

Rounding for a Culture of Safety

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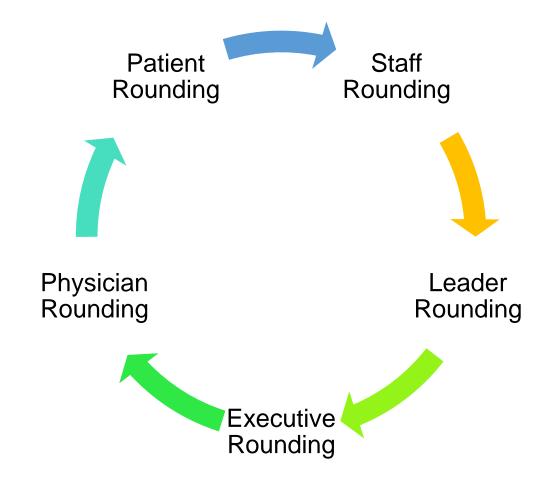
## **Objectives**

- Identify
  - Tracking methods to capture nurse leader rounding wins
  - How findings are filtered back to front line staff
  - How to drive staff accountability through hourly rounding
  - Strategies to driving HCAHPs scores up and sustaining results





## **Rounding at Every Level**







## **Just Culture**

#### **The Three Behaviors**

#### Human Error

Product of Our Current System Design and Behavioral Choices

Manage through changes in:

- Choices
- Processes
- Procedures
- Training
- Design
- Environment

Console

#### At-Risk Behavior

A Choice: Risk Believed Insignificant or Justified

Manage through:

- Removing incentives for at-risk behaviors
- Creating incentives for healthy behaviors
- Increasing situational awareness

Coach

#### Reckless Behavior

Conscious Disregard of Substantial and Unjustifiable Risk

Manage through:

- · Remedial action
- Punitive action

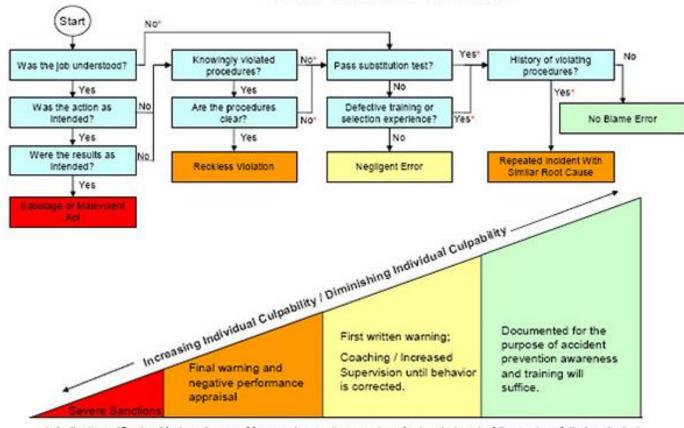
Punish





## **Just Culture**

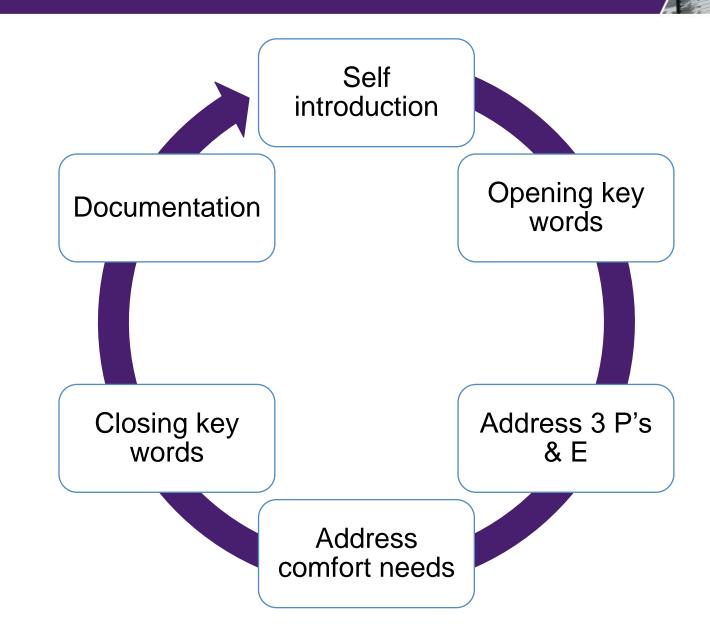
#### Just Culture Process



Indicates a 'System' induced error. Manager/supervisor must evaluate what part of the system failed and what corrective and preventative action is required. Corrective and preventative action shall be documented for management review.



## The 6 steps of hourly rounding







# Modify as needed

Inpatient

- 3 P's & E
  - Pain, position, potty, environment

Emergency Dept.

