Board round checklist

The board round should take no longer than 30 minutes.

Each patient must be briefly discussed during every board round, with the following questions asked:

- Is the patient responding to treatment as expected and is their care plan defined? If not, an urgent consultant review is essential and regular NEWS (National Early Warning Score) required.
- If new, has the patient had a consultant review?
- Does the patient have an expected date of discharge and physiological and function criteria for discharge?
- Is the patient to be discharged today? Are they ready to go? At what time will they leave the ward?
- Is the patient to be discharged tomorrow? Is everything arranged?
- Consider cannulas, catheters, VTE, skin integrity, pain, wounds.

Remember:

- Establish team priorities for the day in this order – sick patients, discharges, stable patients.
- Actions must be documented and reviewed in the afternoon.
- Escalate delays in assessments and diagnostics – turn every day from red to green.
- Don’t forget….this is not an MDT meeting!