

EP1EOa – PROFESSIONAL PRACTICE MODEL

FROM HOURLY ROUNDING TO PURPOSEFUL ROUNDING: AN EVIDENCE-BASED CHANGE

Using the required empirical outcomes presentation format, provide one example of an improved outcome associated with an evidence-based change made by clinical nurses in alignment with the organization’s professional practice model (PPM).

- *Provide a schematic of the PPM.*

Problem

The professional practice model (PPM) at NewYork-Presbyterian/Columbia University Irving Medical Center (NYP/Columbia) describes the role of NYP/Columbia professional nurses and how nursing is practiced. The PPM elements include advocacy, autonomy, collaboration, evidence-based practice (EBP), and professional development. The care delivery system is a part of the schematic and includes patient- and family-centered care. [EP1EOa.1—PPM Schematic](#)

Linda Ogbuagu, MSN, RN, AGCNS-BC, PCCN, clinical nurse specialist (clinical nurse), Hospitalist/Ortho/Surgical (9GS-605124) [9GS] Unit noted an increase in total falls rate per 1,000 patient days in 9GS. This presented an opportunity to implement an evidence-based change, aligning with the evidence-based practice element of the PPM.

Pre-Intervention

January 2022:

- In January 2022, the total falls rate per 1,000 patient days on 9GS was 7.75.
- Ms. Ogbuagu conducted a literature search and reviewed the article, “Redesigning a Fall Prevention Program in Acute Care: Building on Evidence.” This evidence-based article suggested implementing purposeful rounding for patients who are at high risk for falls. The article discussed the implementation of purposeful rounding and how clinical nurses can address patient anxiety by proactively addressing pain, toileting, position, and possessions, as well as

evaluating the environment for safety concerns and telling the patient when the clinical nurse will come back to check on them again. The article stated that purposeful rounding brings the focus to patient needs in that clinical nurses are present in the room to specifically address these needs rather than to perform other nursing tasks. In this article, the outcome was a significant decrease in falls organization-wide.

- At the time, clinical nurses were performing hourly rounds on patients, but they were not performing purposeful rounds. Hourly rounds promote patient- and family-centered communication, whereas purposeful rounding entails clinical nurses spending intentional time with the patient by using a checklist of procedures (assessing pain, potty, position, and personal belongings) meant to promote optimal outcomes in a clean, comfortable, and safe environment.
- Ms. Ogbuagu attended a 9GS Unit Council meeting and discussed evidence-based fall prevention strategies for purposeful rounding to clinical nurse members of the unit council: Karlene A. Harrison-Senior, MSN, RN, CMSRN, MEDSURG-BC; Felicidad Alcon, BSN, RN-BC; Emily Strumpf, BSN, RN, CMSRN; and Olivia Marshall, BSN, RN, CMSRN. The 9GS Unit Council nurses agreed to champion this new evidence-based change from hourly rounding to purposeful rounding on 9GS.
- Ms. Ogbuagu created a Falls Prevention Plan, which included 9GS clinical nurses reading the purposeful rounding article, completing a form based on their learning, conducting education on falls prevention during daily shift huddles, creating purposeful rounding tools, and having clinical nurses pair up with a clinical nurse specialist for one session to conduct purposeful rounds.

Goal Statement

To decrease the total falls rate per 1,000 patient days on 9GS

Participants

Name/Credentials	Discipline	Title	Department/Unit
Linda Ogbuagu, MSN, RN, AGCNS-BC, PCCN	Nursing	Clinical Nurse Specialist (clinical nurse)	9GS
Karlene A. Harrison-Senior, MSN, RN, CMSRN, MEDSURG-BC	Nursing	Clinical Nurse (Unit Council member)	9GS

Felicidad Alcon, BSN, RN-BC	Nursing	Clinical Nurse (Unit Council member)	9GS
Emily Strumpf, BSN, RN, CMSRN	Nursing	Clinical Nurse (Unit Council Chair)	9GS
Olivia Marshall, BSN, RN, CMSRN	Nursing	Clinical Nurse (Unit Council member)	9GS

