



Service Priorities and Programmes
Electronic Presentations

Convention ID: 251

Submitting author: Mrs S C LI

Post title: Advanced Practice Nurse, PYNEH, HKEC

**Patient Care Management Round in Intensive Care Unit – A Team Journey
Towards Effective Communication And Enhancing Quality Patient Care**

Li SC(1), Wong CY(1), Kwan YF(1), So HM(1), Lau L(1), Yan WW(1)

(1)Department of Intensive Care, Pamela Youde Nethersole Eastern Hospital

Keywords:

Patient Care Management Round

Effective Communication

Introduction

Regular nurses round with inputs from different nurse ranks have been identified as positively influencing patient care and potentially improving patient outcomes. Patient Care Management Round (Nursing)-PCMR(N) was introduced in November 2015 to provide a platform for effective communication.

Objectives

1.To provide nurses from all levels for reviewing and sharing of patient care management. 2.To appraise good practice and identify areas for improvement. 3.To speed up problem-solving through direct communication between all levels of nurses.

Methodology

The PCMR(N) is scheduled twice a month. Each patient care review takes about 10 minutes. The team composes of Department Operations Manager, Nurse Consultant, Ward Manager, Nurse Specialist (NS), Shift in-charge and the selected case nurse. Other nurses are encouraged to participate. Shift in-charge selected four patients in PM shift of the date before in initial phase. Case nurse discusses patient care management and related nursing care. During the round, nurses are encouraged to voice out difficulties and suggestions for improvement. Lastly, a summary report is prepared with highlights on good practice, discussion points, suggestions and recommendations. NS shares the reports with nurses at monthly department nurse meetings.

Result

Till December 2017, a total of 35 PCMR(N) were conducted. Feedbacks and comments were collected two months after implementation. Nurses' comments included "more understanding on patient's progress and such discussion aroused their critical thinking", "it was stressful to speak in front of the seniors", "increased workload to prepare the presentation". Addressing their feedbacks and comments, the approach was modified to reduce stress and promote participation. Shift in-charge selects cases in the same shift. Case nurses were appreciated on focused patient care. Among the PCMR(N), 102 patients care management were reviewed and 68

nurses (74%, 68/92) participated as case nurses. Another 54 nurses joined in the discussion. Nurses were appraised on good practice such as removal of physical restraint promptly, patients were cared in comfortable position and tidy bed environment. Twenty-one patient care related issues raised by frontline nurses were addressed and followed up by nurse management team promptly. Conclusion: PCMR(N) fosters effective communication within the whole nursing team. Frontline nurses are appraised and good practices are recognized instantly. Through patient care discussion and clinical bedside coaching, nurses' competence on application of knowledge and skills can further be enhanced.