"We Promise…" Patient Care through Hourly Rounding

The Opportunity

Ensuring patient safety and satisfaction are essential goals of our work at BIDMC. Research has shown that hourly rounding by nursing staff can decrease fall rate (improving patient safety) and improve how well patients feel we respond to their basic needs (increasing patient satisfaction). After an early roll-out of hourly rounding in 2008-2009 showed initial success, we wanted to roll the practice out in a sustainable way; involving staff and making patients aware of our commitment.

Aim/Goal

Our goal is to roll out hourly rounding on the medicine and surgical units in order to improve nurse workflow, decrease the fall rate, and increase patient satisfaction (as measured through HCAHPS survey questions). We use LEAN methodology as a framework to guide the work and emphasize two components to hourly rounding:

1. Proactive, standardized approach to anticipating patient needs and improving nursing workflow
2. Patient-centered approach to communicating with our patients and families.

Our aim is also to make the hourly rounding commitment visible to the patients, establishing a culture of transparency and accountability.

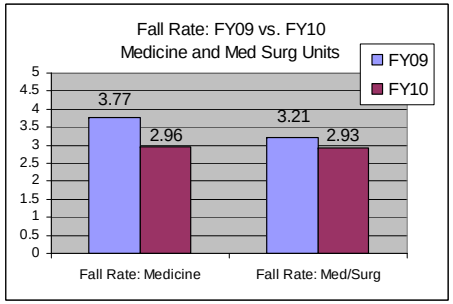
The Team

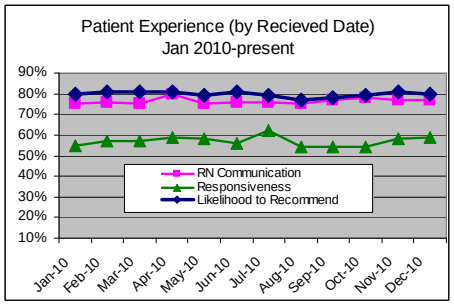
Jane Foley, RNC, BSN, MA, Associate Chief Nurse, Critical Care & Med/Surg
John Ryan, RN, Nurse Manager Farr 9
Denise Corbett-Carbonneau, RN, Nurse Manager Farr 2
Linda Denekamp, RN, Nurse Manager Farr 5/VICU
Christine Kristeller, RN, Clinical Nurse Specialist
Margie Serrano, RN, Nurse Manager Farr 6 and CVICU
Anissa Bernardo, LCSW, Patient Satisfaction Improvement Coordinator

The Interventions

- Planned program using a LEAN approach
  - Observed nursing workflow
  - Involved front line staff in focus groups and as Champions
  - Developed a checklist to anticipate patient needs, standardize workflow
  - Created "We Promise…" to emphasize importance of the practice
- Educated staff
  - Created a video demonstrating best practices
  - Held mandatory in-services for all nursing staff
  - Observed staff through audits by unit leadership
- Informed patients to promote transparency
  - Involved Media Services to create a "We Promise…" brand, posters, table top cards and buttons
- Created systems to communicate results at a unit and PCS level
  - Use monthly "unit dashboards" and "Voice of the Patient" posters to communicate patient satisfaction data
  - Distribute monthly "We Promise" newsletter to share results, stories and news

The Results/Progress to Date





Lessons Learned

1. Staff involvement critical to promoting ownership and accountability to practice.
2. Leadership involvement is essential to successful change.
3. High volume/operating at 100% capacity can impact progress; sustaining safety and satisfaction metrics in such situations can be viewed as a success.
4. Ongoing sustainment measures are essential.

Sustainment Measures and Next Steps

- Continued staff engagement
  - Involve staff in problem-solving on units (fishbone exercises)
  - Promote We Promise newsletter
  - Partner with other disciplines (environmental services, social work, etc)
- Continued leadership focus
  - Staff observations
  - Leadership rounding on patients
  - Reward and recognize high performing staff

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