

Improving Team Communication: Daily Interdisciplinary Unit Briefing

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PROBLEM: The communication among rotating physicians, nurses, social workers, physical and occupational therapists, dieticians, and pharmacists was informal and inconsistent in our teaching hospital. Communication breakdowns resulted in patient and team uncertainty over the plan of care, frequent phone calls, late discharges, increased length of stay, and patient and team dissatisfaction.

EVIDENCE: A nurse and social worker reviewed the evidence on interdisciplinary team building including the DoD/AHRQ TeamSTEPPS teamwork principles.

STRATEGY: Adopting the Team STEPPS principles, the charge nurse and social worker led the change team by meeting with key stakeholders and proposing the development of a 5-10 minute Daily Interdisciplinary Unit Briefing (DIUB). The briefing objectives were to communicate the goals for the patient's day and stay, to decrease delays in procedures/tests, to reduce calls by different team members to the physician, and to facilitate timely discharges. Team members decided the briefing time and location.

PRACTICE CHANGE: The DIUB began in August, 2007 and starts at 10:30 am. The brief meetings are held at the nurses' station. Because interdisciplinary team members know they will be able to ask questions at the briefing, they refrain from paging physicians with nonurgent questions prior to the briefing. Prior to the briefing, the charge nurse queries the staff nurses for questions they want addressed at the briefing.

EVALUATION: Outcomes measured after one month include were length of briefing, number of previously unknown discharges/transfers, number of saved nonurgent phone calls to MDs, and number of MD "no shows" at the meeting.

RESULTS: The average length of the meeting was 7 minutes; 46 previously unknown discharges/transfers were identified; 111 phone calls to MDs were saved, and the MD missed the meeting only one time.

RECOMMENDATIONS: Based on the success of the initial trial, the daily briefing has been expanded to all medical-surgical units.

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