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## Interactive Educational Program for Purposeful Leader Rounding

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Walden University

College of Nursing

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Executive Summary: Staff Education Project  
Interactive Educational Program for Purposeful Leader Rounding  
by  
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## Summary

This education project was to introduce nurse managers to the evidence-based practice of daily purposeful leader rounding on all staff in this acute care facility. The need for practice change was evidenced by low all employee survey and the Survey of Healthcare Experience of Patients (SHEP) results; low retention rates throughout the inpatients units; and an increase of patient safety events in fiscal year 2023. Leadership rounding is an evidence-based practice that increases staff retention by supporting and engaging staff. The purpose of the interactive education was to increase the knowledge and self-confidence of the participants to assist in hardwiring the practice and to perform leader rounding consistently and effectively. The project question was: will an interactive education program on evidence-based leader rounding practices increase the knowledge and self-confidence of managers? The sources of evidence were peer-reviewed published studies on the practice of purposeful leader rounding in the inpatient setting, netting over 100 studies in the last 5 years. The education program included didactic instruction and role play using the Centers for Medicare and Medicaid purposeful rounding guide. Eighteen nurse managers participated. The pre/post test comparison showed an improvement in knowledge and confidence of 70%, reinforced by the reporting of an increase in regular rounding from 22% prior to education to 88% within 1 week of the program. Recommendations include digitizing this process to allow for greater analysis of data and senior leadership mentoring to sustain the practice change. The social change of leadership support for nurses has the potential to improve care for all patients, regardless of diversity thus supporting equity and inclusion.

## **Background**

This DNP education project was designed to introduce nurse managers to the evidence-based practice of daily purposeful leader rounding on all staff in this Veteran's Administration acute care facility. Then need for a change in practice was evidenced by low all employee satisfaction survey results and poor Survey of Healthcare Experience of Patients (SHEP) results; low retention rates throughout the inpatient units; and an increase of patient safety events in fiscal year 2023. Leadership rounding is a practice that increases staff retention by supporting and engaging staff (Sexton et al. 2021). If not addressed there will continue to be an increase in patient safety events, leading to increase length of stay and increase cost for the facility. The purpose of the interactive education was to increase the knowledge and self-confidence of the participants to assist in hardwiring the practice of leader rounding consistently and effectively using a rounding tool. The practice focused question was: will an interactive education program on evidence-based leader rounding practices increase the knowledge and self-confidence of managers and leaders? The implementation of this project provided nurse leaders support to perform purposeful employee rounding to create positive outcomes for the patients and the facility.

The following supporting evidence identifies the need for the practice change and the strength of the evidence. Kline, M et al (2019) is a quasi-experimental study that highlights leader rounding and the overall impact to patient experience, HCAP scores, and staff engagement. King, A et al (2022) was a single unit QI project conducted identified improved staff wellbeing scores and a reduction in absenteeism. The project showed leader rounding contributed to a positive work environment, promoted employee engagement, and assisted nurses

with resilience. Bayram, A et al (2022), is a systematic review which highlighted nurse manager intentional rounding increases patient satisfaction and quality of nursing care. Findings identified increase in HCAP scores and compliance of meeting quality measures. Knobloch, M et al (2019) is a case study performed highlighted that each interaction between leaders and frontline staff can foster psychological safety, reduced barriers to communication by open problem-solving and fostered open communication. Findings showed an increase in staff engagement, staff communication with leaders about unit challenges and problem-solving, and there was a direct association between creation of a learning climate of psychological safety and staff problem solving.

Alshehhi, R et al (2023) is a quasi-experimental study showed positive increases in patient satisfaction and nursing care provided after leader rounds were performed; Sexton, J et al (2021) is a cross-sectional study showing compelling associations between exposure to positive leadership walk arounds, a better safety culture, and workforce wellbeing. Improvements were noticed in staff teamwork, engagement, wellbeing, quality of care, and safety culture; Foster, M et al (2023) is a systematic review included studies explicitly denoted the act of engaging leadership teams and front-line employees at the actual site where patient safety events occur. A positive association with leadership walkarounds on operational and cultural outcomes was highlighted in this study. Leamy, M et al (2023) write cases studies which highlighted consistency and comprehensiveness, allocated time, accountability. nurse-patient relationships and communication, visibility, anticipation, staff communication and teamwork, and patient empowerment. Meyer, P et al (2019) was a QI project that showed that an audit and feedback (A&F) program reinforces quality and build nurse leader feedback. Increase patient safety culture and staff engagement.

## **Staff Education Project Development**

A team of nurse educators participated in the development of the education program using the literature on implementation of leader rounding using Adult Learning Theory where adult learners do best by demonstrating capabilities and knowledge (Mukhalalati et al, 2019). The program included didactic information and the use of role play using the CMS Purposeful Leader Rounding guide (CMS, 2023). Eighteen nurse managers were provided a pre- and post-surveys to identify the knowledge and confidence in purposeful leader rounding and their subsequent practice change. They were also asked about perceived barriers and leadership support. They were asked to utilize a unique identifier to protect their privacy and allow for pre/posttest comparisons. The following questions were included in the survey: 1) Do you perform purposeful leader rounding? 2) Do you use a scripted round tool? 3) Are you confident performing purposeful leaders rounding? 4) Are barriers present in completing purposeful leader rounding? 5) