

# Does Patient Participation in Purposeful Rounding Increase Patient Satisfaction with Sustained Results?



**Phelps Hospital**  
Northwell Health<sup>SM</sup>

Presented by :  
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# Objectives:

- Review nursing rounding and its history
- Discuss why rounding is effective and powerful
- Define proactive patient rounding and the 5 “P”s
- Describe how to motivate staff to become hourly rounding advocates
- Understand the benefits of rounding
- Review rounding results at Phelps as per HCHAP scores
- Describe how to sustain rounding and (+) results when the “newness wears off”



# The Facts:

## Hourly rounding:

- Proactively addresses patient needs
- Facilitates staff workflow leading to satisfaction
- Improves service quality and “patient centered care”
- Helps reduce falls, pressure injuries, CAUTIS
- Promotes efficiency with each room entry
- Decreases call bells

*“I see them a lot....they are checking me...I feel safe... they care”*



# Purposeful Rounding is defined as:

“The intentional planned action of the nursing staff through proactive anticipation of patient care needs by checking/rounding frequently (each hour)”

(Leighty, 2007)



# Reactive versus Proactive Rounding

<p><b>Reactive</b> <b>At the bedside</b> <i>After the “call bell”</i></p>	<p><b>Proactive</b> <b>At the bedside</b> <i>Before the “call bell”</i></p>
<ul style="list-style-type: none"><li>• On-demand care</li><li>• Patient safety issues: falls, HAPI's</li><li>• Unpredictable workflow</li><li>• Patient complaints</li><li>• Not enough time for patient communication</li></ul>	<ul style="list-style-type: none"><li>• Anticipate care needs</li><li>• Decrease patient safety issues: fewer falls and HAPI's</li><li>• Nurse controls workflow decrease in interruptions</li><li>• Less patient complaints</li><li>• More time for patient and communication</li></ul>

# The First Nurse Rounder

## “The lady with the lamp”...Florence Nightingale

Nurses need to know how to care for a patient through the environment

- Implemented concepts that are at the core of nursing practice today
- Decreased mortality in hospitals by 2/3

Began the following segments of nursing and health care:

1. Infection control
2. Self care
3. Assessment (nicknamed lady with the lamp)
4. Therapeutic communication
5. Spiritual nursing
6. Public Health advocate



(P I Nixon Historical Library 5-15-17)

# Why ongoing rounding?

Hospitalized patients require assistance with basic self care tasks:

- using a toilet /commode /bedpan
- ambulating
- eating
- communicating (using a call light)
- maintaining a comfortable position for hours in bed



# History of rounding on 2 North (26 bed surgical unit) 2014- September 2017

- Check off list on wall with time and staff initials
- 4 “Ps” checked by nurses and technicians
- Scripted 4 “Ps” not always followed
- Formal education and competency reviews
- All staff primarily “asking about pain”
- Inconsistency in what was discussed with the patients
- Variance in level of staff comfort with rounding conversations



# Purposeful Rounding on 2 North...

## The Change!

- Asking staff....what is working? What is not? What can we do better?
- Review of why rounding works
- Review of HCHAPS and # of questions reflected by rounding
- Discussed need for a new patient centered rounding tool

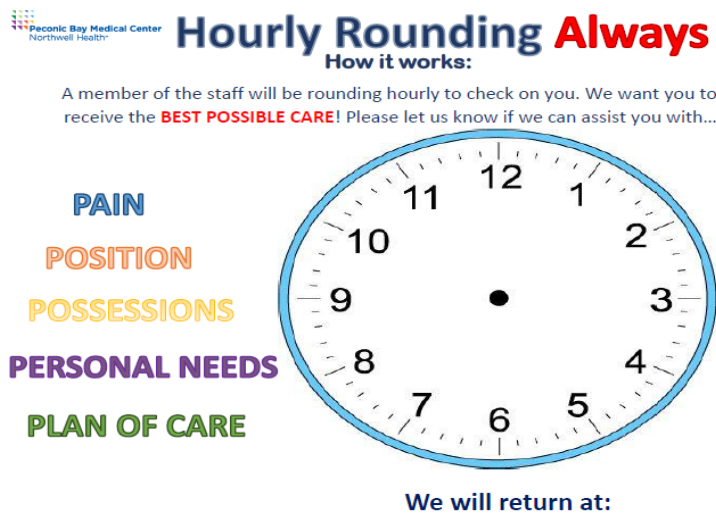
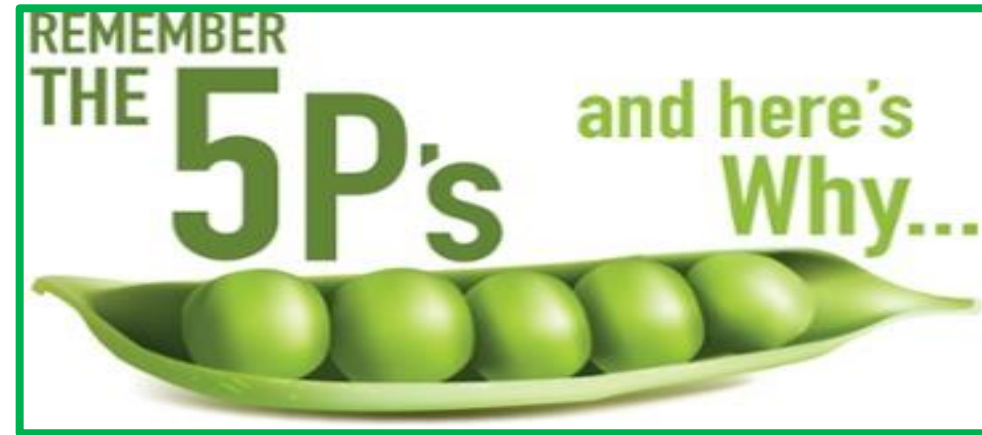
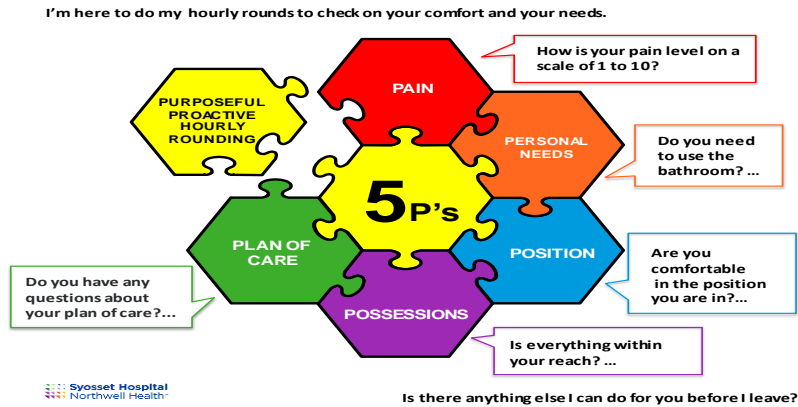
# Hospital Consumer Assessment of Healthcare Provider System-HCAHPS

