

Purposeful Hourly Rounding by Nurses: A Best Practice Implementation Project

M. Sai Ram¹, Jobby John², Sherly John³

¹Quality Nurse, ²Nurse Educator, ³Chief Nursing Officer, QRG Health City, Faridabad, Haryana

Abstract

Purpose: The project aimed to improve the patient satisfaction and safety through implementation of purposeful hourly rounding by nurses.

Materials and Method: The FADE Quality Improvement model was used to guide the process. A video assisted training programme was developed about purposeful hourly rounding protocol. Direct observation of staff nurses was done followed by training programme to assess timeliness and utilization of a protocol when rounding. A follow-up audit was conducted to determine compliance with the same criteria. For the project aim, pre- and post-intervention data related to nursing sensitive elements of patient satisfaction and safety was compared.

Results: The purposeful hourly rounding concept was selected for implementation because it is evidence based practice and appeared to be beneficial in all IPD wards. The video assisted training programme was presented to all nurses working in wards. Nurses expressed appreciation that they were consulted, trained and their feedback was incorporated into tool before it was implemented. Resources needed to implement the protocol were identified and those were provided.

Conclusion: Nurses have the ability to improve patient satisfaction and patient safety outcomes by utilizing purposeful hourly rounding concept which serves to improve patient communication and staff responsiveness. Having supportive resources, structured approach and involving all levels of staff, to meet patient needs during their hospital stay was a key factor for success.

Keywords: Purposeful hourly rounding, 5 Ps, FADE QI model.

Introduction

Patient safety and satisfaction in hospitals is a continuous focus and concern for nursing leaders and they are endlessly researching on evidence-based care initiatives to improve patient safety. One of the major performance improvement initiatives to promote patient safety and to improve satisfaction is the implementation of purposeful hourly rounding¹.

Purposeful hourly rounding is the nurse led programme to ensure the needs of the patient are assessed every hour. Hourly rounding incorporates behavioral and environmental components². The focused hourly assessment includes the completion of the evaluation of the “5P’s”: Pain, Potty, Positioning, Possessions and Personal needs.

The purpose of this project was to improve patient satisfaction and safety through implementation of purposeful hourly rounding by nurses in QRG Health city.

Corresponding Author:

M. Sai Ram M.Sc. (N).

Quality Nurse, QRG Health City,

Sector- -16, Faridabad, Haryana – 121 002.

Ph. No: +91-9985835978

E-mail : sairam.maddi16@gmail.com

Method and Materials

FADE QI model is the one of the most common models for quality improvement. There are four steps to this model that cover a broad area and are easy to use³.

The first step is **Focus**. This is an essential part of this model because it establishes the basis for what will set the other three steps in motion³.

The second step is data **Analysis**. Here, data will be collected and analyzed in an effort to establish baselines, identify root causes of the problem for which a solution is being sought, and then point toward possible solutions³.

The next step in the process is **Development**. This is where action plans are developed based on the data being examined. These plans are put together for the overall improvement process and encompass implementation, communication, and the measuring and monitoring of the progress³. Evidence-based research indicated implementation of hourly rounding would increase patient satisfaction⁴. Hence, it was selected as a solution and an action plan was developed. It includes Competency based (video assisted training & return demonstration) education for all nurses of IPD wards, Nursing operations team rounding to verify performance of hourly rounding by staff and Rounding Log for

documentation .

Purposeful hourly rounding is an evidence based model of care that promotes a systematic and proactive approach to patient care⁴.

The aims of purposeful hourly rounding are

To address patient needs on a continual basis.

To improve early detection of the deteriorating patient,

To improve patient satisfaction & quality of care,

To reduce the incidence of falls, pressure ulcers & medication errors

To decrease the nurse call bell usage

The procedure is every hour a nurse enters a patient room & asks the patient about 5 P's (See Table -1) and Nurses round every hour from 6 am to 10 pm and every 2 hours from 10 pm to 6 am.

Table – 1: Purposeful Hourly Rounding – 5Ps.