- 2 P's & D
  - Pain, plan, delays

**PACU** 

- 3 P's & F
  - Pain, plan, pulmonary, family

NICU

- 3 P's & E
  - Pain plan, parents, environment

## **Hourly Rounding**

#### What it is.....

Reinforcing key words

Validating expectations

Holding accountability

Providing praise

#### What it is not...

Passively peaking

Asking general questions

Solely for patient experience





## **Keys to success**

Set expectations

Demonstrate

Validate

Audit

#### GREAT PLAINS HEALTH HOURLY ROUNDING VALIDATION

	Employee Name:		
	Date:		
	Department:		
	Skill	Completed Yes No	
1	Wash in		
2	Opening key words		
3	Whiteboard up to date		
4	Were 3 P's & E addressed?		
	Were additional comfort measures addressed?		
	Bed straightened, clean linens		
	Fresh water, fluids (I&Os charted)		
5	Food, snack, dietary tray pick up/documented		
	Bath completed		
	Foley catheter cares		
	Was an environmental assessment completed?		
	Table, call light and phone within reach		
_	Dirty linen removed from room/floor		
6	Trash emptied		
	Urinal and hat emptied/charted		
	Bed side table clean/decluttered		
	Were safety issues addressed?		
7	Bed alarm, gait belt, chair alarm		
′			
	SCD's/TED's on or document refusal & education		
	Closing key words		
8	"Is there anything else I can do for you, I have the		
	time. I will back in 1 hour."		
	Was documentation completed		
9	Any interventions, I&O's, ADL's including any		
-	refusal & education on importance, hourly round		
	itself.		
10	Wash out		
	Follow up needed	YES	NO
	Staff Observed:		
	Observation completed by:		





## Nurse leader rounding

- Why is it important
- Set expectations
- Ask questions that will drive change
- Same rules apply for accountability





## Tips for success

Manager should do the majority

Real time feedback and service recovery

Dedicate time on your calendar

Transparency



### **Barriers/Feedback**

- Barriers
  - Too busy
  - Lack of confidence
  - No one knows expectations
- How to give feedback
  - Don't fix the problem
  - Positive observation, opportunity, ask for commitment
  - Follow up to ensure problem was addressed



## **Employee Rounding**

- Monthly rounding on direct reports
- Annual engagement survey

Stoplight report



#### The Great Plains Way

RE6: ROUNDING LOG – DAILY			
Name Department/Unit			
mployee(s) rounded on D	ate/Week of		
KEY WORDS OR QUESTIONS	SPECIAL E	MPLOYEE/COLLEAGUE ISSUES	
Tip: Initially explain t	he purpose of lead	er rounding!	
STEPS	COMMENTS	COMMENTS	
Relationship building/personal connection:			
What is working well for you today?			
Care provider/colleague I can recognize and why?	Who?	Why?	
Physician I can recognize and why?	Who?	Why?	
Tools and equipment needed to do your job today?			
Systems you want to improve and your ideas to fix?			
Quality or safety focus discussed. Ideas?			
Patient experience/CAHPS/What have you done this past week/ month to impact patient experience? (Discuss focus, ratings, ideas, etc.)			
Tough questions: discuss any tough questions you need to address or have heard while rounding			
Behaviors Coached: (If applicable)  AIDET*/key words  Customer service priorities  Standards  Other:			
Is there anything I can help you with right now? Thank you for making a difference at XXX!			
SUMMAR	Y OF ROUND	:	
Who will you reward and recognize based on rounding?			
<ul> <li>What are barriers/issues, etc. you need to resolve?</li> <li>Is there anything to add to the stoplight report?</li> </ul>			





## **Physician Rounding**

- Assign rounding to all senior leaders
  - One physician group/week
  - Consistent questions
  - Rounding Log with assignments at SLT

- Expectations for follow up

⊕ Rounding Schedule - 2023					
Week	AOC	Substitute Needed	Physician Practice		
January 2	Summer		Anesthesiology		
January 9	Misti		Cardiology (including Heirigs)		
January 16	Marcia		Complete Medicine   Gosnell		
January 23	Barb		Dermatology   Otolaryngology		
January 30	Megan		Hospitalists		
February 6	Wendy		Family Medicine   General Surgery		
February 13	Jayne		Infectious Disease   Endocrinology		
February 20	Lori		Medical and Radiation Oncology		
February 22	Lance		Midlands Family Medicine		
March 6	Danni		Nephrology   Pain Management		
March 13	Monica		Rheumatology   Neurosurgery		
March 20	Brandon		OB/GYN   Urgent Care		
March 27	Andrea		Ophthalmology   Podiatry		
April 3	Tina		Orthopedic Surgery		
April 10	Keaton		Pathology   Wound Care		
April 17	Ivan		Pediatrics		
April 24	Summer		Psychiatry   Physiatry		
May 1	Misti		Sleep   Neurology		
May 8	Marcia		Radiology		
May 15	Barb		Pulmonology   Urology		
M4 22	N.4		A		





## **Psychological Safety**





## **Discussion & Questions**

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