- A survey instrument & data collection methodology
- Core survey items ask how often or whether pt. experienced a critical aspect of hospital care
- Survey measures patients' perception of their hospital experience
- Public reporting results create new incentives for hospitals to improve the quality of care

# November 2017...Change Begins

- Purposeful rounding and rounding scores reviewed with all staff
- Staff given choice of 7 types of rounding tools (next slide)
- Increased from 4 to 5 “Ps”
- Staff developed 1 tool which included the best of 7 tools reviewed
- All staff educated with emphasis on consistency
- Each patient admitted to 2N (if not cognitively impaired) is given rounding tool with explanation within the first few hours after admission
- Throughout the week patients are followed by manager/ coordinator/ educator for understanding of rounding and to ensure it is being done
- Tool remains at bedside in patient room

# Examples From Which Staff Chose



# Tool... Developed by staff with “our elderly in mind”

## Hourly Rounding...How it works:

- We strive to come in *hourly* and see how you are doing.
- We want you to receive the **BEST POSSIBLE CARE!**
- Please let us know how we can assist you with . . .

- **Pain**

*What is your pain level on a scale from 0 to 10?*

- **Personal needs**

*Do you need to use bathroom/commode/bedpan?*

- **Position**

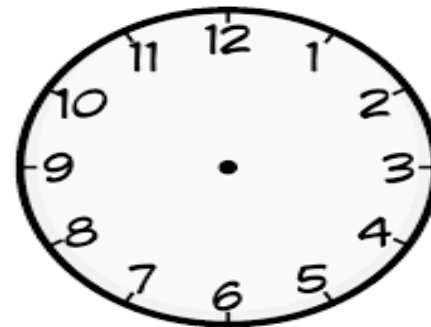
*Are you comfortable?*

- **Possessions**

*Is everything you need within reach?*

- **Plan of Care**

*What is important for you to do today?*



**Thank you for allowing us to care for you!**  
**Phelps 2 North Staff**

# Expected Behaviors of Staff During Rounding:

- Addresses the 5 “P”s
- Identifies additional comfort needs
- Assess the room environment for safety
- Ask “Is there anything else I can do for you while I am here?”
- Remind the patient when you will be back
- Develop rapport which reduces anxiety
- Make eye contact, acknowledge patient by name
- Narrate your care, what you are doing and why
- Manage up!!!
- Determine patient understanding using “teach back”

# **Rounding helps with additional HCAHPS questions:**

- Nurses treat me with respect
- Nurses listen carefully
- Call button and help as soon as you needed it
- Help toileting as soon as you wanted
- Pain is well controlled
- Staff do everything to help with pain

**All leading to...Would you recommend this hospital?**

# Documentation in Meditech Every Shift

## Nurses

Intervention	Text/ Ord	Status	Src	Frequency	History	Next Scheduled ▼	Prtcl	Assoc Data
Hourly Rounding completed		A	PS	Q0600.1800		1800		

