Hourly Rounding Toolkit

This document is a support guide for the Hourly Rounding resources located in the toolkit. In addition to explaining the resources, this document also defines Hourly Rounding and illustrates the key elements for creating a successful program.

Key Elements for a Successful Patient Experience & Hourly Rounding Program

Below are the 5 key elements for creating a successful Hourly Rounding program. Toolkit resources that support each of the elements are noted in the “Related Resources” section. Definitions of each toolkit resource are located throughout this document.

Patient Experience & Strategies for Improving the Value of Health Care

- Leadership Create a Shared Vision Using Appreciative Inquiry
- Spread the Shared Vision Using Narrative and Related Tools
- Commit to Measurement of the Outcomes that Matter to Patients
- Create Accountability at the Levels at Which Performance Can Improve
- Use Transparency as a Competitive Differentiator

Hourly Rounding

1. Define What Purposeful Hourly Rounding is & What it is Not
   It is a simple way to give more structure to our communication, a way to meet patient needs while also saving time, a way to address safety and quality, and a chance to make our interactions thorough and purposeful. It is NOT another task, a flavor of the month program, or going away.

   Define what Hourly Rounding is at your hospital – who can/will be rounding? How will we track this program to make sure it’s happening? How will this be rolled out? How will people be held accountable?

   Related Resources:
   - Hourly Rounding Defined
   - Statement of Commitment

2. Script Words & Behaviors
   Create a greeting, assessment, and close to frame expectations and relieve anxiety about what to expect.

   Related Resources:
   - Hourly Rounding Scripting

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3. **Educate & Evaluate Your Staff**

Expectations should be set during initial nursing orientation. Engage entire staff in revamp of existing program. Provide numerous tools (pocket cards, logs, scripting) as supplemental information for staff to assist in implementation on their units. Provide on the spot feedback and identify barriers to success. Integrate hourly round communication tactics into monthly meetings. Use staff service stories by asking “Tell me about a time you were proactive with a patient”. Assess staff performance and ensure that all staff can clearly and consistently articulate expected scripts/behaviors.

**Related Resources:**
- Hourly Rounding Data Resources
- Hourly Rounding Sample Rounding Logs
- Hourly Rounding Scripting
- Hourly Rounding Door Poster
- Hourly Rounding Pocket Cards
- Hourly Rounding Assessment and Training Tips
- Hourly Rounding Evaluation Checklist

4. **Report Your Progress**

Have multiple ways to share information – post on unit (signage, poster boards, etc.); discuss during huddles, review at staff meetings, include in newsletters, provide an email or letter from CNO.

**Related Resources:**
- Hourly Rounding Data Resources

5. **Reward Your Staff**

Develop a formal plan for reward and recognition of hourly rounding. Be timely and specific. Utilize Leader Rounding for reward and recognition as well as to ensure that staff is upholding set behaviors and expectations.

**Related Resources:**
- Leader Rounding Toolkit

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**Purposeful Hourly Rounding Defined**

Rounding involves a series of activities that are designed to promote patient safety, improve patient outcomes, improve patient satisfaction, and enhance care delivery. During a round, a patient’s pain, elimination needs, and position are addressed. Pain and elimination needs are assessed as they may be potential indicators of a change in the patient’s medical condition. Assisting patients with position changes during a round helps to maintain skin integrity and support circulation. Making sure that patient belongings are within reach and assisting patients with their elimination needs are activities associated with fall prevention. One way in which rounding enhances care delivery is through the reduction in patient call light use.
Purposeful rounding involves building a trusting relationship with the patient and family while demonstrating compassionate, connected, care. Compassionate, connected, care adds another dimension to rounding. Purposeful rounding is patient-centered. During a purposeful round, the healthcare provider anticipates patient and family feelings—fears, concerns, worries, and anxieties and proactively addresses these emotional needs. When conducting a purposeful round, the healthcare provider seeks to understand what’s important to the patient as well as the impact of illness on the patient and family. The objective of purposeful rounding is not only mitigating patient physical suffering but also to reduce the stress and anxiety associated with illness.

Hourly Rounding, Compassionate Connected Care, and Examples

This resource is a graphic representation of how Compassionate Connected Care can be integrated into the existing best practices of Hourly Rounding. The 4 “Ps” generally addressed during an hourly round include: Pain, Potty, Position, and Possessions. These are the foundational elements to ensure patient safety. This grid demonstrates how each required action (“P’s”) should be conducted in order to promote compassionate connected care, which results in patient centered Hourly Rounding.

