# Hourly Rounds and the Patient Experience

The following summaries of recent peer-reviewed studies and articles describe the impact of hourly rounds on patient experience, patient safety, quality, and outcomes.

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| Reimer, N., & Herbener, L. (2014). Round and round we go: Rounding strategies to impact exemplary professional practice. Clinical Journal of Oncology Nursing, 18(6), 654-660. | To detail six rounding methodologies implemented within the inpatient, emergency department, and ambulatory patient care areas at Lehigh Valley Hospital, and their positive outcomes. | - Positive outcomes associated with the rounds were achieved for patient, employee, and physician satisfaction, as well as for clinical quality indicators.  
- The overall trend for falls, pressure ulcers, and catheter-associated urinary tract infections decreased.  
- Patient satisfaction with attention to special or personal needs and adequate precautions to protect safety increased. |
| Shepard, L.H. (2013). Stop going in circles! Break the barriers to hourly rounding. Nursing Management, 44(2), 13-15. | To explore strategies for overcoming common barriers to hourly rounds including buy-in, acuity levels, time management, and unexpected interruptions. | - Nurse leaders within facilities committed to hourly rounds should assess barriers faced by their nurses, then take immediate steps to alleviate or modify them.  
- Help influential, experienced nurses understand and accept the concept of hourly rounds, which will motivate others to get on board.  
- When a nurse is assigned to six or more patients with moderate to high care demands, organizing and prioritizing the plan of care becomes a barrier that interferes with hourly rounds.  
- The key to managing time is to perfect hourly rounds.  
- Team nursing is one possible solution to reducing interruptions. |
| Dettrick, L. M., Baker, K., Paxton, H., Flores, M., & Swavely, D. (2012). Hourly rounding: Challenges with implementation of an evidence-based process. Journal of Nursing Care Quality, 27(1), 13-19. | To use ethnographic methods to examine problems with the implementation of hourly rounds on two similar inpatient units. | - Careful planning, communication, implementation, and evaluation are required for successful implementation of a nursing practice change.  
- Clear communication and education are essential because staff members need to know why they are being asked to perform a new task and what the new process means for patient care.  
- Unit-level educational support, including checklists and behavior prompts, are important in embedding new processes into unit workflow. |
| Neville, K., Lake, K., LeMunyon, D., Paul, D., & Whitmore, K. (2012). Nurses' perceptions of patient rounding. The Journal of Nursing Administration, 42(2), 83-88. | To explore hospital staff nurses' perceptions toward the practice of patient rounding. | - Nurses identified rounding as valuable and perceived hourly rounds to be beneficial to patients and families but less beneficial to their own professional practice.  
- Through rounding, nurses can be more present, address patient concerns, be proactive in the management of patient care, and provide for patient needs based on clinical assessment data.  
- Challenges to rounding as a practice include issues of documentation, patient ratios, and skill mix. |
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▪ If nursing leaders want to implement hourly rounds protocols successfully, attention should be focused on enlisting staff champions to ensure rounding behaviors are performed consistently on all shifts.  
▪ Data should be generated and distributed to staff as positive reinforcement of rounding outcomes. |
▪ Process themes include a library of tools to use incorporating both patient and staff feedback.  
▪ Outcome themes include patient satisfaction and patient perception of being well cared for.  
▪ The authors recommend abandonment of routinization and adoption of flexibility to sustain successful implementation of hourly rounds. |
| Sherrod, B. C., Brown, R., Vroom, J., & Sullivan, D. T. (2012). *Round with purpose*, *Nursing Management*, 43(1), 32-38. | To evaluate the effectiveness of a purposeful rounding program specific to key outcome measures: (a) decreasing total falls and falls with injury, (b) decreasing HAPUs, and (c) increasing patient satisfaction with nursing services. | ▪ Although there was no change in the number of total falls on the unit, the number of falls with injury was reduced even in this short period of time with a small sample size.  
▪ Although not statistically significant, the clinical importance of reducing HAPU rates is encouraging.  
▪ By purposefully rounding to patients, staff realized the importance of patient repositioning; a routine aspect of care that’s often not addressed, leading to a HAPU.  
▪ Post-implementation patient satisfaction scores had significant improvement with all questions above the 75th percentile. |