## Technicians

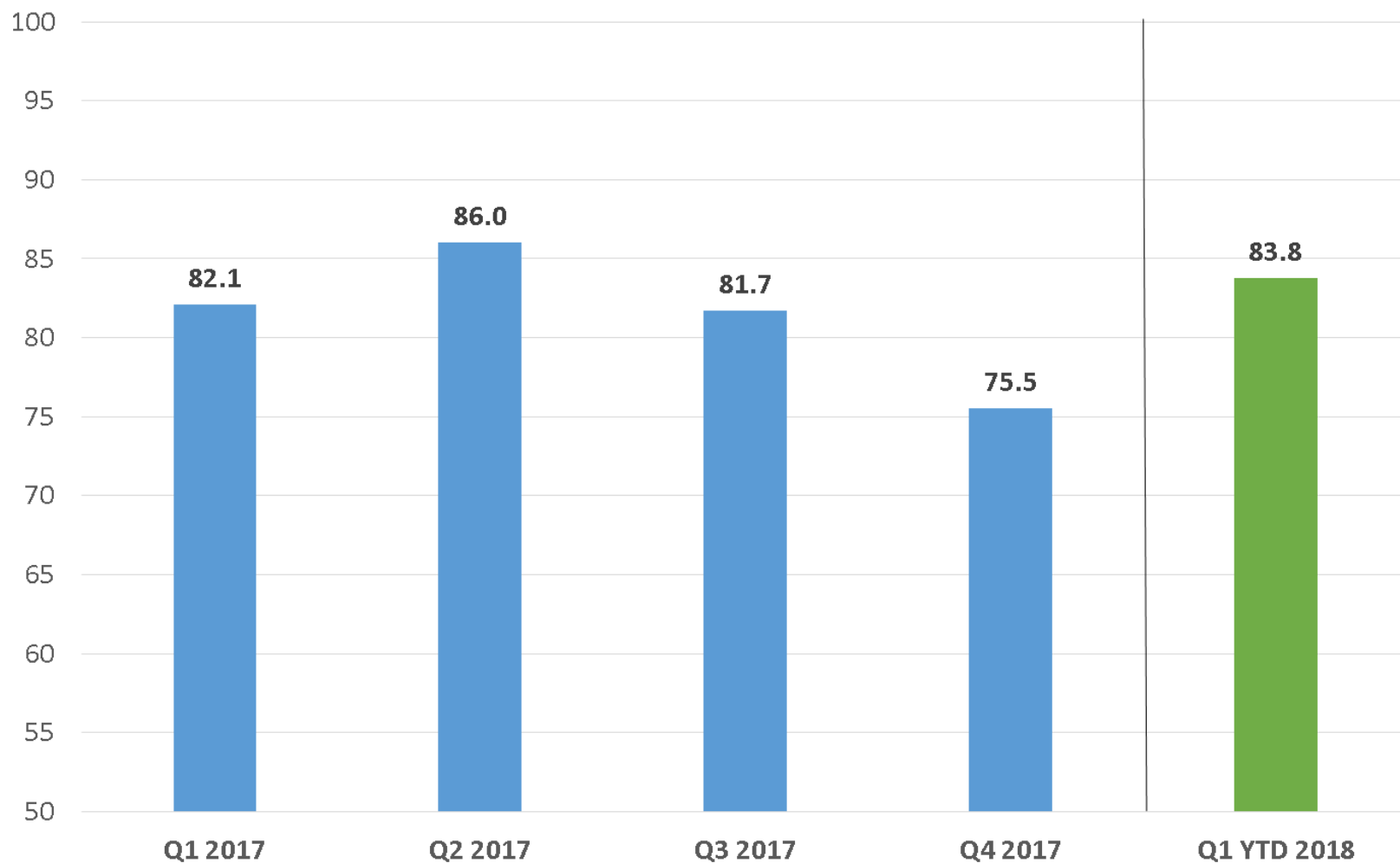
Intervention	Text/ Ord	Status	Src	Frequency	History	Next Scheduled ▼	Prtcl	Assoc Data
Hourly Rounding Completed		A	PS	Q0600.1400.2200		1400 2200		



