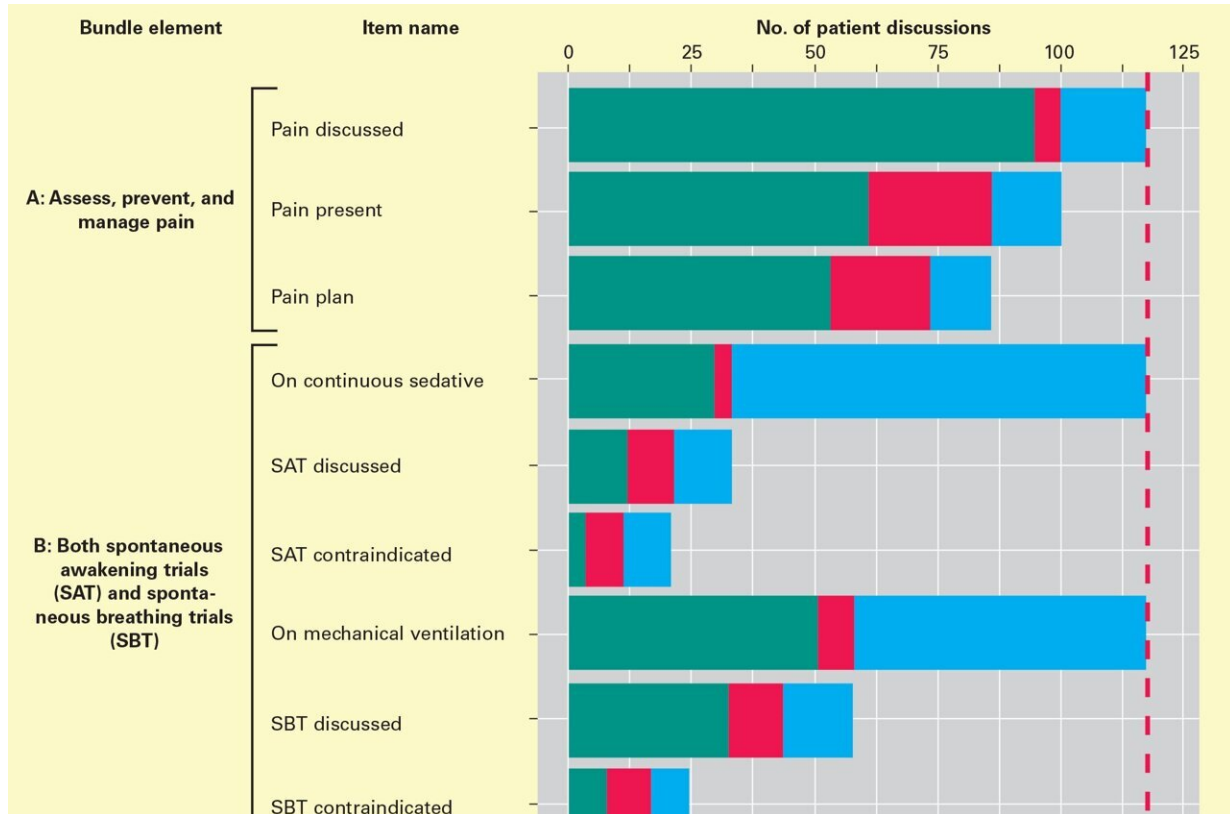


# Checklist prompters support ICU rounds

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Distribution of responses from the 2 nurses who used the assessment tool when observing 118 patient discussions during multidisciplinary rounds. Items have varying numbers of discussions because the assessment tool included conditional branching (eg, skip “pain present” if pain discussed = No). Credit: *American Journal of Critical Care* (2023). DOI: 10.4037/ajcc2023755

Rounding checklists can help hospital care teams improve patient

outcomes, and new research points to the potential for patient-specific checklists as a valid way to effectively translate the latest evidence into clinical practice.

These checklists can be helpful tools during daily rounds when multidisciplinary members of the patient care team convene to discuss each patient's status and care plan. If too complex or generic, the checklists may instead become a burden, taking up valuable time with minimal impact.

One way to customize rounding checklists is to have an individual serve as a checklist prompter, listening to the conversation, eliminating items as they are addressed and reminding the team to consider any remaining elements that should be discussed. These customized approaches assume that a prompter is a reliable way to confirm whether each checklist element is addressed.

"Measuring Performance on the ABCDEF Bundle During Interprofessional Rounds via a Nurse-Based Assessment Tool" found that a single trained observer serving as a checklist prompter can reliably assess whether rounding discussions among the multidisciplinary patient care team addressed elements of the ABCDEF bundle. The evidence-based bundle includes various elements related to pain, agitation, delirium, ventilator care and family engagement. The study is published in *American Journal of Critical Care (AJCC)*.

Researchers from the University of Pittsburgh, Pennsylvania, and other institutions conducted the study at two intensive care units (ICUs) at UPMC, a tertiary care medical center that is an academic affiliate of the university.

The team developed a paper-based assessment tool with a series of Yes/No items related to the ABCDEF bundle, allowing a nurse observer

to simply circle whether an element had been addressed during rounds.

Two nurses performed in-person observations of multidisciplinary morning rounds on 15 observation days in the fall of 2021. Most rounding discussions occurred in the hallway rather than the patient rooms, due to institutional norms and the presence of COVID-19. The observers listened independently only to the rounding team's discussions, without looking at the patient's electronic health record or looking for visual cues from the patient's room.

In total, 53 different patients were observed, with 33 of them receiving invasive mechanical ventilation. Because ICU admissions often last for multiple days, discussions often addressed the same patient over different days. The nurse observers documented 118 patient discussions, and their dually observed discussions are the basis for calculating reliability and agreement.

"Checklists are frequently used as a strategy for increasing adoption of the ABCDEF bundle, and our research has several important implications for [performance improvement](#) and quality measurement in the ICU," said lead author Andrew J. King, Ph.D., research assistant professor of critical care medicine at the University of Pittsburgh School of Medicine.

The results indicate that nurses can identify when a rounding checklist element has been addressed and, therefore, might not need to be repeated during a readout of the checklist. This added flexibility enables a shorter, patient-specific checklist, which could streamline workflows.

In addition to empowering clinicians to customize checklists for each patient, the study shows that critical care nurses are ideal candidates to be independent checklist prompters during rounds.

The researchers also conclude that the assessment tool created for the study could serve as the basis for occasional strategic measurement of team performance, especially during [emergency response](#), shift handoffs and other times when team communication is essential.

**More information:** Andrew J. King et al, Measuring Performance on the ABCDEF Bundle During Interprofessional Rounds via a Nurse-Based Assessment Tool, *American Journal of Critical Care* (2023). [DOI: 10.4037/ajcc2023755](#)

Provided by University of Pittsburgh

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