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## Patient Rounding

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# Patient Rounding



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A PASSION FOR BETTER MEDICINE.™



# Background/Significance

- Patient rounding helps reduce falls by being proactive in addressing patients' needs.
- It increases the satisfaction of our patients and their families.
- It decreases the amount of call bells, easing the atmosphere for nurses and TPs.
- There is an identified need to improve real time documentation of patient rounding and increase compliance of patients and staff in rounding.



# HCAHPS

FY 2015 HCAHPS Data 'Lehigh Valley Hospital-Cedar Crest'															
	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15	Target	YTD	YTD %ile
<b>Rollup</b>	<b>71.9</b>	<b>74.0</b>	<b>75.3</b>	<b>73.1</b>	<b>71.7</b>	<b>73.8</b>	<b>72.9</b>	<b>70.8</b>	<b>72.6</b>	<b>70.4</b>	<b>72.0</b>		<b>73.1</b>	<b>72.6</b>	
n=	174	145	148	166	132	163	198	150	188	84	335			1883	
<b>Rate Hospital</b>	<b>74.1</b>	<b>73.8</b>	<b>77.7</b>	<b>71.7</b>	<b>78.8</b>	<b>76.1</b>	<b>72.2</b>	<b>68.7</b>	<b>69.7</b>	<b>76.2</b>	<b>71.3</b>		<b>71.2</b>	<b>73.2</b>	<b>61</b>
Recommend	73.4	78.6	78.9	74.1	78.8	74.2	79.2	75.5	75.8	69.8	74.2			75.7	<b>63</b>
<b>Comm w/nurses</b>	<b>78.3</b>	<b>81.4</b>	<b>81.1</b>	<b>80.5</b>	<b>77.6</b>	<b>80.6</b>	<b>79.3</b>	<b>76.6</b>	<b>79.9</b>	<b>79.6</b>	<b>79.4</b>		<b>78.7</b>	<b>79.5</b>	<b>53</b>
Courtesy/Respect	84.1	84.4	88.6	89.1	85.7	85.6	88.1	84.3	85.3	88.5	87.5			86.5	<b>54</b>
Listen Carefully	75.7	78.9	78.9	76.0	73.7	77.8	76.6	71.7	77.0	72.4	73.4			75.6	<b>47</b>
Explain Well	75.0	81.0	75.7	76.5	73.5	78.2	73.3	73.7	77.4	77.9	77.3			76.3	<b>60</b>
<b>Response of staff</b>	<b>63.1</b>	<b>63.3</b>	<b>76.4</b>	<b>66.6</b>	<b>63.1</b>	<b>65.0</b>	<b>65.3</b>	<b>65.3</b>	<b>64.9</b>	<b>58.4</b>	<b>67.1</b>		<b>66.6</b>	<b>65.7</b>	<b>51</b>
Call Button Help	62.3	64.6	72.0	65.8	64.4	63.1	63.9	65.9	59.9	53.8	61.9			63.5	<b>51</b>
Help toileting	64.0	62.1	80.8	67.3	61.8	67.0	66.7	64.8	69.9	63.0	72.3			67.9	<b>51</b>
<b>Comm w/doctors</b>	<b>75.0</b>	<b>82.0</b>	<b>74.6</b>	<b>77.4</b>	<b>76.2</b>	<b>81.9</b>	<b>79.1</b>	<b>79.6</b>	<b>76.4</b>	<b>73.5</b>	<b>78.1</b>		<b>81.4</b>	<b>77.8</b>	<b>27</b>
Courtesy/Respect	83.6	86.3	83.2	85.5	85.6	89.2	89.9	85.0	82.1	76.5	84.3			85.0	<b>32</b>
Listen Carefully	72.7	80.8	70.9	73.0	76.7	78.3	76.9	77.0	74.2	73.8	74.9			75.4	<b>24</b>
Explain Well	68.8	78.8	69.6	73.6	66.2	78.2	70.4	77.0	73.0	70.1	75.1			73.1	<b>31</b>
<b>Hospital Environment</b>	<b>64.3</b>	<b>69.1</b>	<b>65.8</b>	<b>63.1</b>	<b>65.7</b>	<b>70.4</b>	<b>64.4</b>	<b>63.5</b>	<b>67.7</b>	<b>60.6</b>	<b>62.2</b>		<b>66.7</b>	<b>65.1</b>	<b>49</b>
Cleanliness	<b>76.3</b>	<b>72.2</b>	<b>76.5</b>	<b>73.8</b>	<b>75.4</b>	<b>78.3</b>	<b>70.5</b>	<b>71.3</b>	<b>79.1</b>	<b>73.6</b>	<b>75.0</b>		<b>74.3</b>	<b>74.8</b>	<b>61</b>
Quietness	<b>52.3</b>	<b>66.0</b>	<b>55.0</b>	<b>52.4</b>	<b>56.1</b>	<b>62.4</b>	<b>58.4</b>	<b>55.6</b>	<b>56.3</b>	<b>47.6</b>	<b>49.4</b>		<b>59.1</b>	<b>55.3</b>	<b>41</b>
<b>Pain Management</b>	<b>70.8</b>	<b>70.2</b>	<b>74.0</b>	<b>72.7</b>	<b>63.3</b>	<b>67.0</b>	<b>71.7</b>	<b>67.4</b>	<b>69.4</b>	<b>67.3</b>	<b>69.8</b>		<b>71.2</b>	<b>69.7</b>	<b>41</b>
Well Controlled	62.9	58.6	62.0	67.5	57.1	58.9	66.9	57.7	61.6	59.6	59.1			61.2	<b>37</b>
Staff do everything	78.6	81.8	86.0	77.9	69.4	75.0	76.5	77.1	77.2	75.0	80.5			78.2	<b>46</b>
<b>Medicine</b>	<b>61.8</b>	<b>64.6</b>	<b>67.6</b>	<b>64.0</b>	<b>61.4</b>	<b>62.9</b>	<b>64.1</b>	<b>60.1</b>	<b>65.2</b>	<b>59.3</b>	<b>59.5</b>		<b>63.6</b>	<b>62.6</b>	<b>45</b>
Explain Meds	75.6	81.9	78.8	76.5	72.7	74.2	80.6	72.6	78.6	70.6	74.3			76.3	<b>44</b>
Side Effects	47.9	47.3	56.3	51.5	50.0	51.6	47.6	47.6	51.8	48.1	44.6			49.0	<b>49</b>
<b>Discharge</b>	<b>87.5</b>	<b>87.7</b>	<b>84.9</b>	<b>88.5</b>	<b>87.1</b>	<b>86.7</b>	<b>87.4</b>	<b>85.5</b>	<b>87.5</b>	<b>87.9</b>	<b>88.7</b>		<b>85.4</b>	<b>87.4</b>	<b>53</b>
Help Discussed	85.5	82.3	80.6	87.7	86.0	84.2	85.9	83.9	83.2	85.9	85.9			84.7	<b>54</b>
Prob To Look For	89.6	93.0	89.2	89.3	88.3	89.2	88.8	87.1	91.9	90.0	91.5			90.0	<b>51</b>