# HCAHPS scores prior to new process and compared after use of new tool

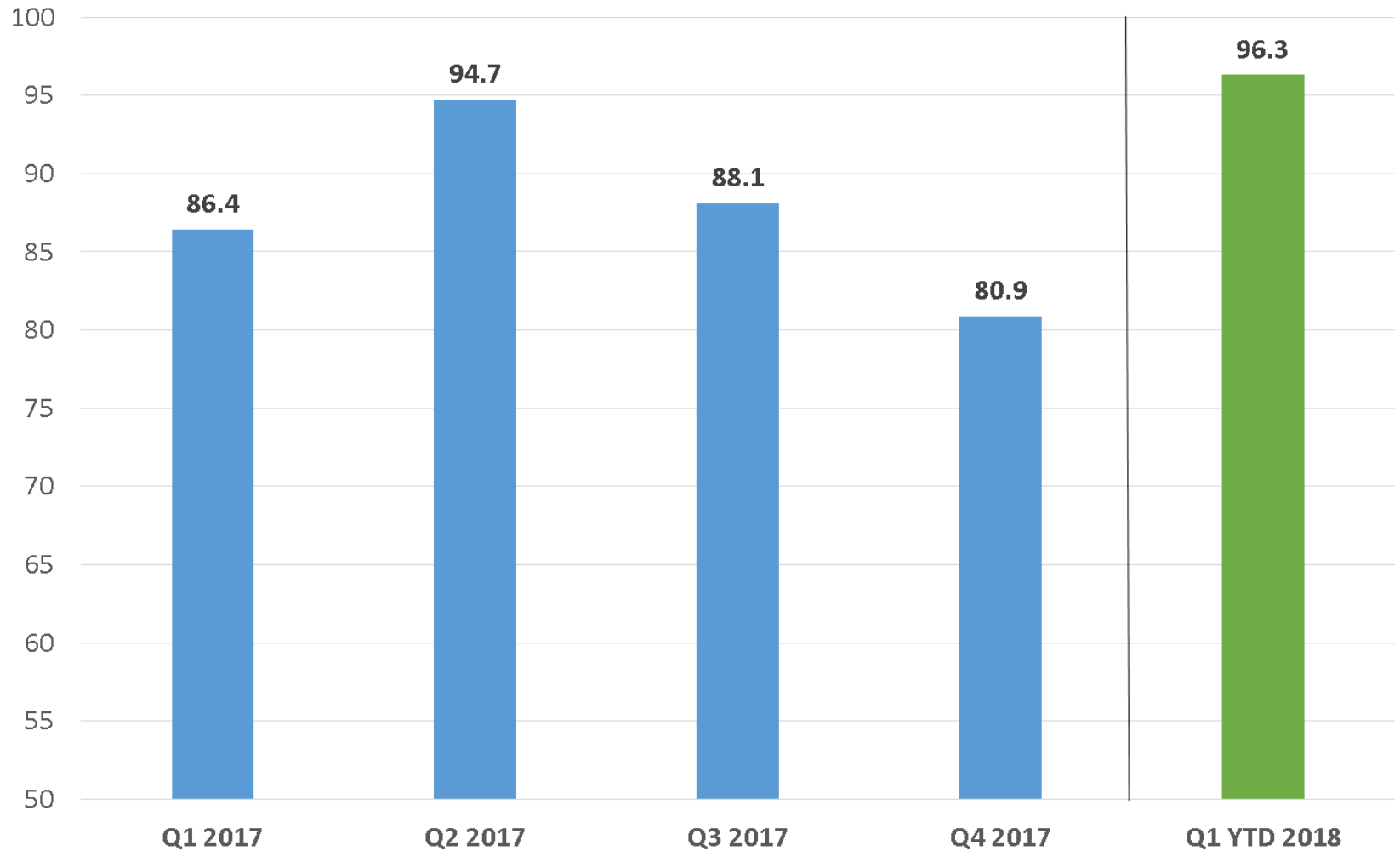


## 2-North Nurse Communication Domain Top Box %



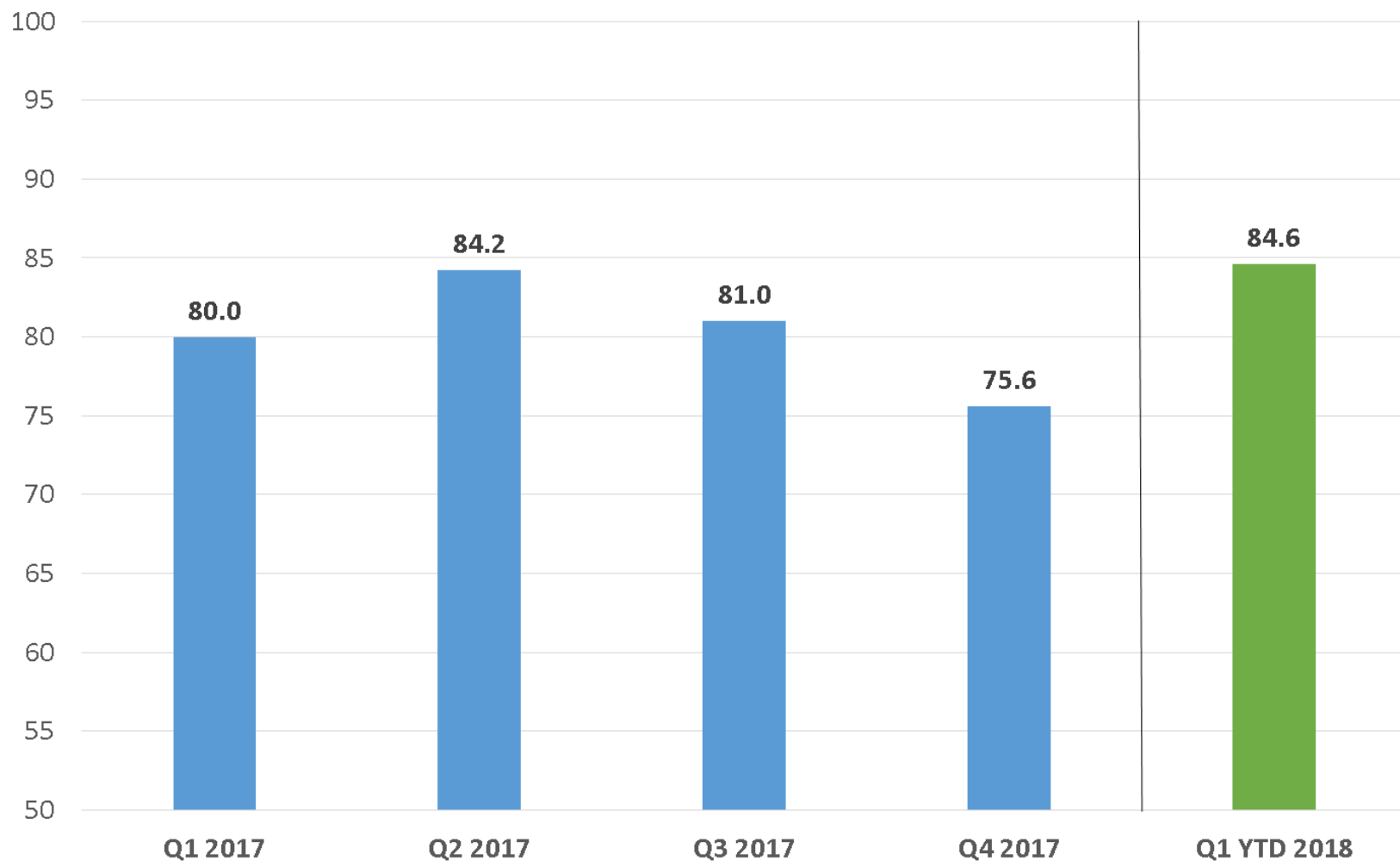
HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date.

