



Reclaiming the rounds: an interprofessional imperative

Andreas Xyrichis

To cite this article: Andreas Xyrichis (2024) Reclaiming the rounds: an interprofessional imperative, *Journal of Interprofessional Care*, 38:3, 409-410, DOI: [10.1080/13561820.2024.2339624](https://doi.org/10.1080/13561820.2024.2339624)

To link to this article: <https://doi.org/10.1080/13561820.2024.2339624>



Published online: 11 Apr 2024.



Submit your article to this journal [↗](#)



Article views: 269



View related articles [↗](#)



View Crossmark data [↗](#)

Reclaiming the rounds: an interprofessional imperative

Introduction

Despite the disruptive potential of new technology, such as artificial intelligence, and its early integration into various aspects of healthcare education and practice (Brandt, 2023), interprofessional collaborative practice (IPCP) remains essential for delivering high-quality and safe care. While there is a proliferation of promising new initiatives to enhance IPCP, as research published in this Journal demonstrates (for example, Benjamins et al., 2024; Chen et al., 2024; Kaas-Mason et al., 2024), it remains essential to review and improve existing interventions. Interprofessional rounds in particular, where diverse healthcare professionals come together to discuss patient care, continue to play a crucial role in improving IPCP. However, challenges in implementation and consistency persist. This editorial examines the complex nature of interprofessional rounds, the hurdles in their effective implementation, and their impact on IPCP, provider satisfaction, and work efficiency through a set of articles published in this issue of the Journal of Interprofessional Care (Blakeney et al., 2021; Buchanan et al., 2023; Manspeaker et al., 2023; Babu et al., 2023; Merriman & Freeth, 2021; Schwartz et al., 2021; Vatani et al., 2020).

Background

Interprofessional rounds can take different forms, but they commonly involve multiple health professionals coming together, sometimes with patients and families, to form part of a consistent team-based routine, share information, and collaboratively establish a daily care plan (Blakeney et al., 2021). The ultimate goal is to enhance IPCP, including provider communication and coordination, to improve patient care experience and outcomes.

Unfortunately, traditional inpatient settings often limit opportunities for interprofessional rounds due to high patient volume, provider delocalization, and lack of aligned communication time (Schwartz et al., 2021). Moreover, their implementation in academic settings can be challenging, with some expressing caution about the need to balance interprofessional rounds with the educational needs of resident physicians. For example, Buchanan et al. (2023) pointed to mixed results of past research, with some demonstrating acceptance among resident physicians while others indicating mixed feelings, with some residents finding interprofessional rounds less educational compared to traditional physician-led rounds.

Despite the wide acknowledgment of their importance, concerns have also been raised about the varying quality, professional participation differences, and occasional interprofessional rounds ineffectiveness (Babu et al., 2023; Merriman & Freeth, 2021). While challenges in the implementation of

interprofessional rounds persist, the articles in this issue also include insights on optimizing their uptake and delivery.

The articles in this issue

Blakeney et al. (2021) examined the potential of interprofessional bedside rounding models as a response to concerns over poor communication within healthcare teams and its consequent impact on medical errors, inefficiencies, and other adverse outcomes. They conducted a systematic scoping review, searching databases like PubMed, CINAHL, PsycINFO, and Embase through June 2020 for relevant literature. Based on set eligibility criteria, they included seventy-nine articles, which they assessed for study quality. Their review showed that publications in this area have increased notably since 2014. Most of the studies they considered reported positive impacts of rounds on team dynamics, patient engagement, and quality of care. However, they noted that the literature is diverse in terms of study descriptions, methodologies, and quality. This highlights the need for more standardization and clarity.

In a much-needed study on the implementation of rounds, Schwartz et al. (2021) studied an inpatient medicine teaching unit where they observed 1308 encounters over 24 weeks. They aimed to determine whether the program was implemented correctly and measure its impact on perceived IPCP among nurses and resident physicians. They found significant improvements in IPCP and its effect on workplace efficiency as perceived by nurses and residents, but not in terms of burnout or job satisfaction. Similar conclusions were reached by Buchanan et al. (2023), who evaluated resident physicians' perceptions before and after the implementation of interprofessional rounds. Specifically, they found high satisfaction among resident physicians and improved perceived efficiency of rounds while maintaining the quality of education.

In one of the few in-depth qualitative investigations of interprofessional rounds, Merriman and Freeth (2021) examined collaboration between senior physicians and bedside nurses in an intensive care unit (ICU). They followed an appreciative inquiry approach using ethnographic observations, interviews, and group discussions. They found that both physicians and nurses valued interprofessional discussions and decision-making during rounds. However, they also found challenges relating to nurses' ability and willingness to make effective contributions. Barriers to nurse contribution included the structure of rounds and the hierarchical relationship between senior physicians and bedside nurses. Relatedly, Babu et al. (2023) examined the factors that influence the participation of clinical pharmacists in rounds. Through a cross-sectional survey, they identified

barriers regarding the organization of clinical pharmacy, the organization of rounds, attitudes toward and skills and knowledge of pharmacists.

One way of overcoming the above barriers to participation in rounds is using an interprofessional rounding tool that fosters contribution from different team members. Vatani et al. (2020) developed such a tool through semi-structured interviews with experts from dentistry, dietetics, medicine, nursing, occupational therapy, pharmacy, physical therapy, and social work. They identified essential data elements for such a tool, categorized into six domains: discharge-related, social determinants of health, hospital safety, nutrition, inter-professional situation awareness, and patient history. Finally, Manspeaker et al. (2023) conducted a quasi-experimental study on the impact of a Grand Rounds Interprofessional Workshop on health professions students' cultural humility and interprofessional communication. The workshop involved students from diverse healthcare professions, which was formatted to replicate clinical grand rounds and included break-out sessions for more focused discussions. The results showed a significant improvement in students' ability to communicate and socialize with peers and reflect on cultural humility.