# PICO QUESTION

In adult medical/surgical staff and patients, does multiple forms of education on rounding compared to the current practice, increase compliance and real time documentation of rounding?

- P:** Staff and patients on an adult medical-surgical unit
- I:** Increased education through teach back, TLC and visual bulletin boards and the offering of incentives
- C:** Current practice and compliance
- O:** Increase in compliance, real time documentation of current rounding and patient satisfaction.



# The Iowa Model of Evidence-Based Practice to Promote Quality Care

- Problem Focused Trigger
  - Internal/External Benchmarking Data
    - Internal- unit based auditing
    - External- HCAHPS
      - Response of staff
      - Pain management
  - Identification of clinical problem

# EVIDENCE

- Search Engines: CINAHL, OVID
- Key words: Purposeful rounding, nursing, improving patient rounding, patient rounding, intentional rounding, falls

# EVIDENCE

- ½ of nurses who filled out nurse satisfaction survey after implementation of hourly rounding stated they felt the number of call bells decreased (Harrington, 2013).
- Only 8% of patients pre-implementation of purposeful rounding felt confident that the nursing staff could meet the patient's needs, whereas after implementation, 72% of patients were confident (Woodward, 2009).
- Compliance with nurses filling out additional paperwork for patient rounding study was very low (Hodgson, 2012).
- Nurse rounding logs were at only 30% compliance during trial periods of patient rounding (Harrington, 2013).



