounds, the Project Manager visited each patient/families (76 total) to provide him or her an opportunity to evaluate their care teams’ interprofessional teamwork.
• Data was collected via Qualtrics on a tablet device.
• 5 questions representing the same core competencies and Likert scale used in the observer instrument with an opportunity for comments at the end.

Quantitative Results
• Both researchers and patients/family members rated the medical teams’ teamwork skills highly (range 4.35-4.85).
• Overall, teams mostly or always exhibited the established core competencies for interprofessional teamwork and collaboration.
• The quantitative results show very positive displays of teamwork; however, qualitative comment opportunities exposes more variation in teamwork behaviors.

Core Competencies Observation Item Items Median Mean
Values and Ethics
1. Each member of the team appears to value and respect the opinions of other members 5 4.62
2. Each member of the team appears to respect the dignity of patients and maintains their confidentiality 5 4.40
3. Each member of the team appears to act with honesty and integrity towards team and patient/families 5 4.85
Roles and Responsibilities
1. Each member of the team seems to know who to consult for assistance when needed and appropriately utilizes team’s resources 5.00 4.62
Interprofessional Communication
1. Team members appear to listen actively to one another and encourage others’ ideas and opinions 4.5 4.35
2. Team communicates together and with patient/family in an easily understandable manner 5 4.50
3. Team members express knowledge and opinions to others with confidence, clarity, and respectful language 5 4.54
Team & Teamwork/Patient-Centeredness
1. Team members work cooperatively with the entire team (including patients) 5 4.48
2. Team members use available evidence to inform effective teamwork and team-based practice 5 4.76
3. Each member of the team seems to respect patients’ wishes about their care and places patient interests at the center of care delivery 5 4.76

Patient Evaluations of Teamwork (N=76 patients surveyed)

Core Competencies Survey Questions Median Mean
Values and Ethics
Each member of the team appears to value and respect the opinions of other members 5 4.46
Role and Responsibilities
Each member of the team seems prepared to discuss patient’s current health using his/her professional knowledge 5 4.49
Interprofessional Communication
Team members appear to listen to one another 5 4.57
Teams & Teamwork
Team members engage in friendly interaction with one another 5 4.61
Patient-Centeredness
Each member of my team seems to respect my wishes about my care 5 4.46

Qualitative Results: Thematic Analysis of Comments

Room for Improvement
• Patient comments by competency (53 total):
  • Values and Ethics
    — Issues with confidentiality/privacy
    — Respecting/value full teams’ opinions
  • Roles and Responsibility
    — Role breakdown (confusion or unpreparedness)
    — Full team not involved: RNs not present or speaking up, silos, disinterest
  • Interprofessional Communication
    — Taking over each other/patient, side conversations, not listening
    — Other ideas not encouraged, poor engagement
  • Teams and Teamwork
    — Little nurse involvement
    — Inefficiency

Emergent Theme: Critical Role of Leadership in Facilitating Teamwork and Engagement
• When attending announced rounds and actively solicited participation, members were more engaged.
• If not, conversations were dominated by assertive and experienced members

Takeaways/Other Findings:
• Announcement of Teams on the unit for rounding is imperative for nurse (full team) involvement.
• Qualitative data for Teams and Teamwork (most positive comments from patients) was consistent with high ratings in both quantitative data sets.
• High patient census and low staffing also affected teamwork.
• OR teams showed exemplary teamwork skills including active listening, knowing roles, and initiative taking.

Conclusion and Implications
• Overall, the major aspects of teamwork are being exercised.
• This study shows the value of engaging patient perspective in research examining interprofessional teamwork.
• Variations in teams indicated the importance of leadership in facilitating teamwork.
• Emphasis should be placed on announcing rounds to increase nurse involvement.
• Patient perspectives insist more communication efforts be made between units when patients are transferred or shifts change.
• A culture of teamwork should be embedded by educating new hires and existing employees of all disciplines, including leadership positions.
• Exemplary teamwork seen in OR teams mimics existing interprofessional literature. Interprofessional teams should study their example to improve.