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Improve Patient-Care Provider Interactions and Shortage of Staff during Covid 19 by Implementing Person-Center Proposal Daily Round

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ABSTRACT

Objective: evaluate the improvement of Patient – Care provider interactions by implementing a person – center proposal daily round ensured by trained non-medical staff for patients admitted in wards.

Design: prospective comparative study, using check list extracted from person center care and data was collected from a third-party survey approved in Saudi Arabia health care since 2019.

Setting: Wadi Al Dawasir region, Saudi Arabia.

Population: The study period (July 2020 to July 2021). The person center proposal daily round was started as a proactive measure to improve the patient-care provider interaction after the decrease of patient satisfaction in the third-party survey data. We include all admitted inpatient wards (231 patients) except critical area and COVID - 19 units after pandemic.

Main outcome measures: we compare Patient satisfaction about sleeping, level of noise in and around room, pain controlled, Promptness in responding to the call button, Instruction given about how to care at home and Staff effort to include the patient in decisions about his treatment before and during the person center proposal round.

Results: the overall trajectory of patient satisfaction is increased according to the third-party survey upon implementation of the round. In the third quarter 2020 we remark increase of satisfaction about sleep from (85%) to (92.85%) in the third quarter 2021. the same improvement is seen in the others parameters as pain-controlled satisfaction (from 81.25% to 87.5%), promptness in responding to the call button (from 79.54% to 86), instruction given about how to care at home (from 88% to 89.86%) and staff effort to include patient in decision about his treatment (from 80.81% to 88% of the third quarter 2021)

Conclusion: When proposal round happens well it considered as incredible tool to improve communication between nurses' staff who are in shortage at the unit and admitted patients

KEYWORDS: Propsal Person Center Daily Round, shortage of staff, patient –care provider interactions.

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INTRODUCTION

Healthcare workers in the midst of the unprecedented covid - 19 crisis, face challenges to treat patients with COVID -19, reduce the spread of infection among other healthcare workers continue to provide care of non-COVID-19 patients in hospital and to maintain their personal responsibilities including caring for their families and themselves. Since patient-first and Person-Centred care are included in our

hospital's strategy as core values, the service utilizes the role of a partner rather than a passive recipient of care.

Hospitals that perform targeted rounding will inevitably discover problems or areas for improvement during the process (1). Rounding tools help the hospital not only ensure that these issues are corrected efficiently, but also that the data can be tracked over time to improve the process in the future (2).

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Research on using rounding as a tool to improve the patient journey has shown that compassionate care starts with compassionate people and patients benefit from compassionate care.

After seven months of pandemic and due to shortage of staff we found increased of incident reports by staff about patients behaviors and at same time decreased in patient experience outcome for the 2nd quarter 2020 as per third party survey hospital reports. All of these factors indicated that there is a gap between patient and their care provider.

Our strategy was to implement a new daily round of the inpatient proposal center through trained staff using a designated checklist including questions for patients about their hospital experience and demands as well as the problems experienced by the nurses. Then, on a daily basis they report to the hospital's decision-makers who analyze the problems and develop solutions.

METHOD

After 7 months on COVID -19 Pandemic where most of our hospital service partially open, with severe shortage of nurses staff and opening new wards for COVID -19 patient separately, we found increased incident reports of the staff about patients behaviors, in the same time decrease in patient experience result in the 2nd quarter 2020 based on third party survey reports adopted by our hospital since 2019.

Based on that, we develop our person center proposal daily rounds to inpatient wards in the hospital in order to listen to both patient and health care provider.

The person center proposal daily round was assigned by three of the trained staff (one doctor, one nurse and one non medical staff) on person centered culture to ask patients about their experience in the hospital during their stay.

Monitoring patient needs during his stay in the hospital by asking simples questions chosen in advance by the team (sleeping, respond to call bell, awareness of the patient and sharing in his treatment plan, awareness of the patient bout his discharge plan).

These questions are inspired from question asked by third party survey approved in Saudi Arabia health care since 2019. In the same time, listening to nursing staff who are in severe shortage and suffering from extra workload.

On daily basis, consider the patient comments and solve it in regular basis.

The third party survey, which is implemented in our hospital since 2019, are calling patients after discharge and ask them about their admission experience in the hospital.

After implementation of this model of round in our hospital, we decide to evaluate the effect of our Daily round by comparing results of third party survey report in the third quarter 2020 (July 2020 till September 2020) means before starting our round and fourth quarter 2021 (July 2021-September 2021) means during the implementation of round.

Study sample and sitting:

This study sample includes all patients admitted to the medical and surgical ward of Armed Forces hospital Wadi Al Dawassir Saudi Arabia. All adult patients admitted and staying in the medical and surgical ward for at least three days were included, and critically ill patients who were not able to respond to the questions were excluded.