# Current Practice at LVHN

- A staff member asks the patient about the four P's (position, potty, pain and personal items) and then checks the environment.
- Real time documentation in the Patient Rounding flowsheet by the nurse or TP in a timely manner, no more than 10 minutes before or 10 minutes after the hour the rounding was due to be completed.

# Barriers to implementation

- Knowledge and motivation of staff
- Availability of support staff
- Lack of documentation compliance
- Lack of consistency in staff between rounds
- Education of patients
- Continuing to place emphasis on rounds when study is over

# IMPLEMENTATION

- **Baseline Data**
  - Auditing five patient rooms from each unit over a three day period (Sunday, Monday, Thursday).
- **Evaluation (Post data) of Process & Outcomes**
  - Auditing five patient rooms after education has been implemented.

# Unit Based Education

- **4K:** No education implemented (control unit)
- **5K:** TLC module, poster board presentation during huddle, staff meetings, picture reminders on computers
- **6K:** TLC module



# Practice Change

- Supplemental education for nurses and technical partners
- Ongoing focus

The screenshot displays the EPIC Flowsheets interface for an adult patient. The 'Vital Signs' tab is selected and circled in pink. The 'Patient Rounding' section is also circled in pink. A large yellow arrow points from the word 'EPIC' towards the circled 'Patient Rounding' section.

Mode: Accordion Expanded View All	1m	5m	10m	15m	30m	1h	2h	4h	8h	24h	Based On: 0700	Reset	Now
<b>Vital Signs</b>													
Oxygen Therapy													
ECG													
Monitoring													
Height and Weight													
Patient Rounding													
Patient Rounding													
ROADMAP													
Provider Notification													
Therapy / Specialty B...													
ST Segment (mV)													
T-Wave													
Monitoring													
Telemetry Monitor On													
Bedside Cardiac Monitor On													
Additional Cardiac Devices													
Bed Epilepsy Monitor On													
Bed Epilepsy Monitor Alarm													
Height and Weight													
Height													
Weight													
Post Dialysis Weight													
BSA (Calculated - sq m)													
BMI (Calculated)													
Patient Rounding													
Patient Rounding													
ROADMAP													
What I need to do and learn about today													
Possible Discharge Date													
Procedure 1													
Procedure 2													