Intervention

February 2022:

- Ms. Ogbuagu presented the Falls Prevention Plan to 9GS nurses and emailed the article on purposeful rounding along with a form for the nurses to complete and return to her. The form requested:
 - The clinical nurse’s signature and date attesting that they read the assigned article, “Redesigning a Fall Prevention Program in Acute Care: Building on Evidence.”
 - A list of three lessons learned from this article and two practice changes the nurse would implement to decrease falls on the unit.
 - Two causes of falls based on the information from the article and identification of a countermeasure.

The form also instructed nurses to conduct a purposeful rounding session with a clinical nurse specialist where together they would identify a patient at high risk for falls, review what makes the patient high risk, identify interventions to prevent falls, and discuss with the patient (and family, if available) the evidence-based falls prevention implemented by the nurses. During rounding, they would discuss the following with patients (and family, if available):

- Call bell use
- Tailoring interventions for patient safety (TIPS) falls prevention poster
- Need for bedside commode
- Pain medication – side effects
- Unsteady gait
- Use of bed alarm and chair alarm
- Sitter

In addition, the plan included written patient education materials on falls to ensure that the patient’s needs (pain, potty, environment, positioning) were met.

- Ms. Ogbuagu created an electronic purposeful rounding tool for clinical nurses and an electronic purposeful rounding validation tool for patient care directors (nurse managers). The tool was accessible to clinical nurses and patient care directors via a QR code displayed on the wall outside the patient's room.
- During daily shift huddles, Ms. Ogbuagu educated the 9GS clinical nurses on purposeful rounding and how it enabled proactive behaviors and practice versus reactive behaviors. She also noted that 9GS Unit Council members serve as purposeful rounding and falls prevention champions on the unit.
- By the end of February 2022, approximately 80 percent of the clinical nurses completed the purposeful rounding training and professional development associated with the practice change. The 9GS nurses fully adopted the EBP change of purposeful rounding, strengthening the alignment of their practice with the NYP PPM.

Impact Statement: Establishing a Falls Prevention Plan, which included education and demonstration on the evidence-based purposeful rounding prevention strategies, helped to enculturate the practice change, leading to a decrease in the falls rate on 9GS. In alignment with the EBP component of NYP Nursing's PPM, the implementation by the clinical nurses of purposeful rounding, identified in the literature as evidence-based, helped reduce the total patient falls rate per 1,000 patient days on 9GS.

