An International Perspective on Interprofessional Rounds

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OBJECTIVES

• To review the current data on rounds
• To broaden our perspectives on rounds with data from an international survey
HOW THIS ALL STARTED...

Patient plan of care
1. Main problem discussed
2. Diagnostic plan discussed
3. Provisional goal formulated
4. Long-term therapeutic items (>16 h) discussed
5. Greatest patient risk discussed

Process
6. Expectations made clear by consultants
7. Input of junior physicians encouraged
8. Input of nurses encouraged
9. Summary given
10. It is clear who is responsible for performing tasks
WHAT DO WE WANT FROM ROUNDS?
TABLE 4. Provider Perception of Family Presence During Family-Centered Rounds

<table>
<thead>
<tr>
<th>Survey Responses</th>
<th>Physicians, n = 271 (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Nurses, n = 64 (%)</td>
</tr>
<tr>
<td>Families provided pertinent information</td>
<td>34 (53)</td>
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</tbody>
</table>
10-15 interruptions/h
INTERNATIONAL SURVEY OF ROUNding PRACTICES

• Louise Rose
• Steve Webb
• Jean-Louis Vincent
• Mark Mikkelsen
• Ruxandra Pinto
• Jorge Salluh
• And many, many, many others!
• 2405 respondents
• 62% staff intensivists
• 15% RNs
• 84% academic centers
• 48% ICUs > 20 beds
• 92% ”closed” units
EVIDENCE 1. ROUNDS IMPROVE QUALITY OF CARE

**Structure, Process, and Annual ICU Mortality Across 69 Centers: United States Critical Illness and Injury Trials Group Critical Illness Outcomes Study**

Rounding practices

Daily plan of care review

\[-5.8 (-10.0 \text{ to } -1.6) \quad < 0.01\]

**The Effect of Multidisciplinary Care Teams on Intensive Care Unit Mortality**

<table>
<thead>
<tr>
<th>Intensity of Care</th>
<th>Odds Ratio (95% CI)</th>
<th>Significance</th>
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<tbody>
<tr>
<td>High intensity + multidisciplinary care</td>
<td>0.78 (0.68-0.89)</td>
<td>&lt; .001</td>
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**The Association Between Daytime Intensivist Physician Staffing and Mortality in the Context of Other ICU Organizational Practices: A Multicenter Cohort Study**

Interprofessional rounds alone

\[0.70 (0.48-1.02) \quad 0.06\]
HOW MANY RESPONDENTS HAVE ROUNDS?

- All: 73%
- North America: 97%
- Middle East: 92%
- Europe: 82%
- South Asia: 75%
- Sub-Saharan Africa: 66%
- Latin America: 61%
- Asia / Pacific: 53%
EVIDENCE 2. ROUNDS IS TEAMWORK
“So I think rounds again build trust and the community. I think the trust – the trust level for us has been very high, because we felt that we had been treated honestly and with great compassion.”
EVIDENCE 4. ROUNDED TOOLS IMPROVE ROUNDS

- CHECKLISTS
- PROMPTS
- DAILY GOALS
- DEFINE ROLES
- DESIGNATE A WRITER
- CREATE SCRIPTS
- ...
ARE THERE INCIDENTS RELATED TO ROUNDS?

- FAMILY: 20%
- DELAYS IN DECISIONS: 22%
DO ROUNDS IMPROVE CARE?

- **DEFINE PLAN:** 73%
- **DEFINE GOALS:** 68%
- **CLARIFY DIAGNOSIS:** 56%

- 92% ALL
- 97% NORTH AMERICA
- 91% SOUTH ASIA
- 90% EUROPE
- 90% MIDDLE EAST
- 89% LATIN AMERICA
- 88% ASIA / PACIFIC
- 82% SUB-SAHARAN AFRICA
Trainee SATISFACTION

Trainee HEARD

North America

Latin America