

Impact of congenital heart surgery advanced practice provider participation in multidisciplinary rounds

PURPOSE

The purpose of this study was to determine if the inclusion of the congenital heart surgery advanced practice provider on cardiac care unit multidisciplinary rounds would decrease post-operative length of stay without increasing safety events.

BACKGROUND

It is widely accepted that multidisciplinary rounds decrease patient length of stay while increasing patient and provider satisfaction, yet little is known about the impact of multispecialty rounds. The current cardiac surgery program started in 2018 and since that time the team has been focused on morbidity and mortality however, with volumes increasing and the addition of a heart failure and transplant program, the focus has shifted to length of stay as bed availability has become problematic.

METHODOLOGY

A CHS APP was assigned to the CCU rounding team each day and participated in decision

making when appropriate. During the first month, the interaction of the CHS APP and the CCU rounding team was observed and documented to quantify the percent of patients who benefitted from their participation. The post-operative length of stay was obtained from the outcomes team in addition to the number of safety events reported each month in the CCU.

RESULTS

During the intervention period, postoperative length of stay decreased by more than 10% as did the number of safety events reported.

IMPLICATIONS

Multispecialty, multidisciplinary team rounds on postoperative patients optimizes the rounding period, expedites decision making and provides comprehensive care. The cost of implementing multisystem, rounds is cost effective and easily implemented



**Amy Greenwood
Hemingway**

DNP, CNS, CPNP -PA/AC

Nurse Executive