## 2-North Nurse Courtesy and Respect Top Box %



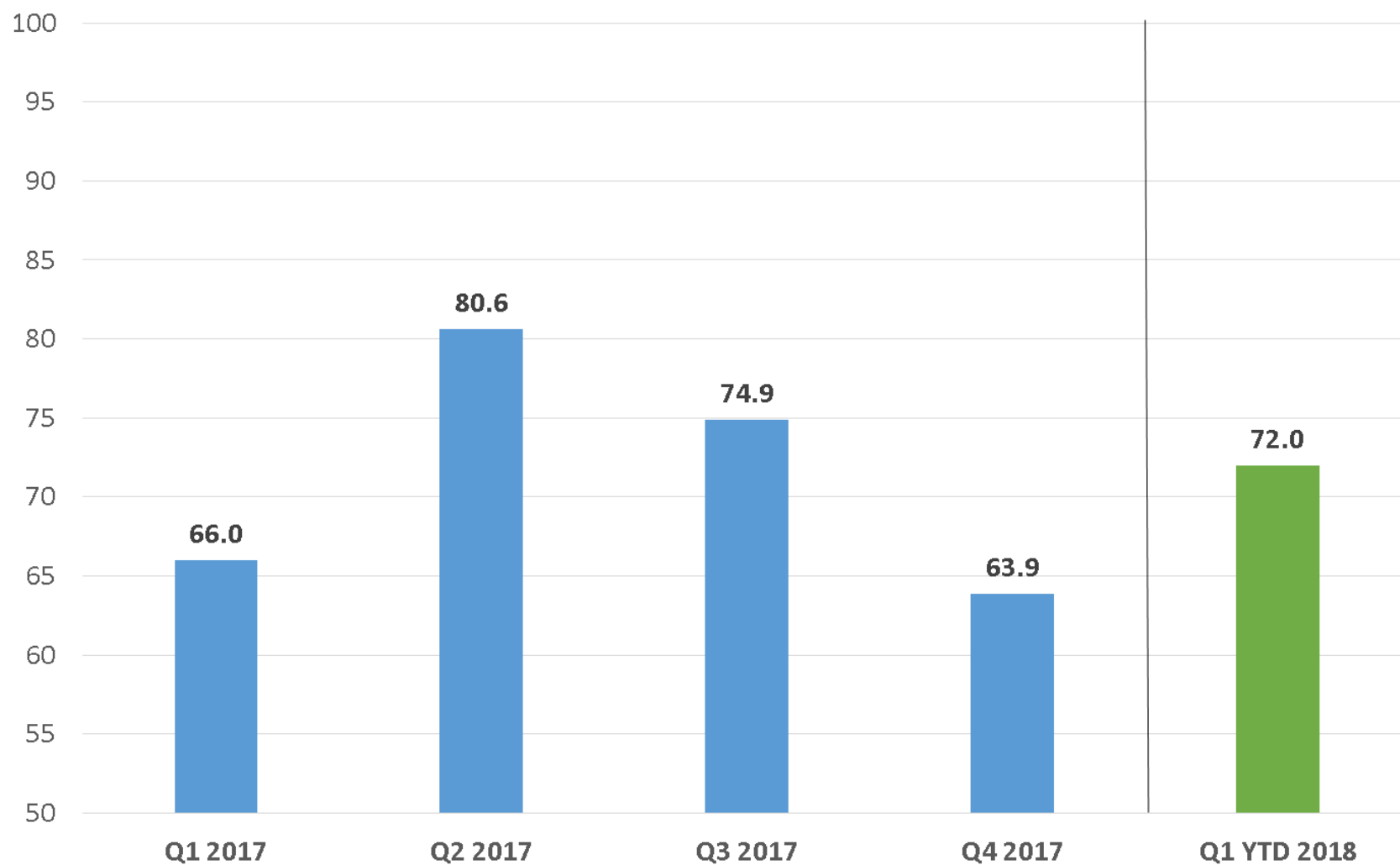
HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date

## 2-North Nurse Explains In Way You Understand Top Box %



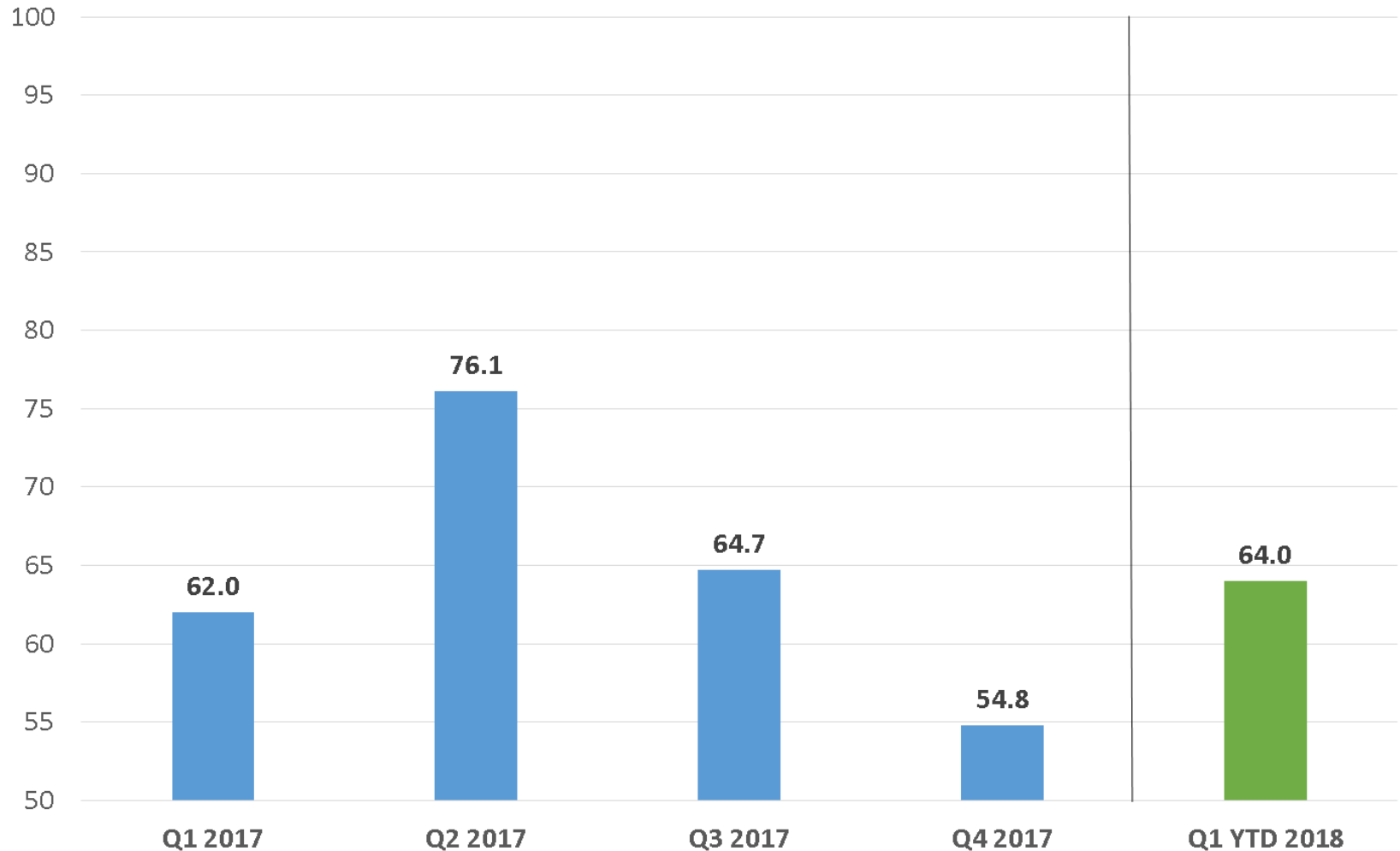
HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date