S.No	5 Ps	Way to address 5 P s
1	Pain	<ul style="list-style-type: none"> • Do you have Pain? If yes, then <ul style="list-style-type: none"> • How you rate your pain from 0 to 10? • What is the frequency of the pain? • What is the location of pain? • Do you want me to do something for your pain relief?
2	Potty	<ul style="list-style-type: none"> • Do you want me take you to the washroom or provide bedside commode or bed pan? If yes, then <ul style="list-style-type: none"> • Provide assistance as per the need
3	Position	<ul style="list-style-type: none"> • Are you comfortable in this position? If No, then <ul style="list-style-type: none"> • Provide comfortable position as per patient need • Provide assistive devices like extra pillows, wedge pillows etc.
4	Possessions	<ul style="list-style-type: none"> • Do you need us to move call bell, tissue box, bed remote, TV remote, cardiac table or water jar close to you? If yes, then <ul style="list-style-type: none"> • Provide the objects as desired.
5	Personal needs	<ul style="list-style-type: none"> • Do you need any other support or services like ✓ Ambulation ✓ Consulting with doctors, dietician, physiotherapist ✓ Meeting up with attendants, relatives

The final step in the quality improvement process is **Execution / Evaluation**³. A one-hour training session was developed introducing staff to the concepts of “Hourly Rounding”. Demonstration video was shown during the class to reinforce the rounding behaviors. Hourly rounding logs are monitored for completion and

to ensure documentation of rounding is being performed. During the nursing operational rounds, process of hourly rounding is verified with the patients. If inconsistencies are noted between the patients’ feedback and the rounding log documentation, training and mentoring is provided to each individual staff.

I. Focus	II. Analyze	III. Develop	IV. Execute & Evaluate
<ul style="list-style-type: none"> • Define the process to be improved • Increase patient satisfaction scores 	<ul style="list-style-type: none"> • Examine the data to find causes and then determine solutions • Patient feedback data was analyzed and identified opportunity to increase patient satisfaction 	<ul style="list-style-type: none"> • Select a solution & develop an action plan • Implementation of Purposeful hourly rounding • Training • Verification of performance • Rounding log for documentation 	<ul style="list-style-type: none"> • Execute the plan & Monitor the Impact • Classroom training & return demonstration • Hourly rounding logs are monitored for completion • Patient satisfaction scores trending upward for overall rating of care

Figure-1: The FADE QI Model offering useful approach to implement purposeful hourly rounding

Results

The FADE QI Model provided a framework for implementing purposeful hourly rounding concept to improve patient satisfaction and safety³.

Purposeful hourly rounding practice was selected for implementation by nursing quality team as it is a best practice intervention to routinely meet patient care needs, ensure patient safety, decrease the occurrence of patient preventable events, and proactively addresses problems before they occur⁵.

The video assisted training programme was presented to all IPD nurses. The findings revealed that training was being effective in enhancing the knowledge of nurses about new practice i.e. purposeful hourly rounding as evidenced by the scores obtained in the pre and post-tests.

Nurses expressed appreciation that they were consulted and trained and their feedback was incorporated into tool before it was implemented. Resources needed

to implement the protocol were identified (such as hourly rounding log / education material) and those were provided to all departments.

We also reviewed the documented data of falls rates, pressure ulcer prevalence, patient satisfaction scores and call bell usage before and after implementation of rounding. This proved conclusive and direct link seen between rounding and improved outcomes as patient satisfaction scores trending upward for overall rating of care, fall rate, skin breakdown and nurse call bell usage trending down.

Conclusion

As patient safety and satisfaction has become an increasingly important issue in healthcare, nurse’s role in contributing to safety & quality initiatives has grown as well. Therefore, Nurses are striving to deliver safe, high quality care; the literature demonstrates that purposeful hourly rounding impacts quality and safety outcomes. Purposeful hourly rounding consists addressing the 5 P’s (Pain, Potty, Position, Possessions and Personal

needs), assessing for a safe environment and setting expectations. Developing and implementing a culture of safety is very important as healthcare organizations continue to focus on patient centered care.

Conflict of Interest: Nil

Source of Funding: The project was supported by Hospital.

Ethical Consideration: Formally obtained from Hospital.

References

1. Halm MA. Hourly rounds: what does the evidence indicate? *Am J Crit Care*. 2009;18(6):581-4.
2. Meade CM, Bursell AL, Ketelsen L. Effects of nursing rounds: on patients' call light use, satisfaction, and safety. *Am J Nurs*. 2006;106(9):58-70.
3. Wiseman B, Kaprielian V. Patient Safety-Quality Improvement: What is Quality Improvement? Department of Community and Family Medicine, Duke University Medical Center 2005. Viewed 27 August 2007.
4. Hutchings, M., Ward, P. & Bloodworth, K. (2013). 'Caring aroundd the clock': a new approach to intentional rounding. *Nursing Management*. Vol. 20, No. 5, 24-30.
5. Woodard JL. Effects of rounding on patient satisfaction and patient safety on a medical-surgical unit. *Clin Nurse Spec*. 2009;23(4):200-6.