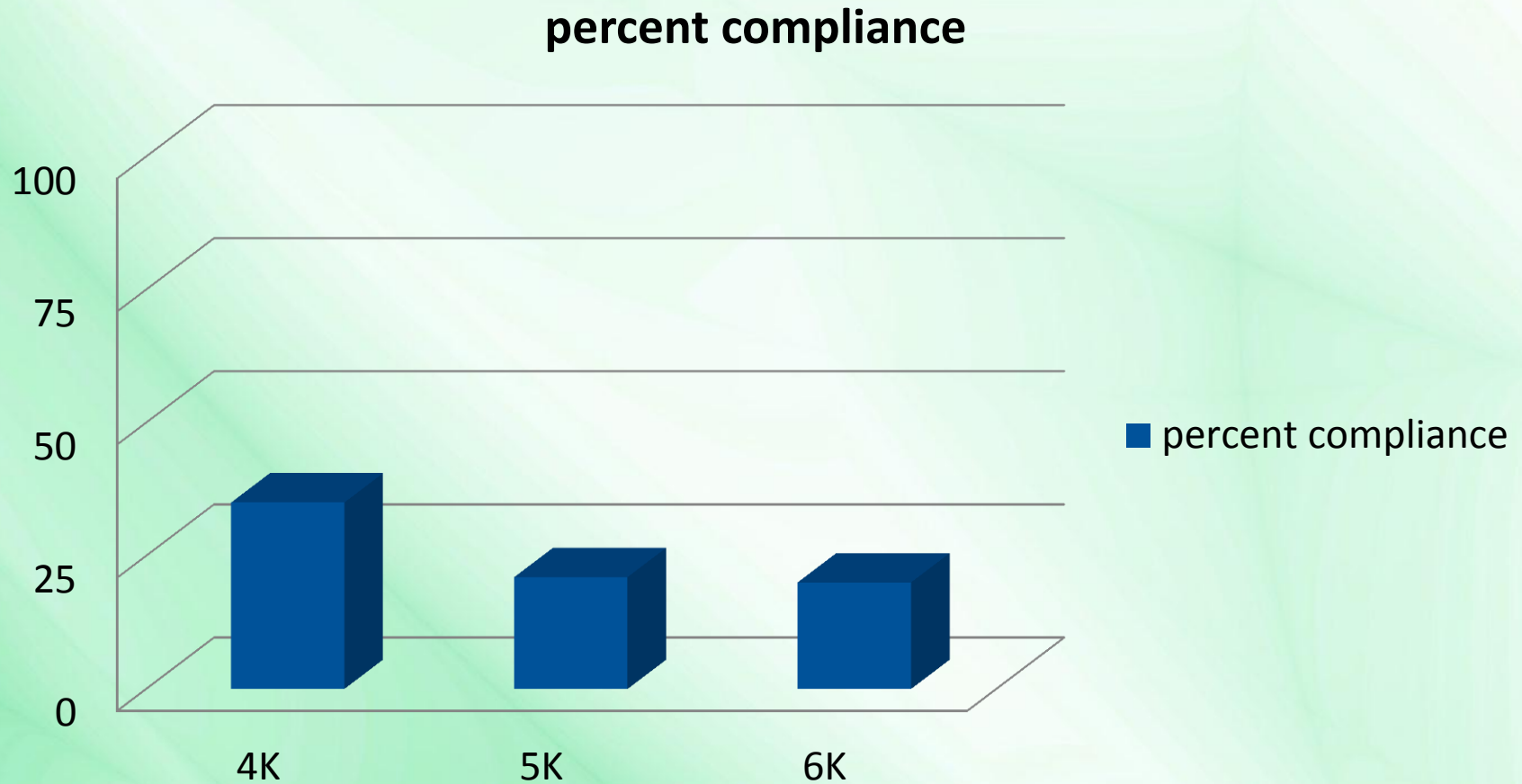
EPIC



# RESULTS

- Technical Partners had higher compliance rates with real time patient rounding versus Registered Nurses (56% v. 44%)
- The education implemented on 5K (Poster board, memory cue cards, TLC module) showed the greatest improvement to staff compliance with an increase from 21% to 76%.
- The TLC module implemented on 6K did not greatly improve compliance with real time rounding as compliance went from 20% to 24%.
- The data collected from 4K stayed virtually consistent regarding compliance pre and post education; however, 4K was our control unit.