## 2-North Staff Responsiveness Domain Top Box %



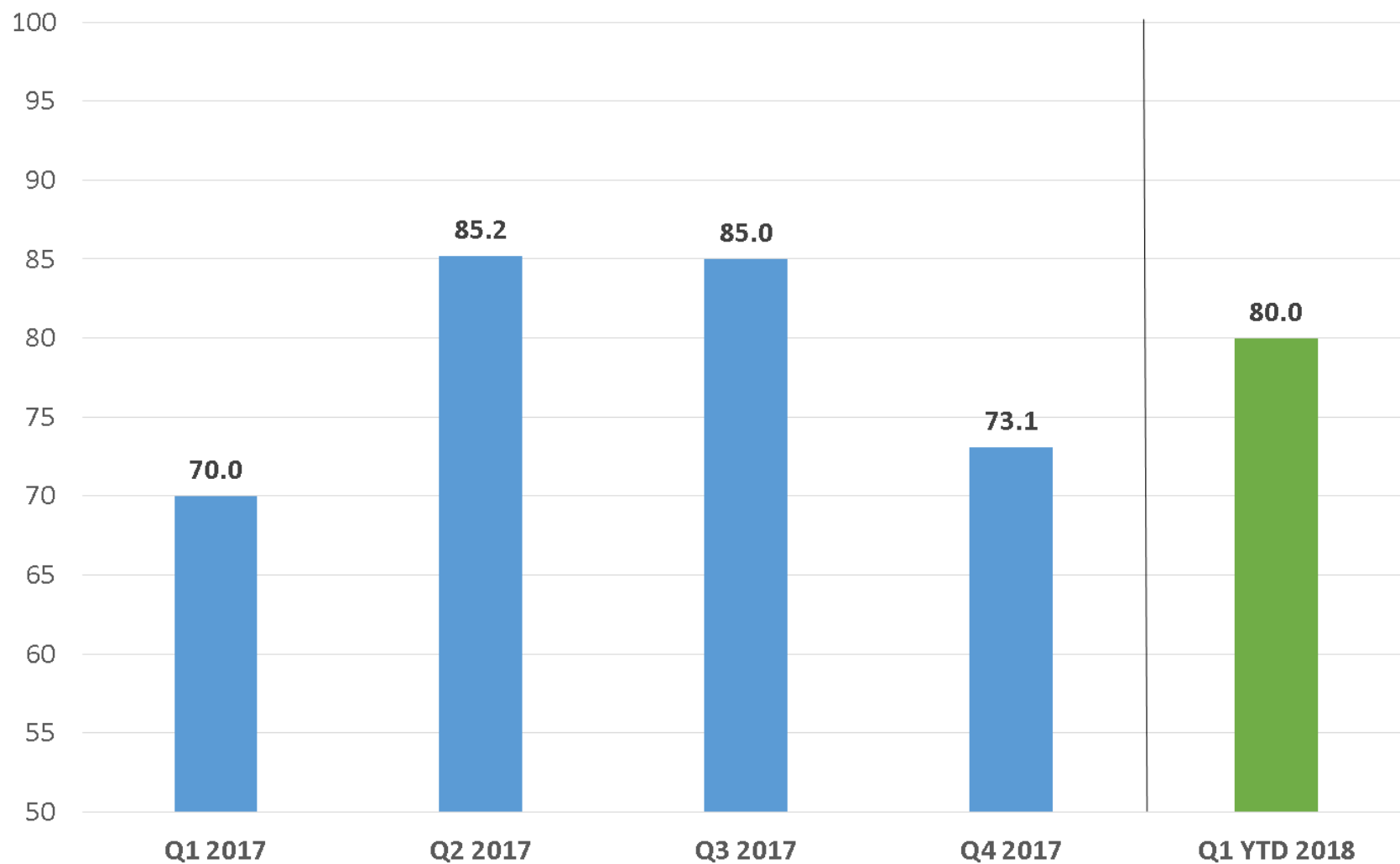
HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date

