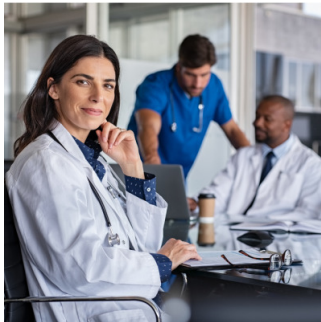

Daily Integrated Care Conferences as Efficient Model of Communication



Significantly reducing the length of a patient's stay can be achieved by a measure as obvious as provider teams holding integrated care conferences (ICCs), ie daily meetings during which providers share information.

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According to the study (Shilian et al. 2020) [published](#) in *The Journal of the American Osteopathic Association*, the length of stay can thus be decreased by up to 67%. Despite this, ICCs are rarely included in healthcare providers' daily agenda. Instead, in most hospitals multidisciplinary teams of nurses, pharmacists, social workers and other professionals needed to provide care, are coordinated by primary physicians by means of email, phone calls or meetings. Inefficiencies in such care coordination, inevitable when multiple health care professionals need to communicate, may result in increased length of hospital stay.

The researchers' aim was to determine what impact ICCs would have on the length of stay for patients with chronic obstructive pulmonary disease (COPD) exacerbation. For this, they retrospectively investigated the lengths of stay for this category of patients (1,683 patients in total), selected using electronic health records, at two osteopathic community hospitals in Ohio, USA.

The two facilities had similar staffing, resources and patient populations. One used daily ICCs, with representatives from each care provider team discussing patient progress, and the other did not.

The study found that in the first case the average length of stay for patients with COPD was 3.37 days while in the second case 5.55 days. Moreover, in the hospital with daily ICCs hospital stay was 67% shorter for patients aged 40 to 69 years old, and 36% shorter for patients aged 70 to 99 years in comparison with the facility where ICCs were not practiced.

For the majority of hospitals, discussing the diagnoses and treatment plans during multidisciplinary rounds (MDRs), in which each patient is visited by the attending physician with residents, medical students, nurses, ancillary clinicians and staff by their side, is a much more common model of care coordination than daily ICCs. It is underscored that since MDRs are often held at the bedside, the setting is prohibitive for meaningful discussions among such large group of professionals. ICCs are conducted in a conference room, which creates much more convenient environment, and are usually led by nursing supervisors who represent the most direct point of care.

The authors believe that communication without ICCs is slower and has higher level of risk due to possible miscommunication and gaps in treatment. In addition, shorter admission periods result in decreased costs and improved patient outcomes. Therefore, implementing daily ICCs may raise the efficiency of current healthcare services and coordinated care.

References

Shilian R et al. (2020) Daily Integrated Care Conferences to Reduce Length of Hospital Stay for Patients With Chronic Obstructive Pulmonary Disease. *The Journal of the American Osteopathic Association* , 120:144–152.

Source: [EurekAlert](#)

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