Conclusion

The articles in this issue of the *Journal of Interprofessional Care* point to both the potential of interprofessional rounds in different formats and the challenges of implementation. While the popularity of rounds-based interventions is increasing, the inconsistent terminology, implementation strategies, and methods continue to pose challenges for assessing their effectiveness. Moreover, attention must be paid to the organization and structure of rounds and the tools employed to ensure parity and inclusivity of different professions. A supportive culture and clarity of professional roles are also requisites for the successful implementation of rounds. Encouragingly, the articles collectively indicate that interprofessional rounds can positively influence IPCP, team communication, and work efficiency, but further research is needed to explore the impact on patient-centered outcomes. Future research should continue to investigate these issues to promote ongoing development and evaluation of interprofessional round-based interventions through qualitative, quantitative, mixed-method, and longitudinal designs.

Disclosure statement

AX is the Editor-in-Chief of the *Journal of Interprofessional Care*, Director at the UK Centre for the Advancement of Interprofessional Education, and NIHR Advanced Fellow at King's College London University. The author declares no known competing financial interests that could have appeared to influence the work reported in this paper.

Funding

AX is part-funded by an NIHR Advanced Fellowship (NIHR302958, FEARLESS ICU). The views expressed here are those of the author and

not necessarily those of the NIHR or the Department of Health and Social Care.

References

- Babu, D., Marotti, S., Rowett, D., Lim, R., Wisdom, A., & Kalisch Ellett, L. (2023). What is impacting clinical pharmacists' participation in an interprofessional ward round: A thematic analysis of a national survey. *Journal of Interprofessional Care*, 1–9. <https://doi.org/10.1080/13561820.2023.2289506>
- Benjamins, J., de Vet, E., & Haveman-Nies, A. (2024). Enhancing inter-professional teamwork between youth care professionals using an electronic health record; a mixed methods intervention study. *Journal of Interprofessional Care*, 1–11. <https://doi.org/10.1080/13561820.2024.2314461>
- Blakeney, E. A. R., Chu, F., White, A. A., Smith, G. R., Jr., Woodward, K., Lavalley, D. C., Salas, R. M. E., Beaird, G., Willgerodt, M. A., Dang, D., Dent, J. M., Tanner, E. I., Summerside, N., Zierler, B. K., O'Brien, K. D., & Weiner, B. J. (2021). A scoping review of new implementations of interprofessional bedside rounding models to improve teamwork, care, and outcomes in hospitals. *Journal of Interprofessional Care*, 1–16. <https://doi.org/10.1080/13561820.2021.1980379>
- Brandt, F. B. (2023). Creating a utopian future by asking uncomfortable questions. *Journal of Interprofessional Care*, 37(sup1), S1–S3. <https://doi.org/10.1080/13561820.2023.2194914>
- Buchanan, C. J., Young, E., & Mastalerz, K. A. (2023). Engaging resident physicians in the design, implementation, and assessment of bedside interdisciplinary rounds. *Journal of Interprofessional Care*, 1–7. <https://doi.org/10.1080/13561820.2023.2176471>
- Chen, K. L., Huang, Y. M., Huang, C. F., Sheng, W. H., Chen, Y. K., Shen, L. J., & Wang, C. C. (2023). Impact of an integrated medication management model on the collaborative working relationship among healthcare professionals in a hospital: An explanatory mixed methods study. *Journal of Interprofessional Care*, 38(2), 220–233. <https://doi.org/10.1080/13561820.2023.2263482>
- Kaas-Mason, S., Langlois, S., Bartlett, S., Friesen, F., Ng, S., Bellicoso, D., & Rowland, P. (2024). A critical interpretive synthesis of interprofessional education interventions. *Journal of Interprofessional Care*, 1–10. <https://doi.org/10.1080/13561820.2023.2294755>
- Manspeaker, S. A., DeLuliis, E. D., Delehanty, A. D., McCann, M., Zimmerman, D. E., O'Neil, C., Shaffer, J., Crytzer, T. M., & Loughran, M. C. (2023). Impact of a grand rounds interprofessional workshop: Student perceptions of interprofessional socialization and cultural humility. *Journal of Interprofessional Care*, 1–9. <https://doi.org/10.1080/13561820.2023.2287671>
- Merriman, C., & Freeth, D. (2021). Interprofessional ward rounds in an adult intensive care unit: An appreciative inquiry into the central collaboration between the consultant and the bedside nurse. *Journal of Interprofessional Care*, 1–9. <https://doi.org/10.1080/13561820.2021.1985441>
- Schwartz, J. I., Gonzalez-Colaso, R., Gan, G., Deng, Y., Kaplan, M. H., Vakos, P. A., Kenyon, K., Ashman, A., Sofair, A. N., Huot, S. J., & Chaudhry, S. I. (2021). Structured interdisciplinary bedside rounds improve interprofessional communication and workplace efficiency among residents and nurses on an inpatient internal medicine unit. *Journal of Interprofessional Care*, 1–8. <https://doi.org/10.1080/13561820.2020.1863932>
- Vatani, H., Sharma, H., Azhar, K., Kochendorfer, K. M., Valenta, A. L., & Dunn Lopez, K. (2020). Required data elements for interprofessional rounds through the lens of multiple professions. *Journal of Interprofessional Care*, 1–7. <https://doi.org/10.1080/13561820.2020.1832447>

Andreas Xyrichis
Journal of Interprofessional Care

✉ andreas.xyrichis@kcl.ac.uk

 <http://orcid.org/0000-0002-2359-4337>