# Pre- Education Data

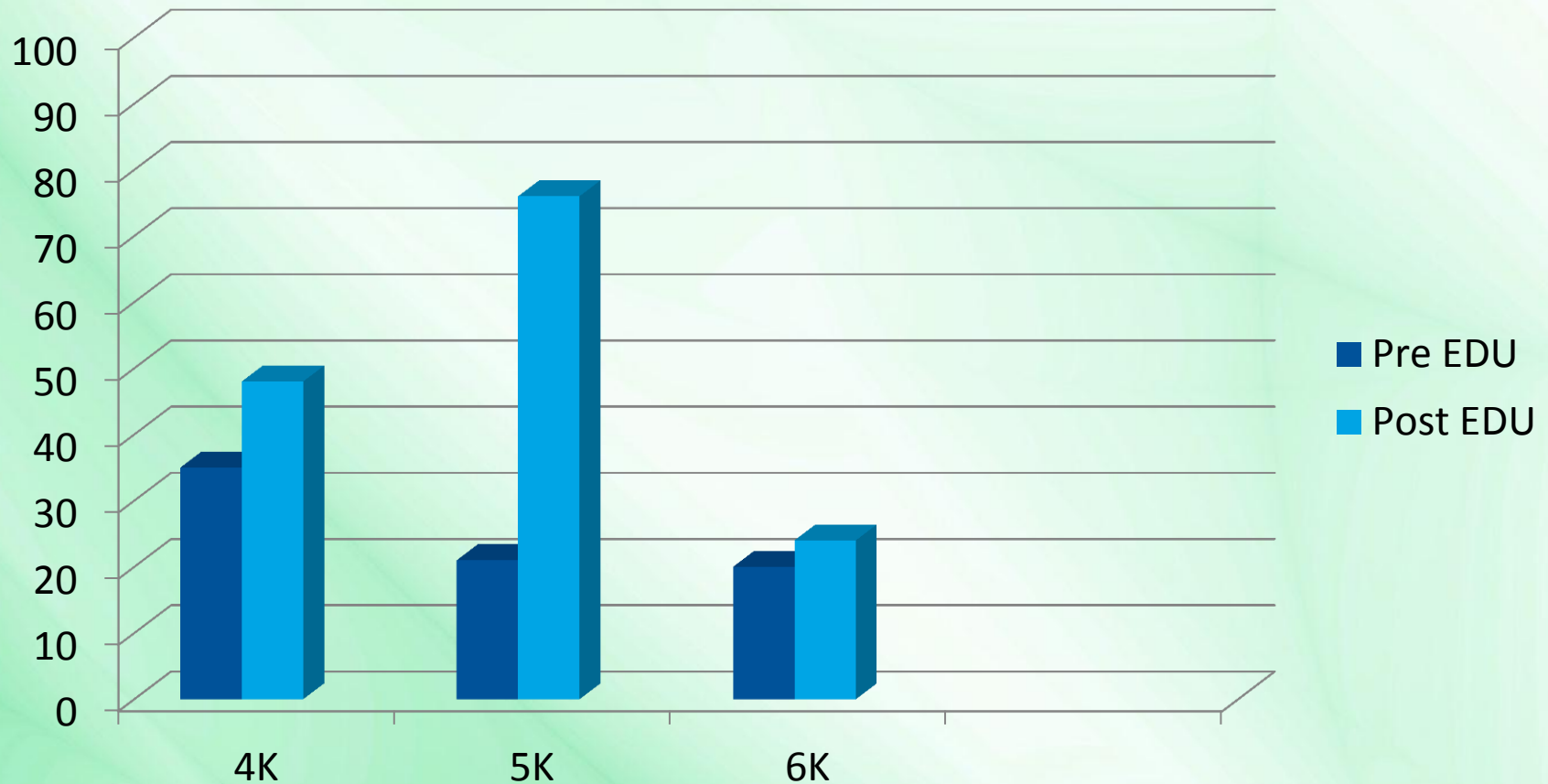


# Post- Education Data

Percent Compliance

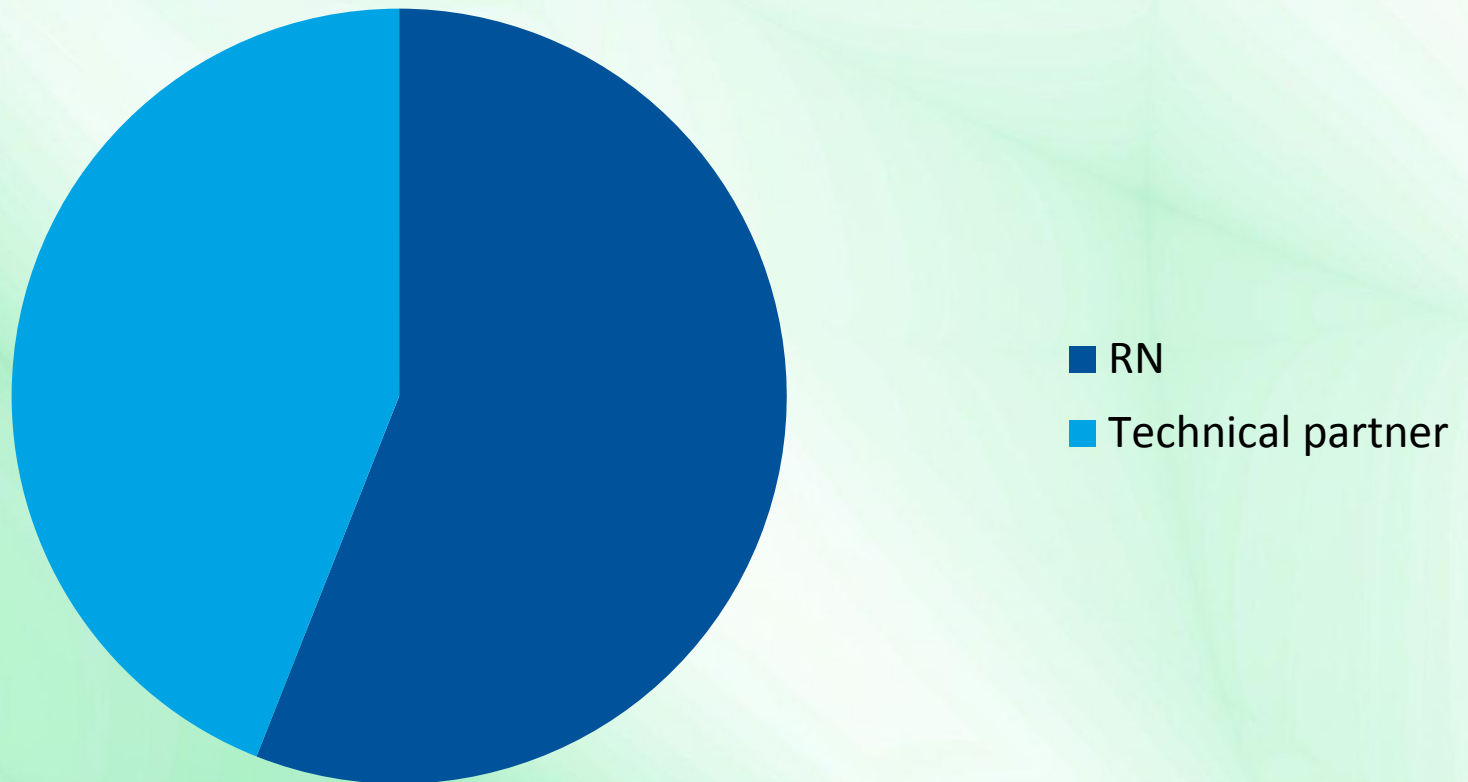


# Pre Versus Post Education Data



# Staff compliance

**RN vs TP (all data)**



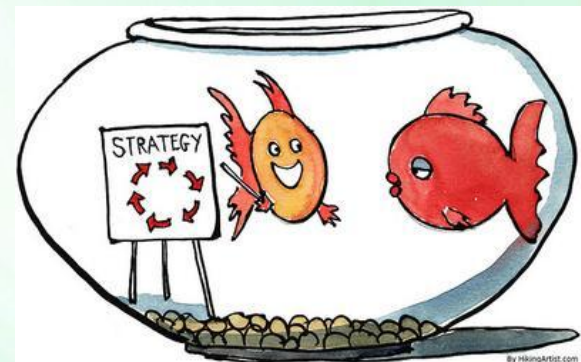


# Implications for LVHN

- An increase in patient satisfaction.
- An increase with nurse and technical partner compliance with real time rounding and documentation.
- A decrease in various injuries that can occur to patients when their needs are not met or addressed.

# Strategic Dissemination of Results

- Plan:
  - UHC/AACN Nurse Residency Graduation
  - Share results with our colleagues at a unit level.



# Lessons Learned

- Ongoing education on all units is key to patient satisfaction and staff compliance with real time documentation of patient rounding.
- Memory cards on computers, a poster board presentation in the Daily Safety Huddle and a TLC module best improved compliance with real time patient rounding.
- Communication between RNs and technical partners that rounding is done in real time.



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# Make It Happen

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