## 2-North Response to Call Bell Top Box %



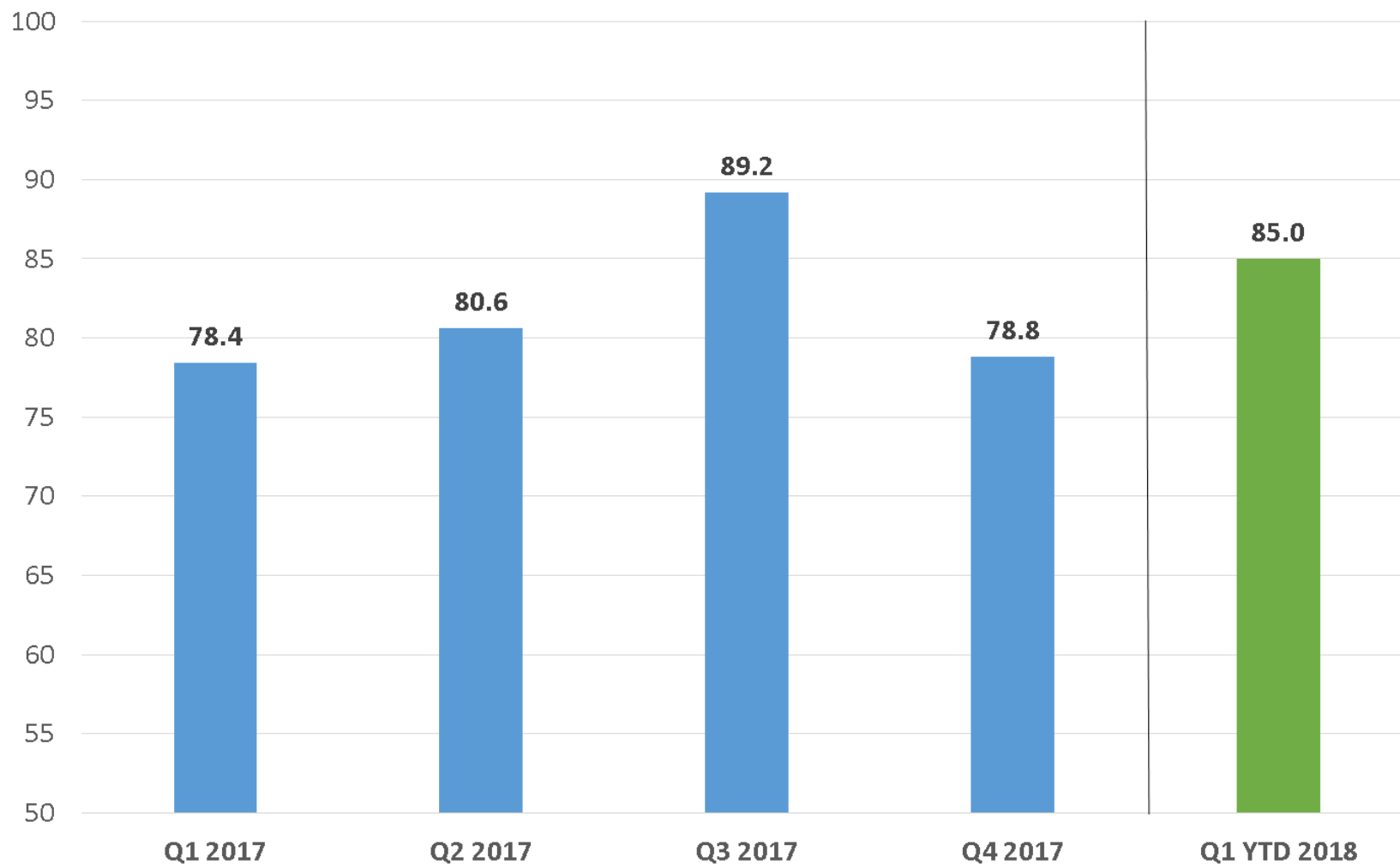
HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date

## 2-North Response to Toileting Top Box %



HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date

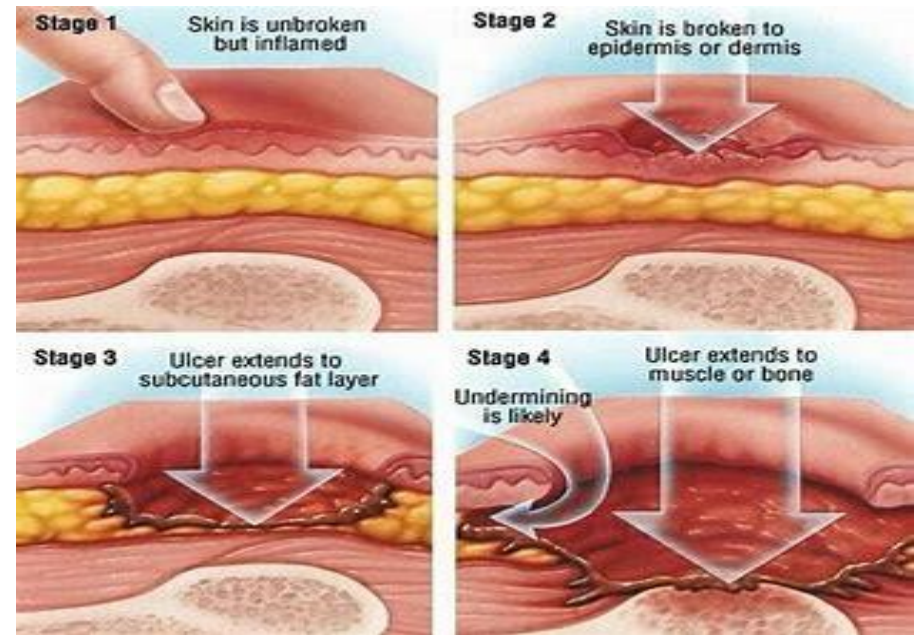
## 2-North Tell You What New Med Was For Top Box %



HCAHPS Survey vendor is Press Ganey. Data shown is top box percentage, pulled according to Discharge Date



