



# FoNS Improvement Insights

## Proactive Patient Rounding: Developing Nursing Practice to Improve the Quality of Patient Care

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**Duration of project:** October 2009 - October 2010

**Keywords:** Nursing rounds, patient satisfaction, nursing response, collaborative team working, observation, audit, reflection, practice development

### Project background

The project was carried out because a number of informal and formal patient complaints on the orthopaedic unit suggested that nursing staff were reactive rather than proactive to patient's needs e.g. patients reported having to ask for help and relatives had to ask for information. A national patient survey across the NHS in England indicated that 15% of patients wait longer than five minutes for a response to a call bell with a minority (2%) saying that they never received any help.

Nursing rounds involve staff proactively 'asking' patients on a regular (one or two hourly) basis about their needs. Research reveals that following the introduction of rounding, patients have a more positive view on the timeliness of response to requests, patient satisfaction increases and the use of call bells decreases.

Initial staff perceptions were that proactive patient rounding (PPR) would increase the nursing workload.

### Aim and objectives of the project

The aim of the project was to improve the service for patients and increase patient satisfaction with nursing care by introducing and evaluating two hourly PPR on two wards in an orthopaedic unit in an acute NHS Trust hospital.

The objectives of the project were to:

- Identify from patients and carers the types of needs when calling for nursing help and their perception of what a 'timely response' was
- Identify enablers and barriers to introducing PPR
- Devise a nursing standard for PPR, and an audit tool to evaluate its implementation
- Educate nursing staff in the use of PPR in practice
- Implement and evaluate the use of PPR in practice from a patient/carer and nursing staff perspective

### Key activities and outcomes from the project

A range of methods and approaches were utilised that included audits of care; patient and staff questionnaires and interviews; facilitated staff education and reflection sessions. The project

was divided into four phases; exploratory; staff education; implementation and evaluation.

- **Exploratory phase**  
Care before the introduction of PPR on wards was inconsistent with some nurses introducing themselves and proactively helping patients when they were first admitted. Patients wanted nurses to be more approachable and proactive. Key reasons for patients seeking nursing assistance were elimination, pain, and nutrition. Staff concerns about PPR were time/staffing levels; staff consistency; patient issues; unrealistic patient expectations.
- **Staff education phase**  
Based on video materials and discussion the practical application of PPR was considered and a question 'script' developed for staff on implementation.
- **Implementation phase**  
Daily patient and relative/carer audit results indicated improvements in staff responsiveness to patients and visitors and PPR integrated with other nursing activities. Staff concerns related to the documentation of PPR and whether it was needed for all patients and concerns about not knowing answers to relative's questions.
- **Evaluation phase**  
There was evidence of a shift on both wards in patient perceptions of nursing attitude and proactiveness in comparison to the baseline data. Patient interview results were similar to the baseline audit with improvements in the patient experience but inconsistency on both wards. There was evidence of improved relationships between staff and patients and nursing teamwork. Questions about who should undertake PPR were unresolved. Duplication of PPR with nursing documentation was perceived as time consuming.

### Implications for practice:

- Daily audits allowed positive reinforcement for staff carrying out PPR and an opportunity to discuss issues where PPR did not appear to be as successful
- Regular reflection on the implementation of PPR informed further progress and service improvement and helped to maintain patient/staff interaction
- Rounding should follow a 'script' as simply asking patients if they want anything may not lead to patients verbalising needs

A full project report including references can be accessed from: <http://www.fons.org/library/report-details.aspx?nstd=6708>

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