Bridging the gap between IT and Patient Care Services through Rounding

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Problem Statement: Clinical nurse rounding on patients in acute care units has been suggested as a way to improve outcomes and increase patient satisfaction. With this premise as a foundation, registered nurses in a clinical analyst role initiated rounding on our hospital's clinical units as a way to provide support to our busy clinical staff and improve staff satisfaction with the hospital's information technology (IT). **Methods:** Clinical units were identified and assigned to clinical analysts to round on a regular basis. Rounding consists of two analysts going to their assigned units and talking with the staff on duty (nurses, unit secretaries, providers, etc.), in an attempt to identify and help resolve electronic health record (EHR) and other technology issues. These visits also provide an opportunity to give real time education about EHR use, features, and functions. If an issue cannot be resolved during the visit, further information is gathered and follow up communication with the staff member is provided. All visits are documented in a shared spreadsheet and a log is maintained, categorized by the type of issue. The goal is to round on each nursing unit every two weeks. **Results:** A wide range of issues have been reported by staff during the rounding. These issues include broken bedside scanners, slow computers, and EHR related concerns. The number of Help Desk calls and IT issues identified during the organization's daily safety huddles have decreased since rounding was instituted. Other benefits include optimization of workflows, identification of staff's knowledge gaps, opportunities to teach staff informatics principles, identification of minor problems in the EHR (misspellings of words, slowness of computers, printing issues), and bugs in the system that could be reported to the EHR vendor. Prior to a recent Joint Commission visit the clinical analyst staff provided an intensive review of how to navigate the EHR on all of the clinical units. Rounding has also facilitated relationships with our users, increasing our credibility with them leading them to be more forthcoming with issues and suggestions for improvement. **Significance:** Rounding has provided a method for shared learning about the EHR between the analysts, who have primary responsibility for different modules. Some of the challenges include difficulty in maintaining the rounding schedule due to competing priorities, a limited ability to round on off hours and weekends, and concern that the staff wait for our rounds and delay reporting issues to the Help Desk. The plan is to continue rounding throughout our organization's fiscal year. Additions to the initiative are technical staff accompanying the clinical analysts on rounding in an effort to provide a more immediate resolution to technical issues and the inclusion of expanded sessions or clinical staff shadow days by an analyst.