All inpatients are informed before admission that in our hospital strategy a team will come to discuss with them about their needs and comments.

Validation of our Daily round:

We have chosen to validate the effectiveness of our round on patient satisfaction by using the result of a third party survey interested in patient satisfaction which has been implemented in our hospital since 2019.

RESULTS

We collect 231 patients, 182 are female who represent 78% of study population and 49 male patients who represent 22%.

1. sleeping ,level of noise in and around room

In the third quarter 2020 we recorded increase of satisfaction in third party survey (approved in Saudi Arabia health care since 2019) from (85%) to (92.85%) as shown in the diagram (Fig.1)



Fig 1. Noise level in and around room?

2. How well was your pain controlled:

About the question of how was your pain control, in third quarter 2020 it was 81.25% and it had been improved by the third quarter 2021 (87.5) with an average (87.06%) (Fig 2).

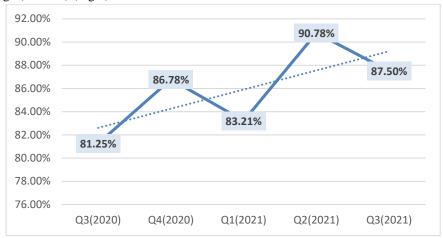


Fig 2. How well was your pain controlled?

3. Promptness in responding to the call button

Nurse respond to call bell increase for the third quarter of 2021 it become 86% (fig 3)



Fig 3. Promptness in responding to the call button?

4. Instruction given about how to care for yourself at home

An increase satisfaction was recorded from 80.81% in the third quarter 2020 to 88% of the third quarter 2021 with an average of 89.86%. (fig.4)

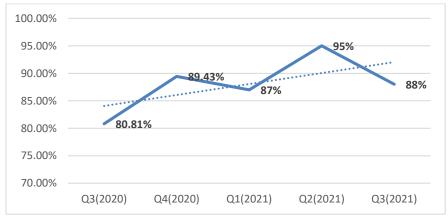


Fig 4. Instruction given about how to care for yourself at home?

5. Staff effort to include you in decisions about your treatment

In the third quarter 2020 it was 82.95%. It increases to 99.33% in the third quarter of 2021 with an average of 89.45%. (fig 5)



Fig 5. Staff effort to include you in decisions about your treatment?

DISCUSSION

Patient-centered care is recognized as a dimension of highquality health care. In recent years, it is one of the six quality aims for improving care strategies used in developed countries (1).

The health care literature is rich with information and research about various types of rounds with patients. For example Haas and Gold (2), in their study talk about results associated with the implementation administrator rounds with patients.

The research about using of rounds as tool to improve patient journey shown that compassionate care begins with compassionate people and patient benefit from compassionate care (3)

Patient perception data summarized in this study that the implementation of new Daily proposal round is associated with improvement of patient experiences in our hospital

Studies prove the importance of the proposal round is best practice intervention to meet patient needs and proactively address problems before it occurs (4)

In our study, by analysis of information given by the team on daily basics we highlighted the usefulness of a simple ward round template into daily clinical practice to anticipate the problems and complain of patients before they happen.

Patients and care provider is key issue for the quality of the services provided to the patient, even sometimes care providers fails to respond immediately or delay to patients needs due to shortage of staff which consider high risk factor affect patient safety(5).

Based on this hypothesis, one of the objectives of our proposal round was to facilitate communication and consolidate the relationship between patients who deserve better care and nurses who suffer from overload work (6).

The burden on nursing, who complains of severe shortages, was reduced by implementation of daily round in our hospital. By daily reporting to health care leaders, which tries on a daily basis to take into account the patient's comments and resolves it's on a regular basis because improving the patient experience is one of our highest priorities (7).

The overall improvement in the total result in patient experience as reported to us from third part survey from (83.38%) in the second quarter of 2020 and reach (88.14%) in the third quarter of 2021 with average (89.3%) which is the time when we started our project of person center proposal daily round for in patient's wards.

Our well trained staff successfully implemented the new model of compassion communication through their daily round in hospital wards listening to both patients and health care provider.

Limitation of our project is male patients who refused to participate in person center proposal daily round.

CONCLUSION

The relationship between patient and professional is key issue for the quality of the services provided to the patient, even sometimes care providers fails to respond immediately or delay to patients needs due to shortage of staff which consider high risk factor affect patient safety. Our new model invented by our team can replace the daily nursing round in the event of a chartage of staff. This model has shown its effectiveness in improving patient satisfaction without increasing the burden on nurses.

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