# Falls -Pressure Injuries 2017



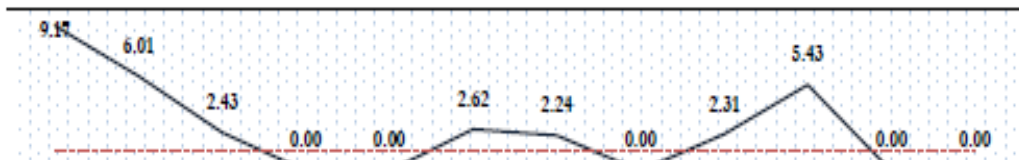
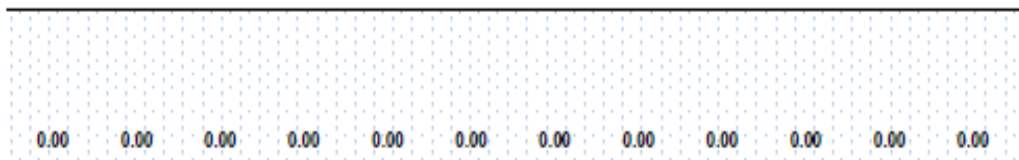
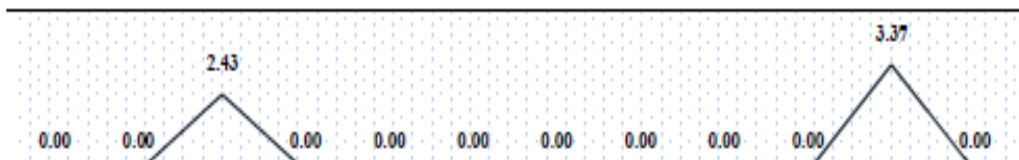
# Northwell Health

## PATIENT CARE SERVICES DASHBOARD

### PH-2 NORTH

December 2017

#### Hospital Safety

	2016	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YTD	2017 TARGETS		
																-10%	-15%
Falls Index	1.43													2.52	1.43	1.29	1.22
Falls #	7	4	2	1	0	0	1	1	0	1	2	0	0	12	7	6	5
Falls With Injury Index	0.00													0.00	0.00	0.00	0.00
Falls Injury #	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pressure Ulcer Index	0.00													0.42	0.00	0.00	0.00
Pressure Ulcer #	0	0	0	1	0	0	0	0	0	0	0	1	0	2	0	0	0

# Falls -Pressure Injuries- 2018?



Year to Date March 29<sup>th</sup> 2018

Falls.....0

Pressure Injuries.....0

# Other Additions to Hourly Rounding:

- Scheduled, Structured Senior Leadership Rounding
- Additional questions related to rounding being scored
- Rounding by Nursing Leaders with the *Cipher Tool*  
11 Patient questions related to Rounding, Pain, Privacy, Quiet, Meds, Call bells, Courtesy & Discharge
- Daily reinforcement of rounding, including weekends
- On reverse side of rounding tool information in Spanish



## Introduction

## ✓ Introduction

Yes - Rounded on Patient

## Patient Needs and Preferences

## ✓ Rounding Expectations

Yes - Comes hourly and asks all questions

## Rounding Communication

## Pain Management

## Privacy

## Quietness

## Quietness Source

Phelps Nurse Manager Rou... 2/17 X

## Patient Needs and Preferences

## Rounding Expectations

**We have a culture of hourly rounding here at Phelps Hospital. Our goal is to check in on you every hour during the day. Has a member of your nursing team come into your room about once each hour to check if you: a) are having any pain; b) need help to the bathroom; c) need to be positioned; d) have your personal items within reach; e) know your plan of care for the day?**

☒ Yes - Comes hourly and asks all questions

☐ No - Does not come hourly

☐ No - Does not go through questions

# Our Rounding Team...2 North Staff





# In Closing...

It's not how much time you spend with a patient....

It's how you spend the time.

Too often we underestimate the power of a touch, a smile, a kind word, a listening ear, an honest compliment or the smallest act of caring....

All of which have an enormous impact for the patients we care for.

**Rounding brings humanity back to the bedside along with our state of the art technology, wealth of nursing knowledge and evidence based practice**





# NICHE 25<sup>th</sup> Annual Conference April 2018

What did we learn?

What we will bring back to Phelps  
to Improve Care of  
Health System Elders?



## Focus of the conference...

## Global Information: Geriatric Environments of today

## Payment for increased geriatric care

## Transition of Care

## Emergency Response of hospitals and nurses to country and world disasters



## Information to improve patient care:

## Falls-Orthostatic BP's

## Delirium-Additional patient questions

## Dementia-Getting to know the patient





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Select All

14 of 22

**TODAY IS**

**ALL ABOUT ME**

I am from

The names of my family members are

I worked as a

I enjoy

Things that make me feel happy are

**I LIKE TO BE CALLED**

I have hearing/vision impairment & have glasses/hearing aides

I feel relaxed and calm when

I enjoy listening to

My favorite TV channel is

I don't like

**YOUR NURSE TODAY IS:**

**YOUR NURSING ASSISTANT TODAY IS:**



**Questions???**  
**Comments???**  
**Thank You**



# Resources

- Brosey, L. & Marchl, K.S. (2015). Effectiveness of structured hourly nurse rounding on patient satisfaction and clinical outcomes. *Journal of Nursing Quality Care*, 30(2), 153-159.
- Gillam, S., Gillam, A., Casier, T., & Cook, K. (2017). Increase in patient recall of nurse leader rounding. *Applied Nursing Research*, 38, 163-168.
- Halm, M. (2009). Hourly rounding: What does the evidence indicate? *American Journal of Critical Care*, 18(6), 581-584.
- Leighty, J. (2006). You called? Hourly rounding cuts call lights. Retrieved from <http://www.studergroup.com/dotCMS/knowledgeAssetDetail?inode=323256>
- Meade, C., Bursell, A., & Ketelsen, L. (2006). Effects of nursing rounds on patient care, call light use, satisfaction and safety. *American Journal of Nursing*, 106(9), 58-70.
- Neville, K., Lake, K., Lemunyer, D., Paul, D., & Wilmore, K. (2012). Nurses perception of patient rounding. *Journal of Nursing Administration*, 42(2), 83-88.
- Studer Group Nursing & Physician Leaders. (2010). *The nurse leader handbook*. Gulf Breeze, FL: Fire Starter Publishing.