○ **Key references:**

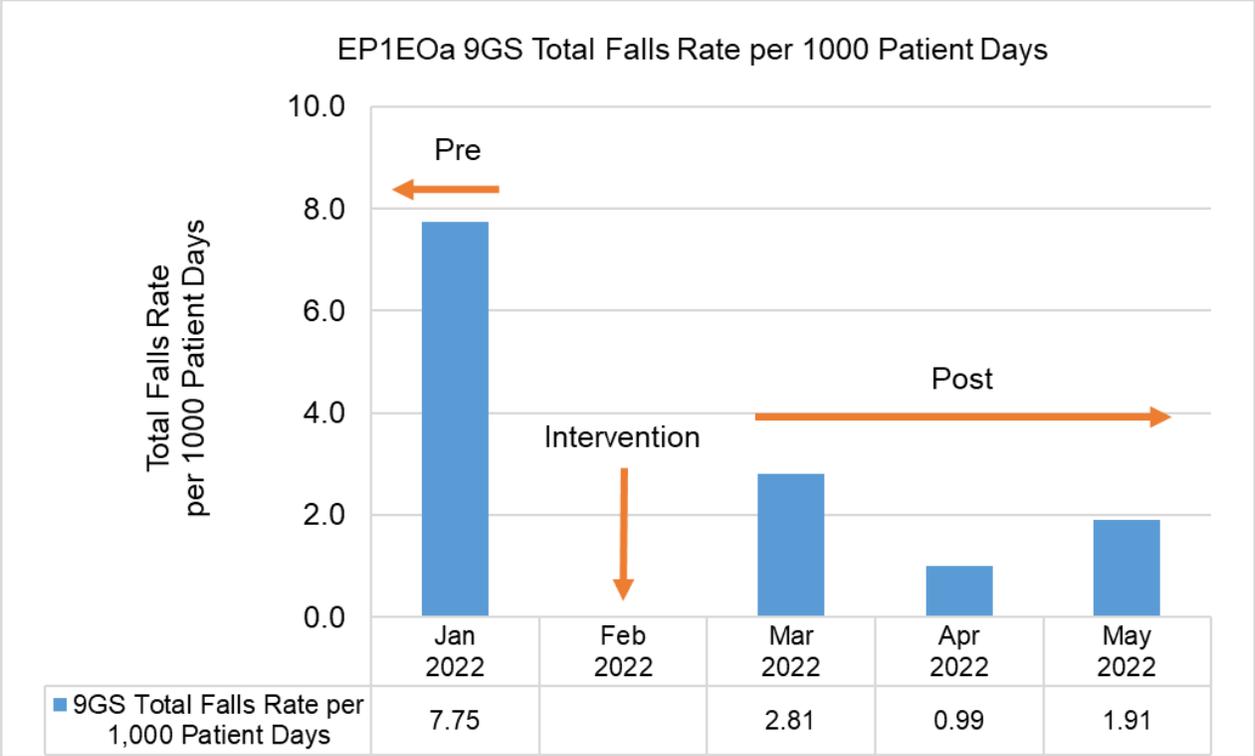
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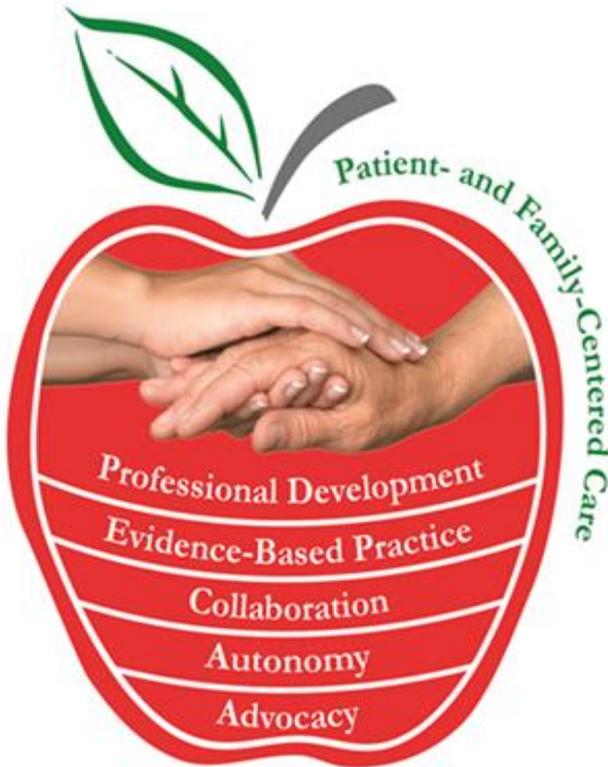
Outcome



NYP/ Columbia Professional Practice Model (PPM) 2020-2024

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- Advocacy:** Empower patients, families, communities and colleagues to ensure culturally competent and compassionate care
- Autonomy:** Foster self-directed practice through critical thinking and accountability
- Collaboration:** Promote interprofessional communication and coordination of patient/family centered care
- Evidence-Based Practice:** Integrate clinical expertise, scientific findings and patient preference to improve outcomes
- Professional Development:** Commit to personal, clinical, and scholarly growth to optimize the patient experience

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