Use this resource to promote a better understanding of purposeful Hourly Rounding and provide specific examples for daily practice.
<table>
<thead>
<tr>
<th>Action</th>
<th>Compassionate</th>
<th>Connected</th>
<th>Care</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Pain</strong></td>
<td>Reduce anxiety and suffering</td>
<td>Ensure collaborative communication between providers</td>
<td>Empathize with patient suffering</td>
<td>Offer hot/cold packs, music, dim the lights</td>
</tr>
<tr>
<td></td>
<td>Identify functional pain level</td>
<td></td>
<td>Include patient in decisions about treatment</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Offer adjunct therapies</td>
<td></td>
<td></td>
<td>Discuss pain expectations</td>
</tr>
<tr>
<td><strong>Potty</strong></td>
<td>Recognize urgency</td>
<td>Prompt bathroom needs</td>
<td>Acknowledge patient vulnerability</td>
<td>Provide wipes, hand sanitizer, etc.)</td>
</tr>
<tr>
<td></td>
<td>Respect privacy</td>
<td>Ensure collaborative communication between providers</td>
<td>Anticipate patient needs</td>
<td>Monitor patient safety measures (I&amp;O’s)</td>
</tr>
<tr>
<td><strong>Position</strong></td>
<td>Maintain patient comfort</td>
<td>Support patient safety</td>
<td>Solicit patient input and provide choices</td>
<td>Conduct skin assessment during transitions and support fall prevention</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Include patient in decisions about treatment</td>
<td></td>
</tr>
<tr>
<td><strong>Possessions</strong></td>
<td>Place patient belongings within reach</td>
<td>Reinforce how to contact provider with needs</td>
<td>Inquire about additional needs</td>
<td>Place the call light, phone, tissues, etc. in close proximity</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Ask if there are additional items the patient desires</td>
</tr>
</tbody>
</table>
Use this data when trying to make the case for the impact of hourly and leader rounding in your organization.

In these graphs, questions related to patients being rounded on every hour by nurses or staff members are combined to create this data using the “Yes,” “Always” and “Every Hour” responses. For leader rounding, questions related to patients being seen by a nurse manager, manager or other hospital leader were combined to create this data using the “Yes” or “Always” responses.

**Hourly Rounding Log Examples**

These sample logs are examples of how staff can purposefully and intentionally document their completed hourly rounds. Accountability is necessary to achieve a sustainable state of improvement; and these logs hold staff accountable by providing a measurable way to track whether or not rounding is occurring every hour. The staff member records the time of the last visit, completed tasks, comments, the promised return time, and the objectives for the next visit. Logs help to foster communication between staff members throughout the day. The unit manager can also use these logs to identify any potential service recovery issues.

Having a way to measure whether or not behavior is occurring serves as an additional layer of accountability. However, it is not simply enough to have logs in place. It is important for organizations to designate who is responsible for ensuring that the logs are accurately and consistently filled out. In addition, someone needs to compile the results and have action items for areas that are not covered or for rounding that is not consistently done. These logs should be supplemented by leader rounding, observation, and additional surveying to ensure that the logs accurately reflect the patient experience.

**Hourly Rounding Scripting**

This document provides sample scripts for what to say when greeting patients, completing an assessment and leaving the room during hourly rounds. In addition, this resource provides the “do's/don'ts” to ensure a successful, consistent message to your patients.

**Hourly Rounding Door Cards**

You can set patient expectations by letting them know what will happen during Hourly Rounding. Staff should place this poster in patient care rooms, making sure it is highly visible to patients. In addition, this same document can be printed and placed in the welcome packet.

**Hourly Pocket Cards**

This is a card to be used by nursing staff as a reminder of the expectations of Hourly Rounding.

You should distribute these cards to the nursing staff responsible for Hourly Rounding. Nursing staff can keep these cards in their pocket or place on the back of their name badge.

**Hourly Rounding Assessment and Training Tips**

Repeated studies of committed, purposeful hourly programs point out its many benefits on patient and staff experiences and health. Those benefits include:

- A reduction in patient falls
- A reduction in call light use
- A decline in skin breakdowns
- A reduction in the daily distance walked by nursing staff
- An increase in patient satisfaction

Yet, hourly rounding doesn’t always take place! In order for patients and organizations to experience the benefits of hourly rounding, staff members need to round consistently and in alignment with expected behavior standards.

Reference this document for tips on assessing your current rounding program.

In addition, your organization most likely has a training protocol in place for hourly rounding. After reviewing your current training procedures, reference Hourly Rounding Assessment and Training Tips for further ideas. Consider whether or not you need to implement additional steps.

**Hourly Rounding Evaluation Checklist**

Use this resource to assess staff performance and ensure they exhibit the desired behaviors taught during training. Assess both verbal and non-verbal cues and whether or not staff members follow protocol. Look for previously designated scripts/behaviors, which should have been provided to participants well in advance.

You may decide to score your evaluations. Should you choose to do so, simply complete the *Hourly Rounding Evaluation Checklist* and tally the score at the bottom. Divide the number of questions for which you answered yes by the total number of questions on the evaluation. Press Ganey recommends a passing score of 80% or greater, but it is ultimately up to your organization to determine pass/fail criteria.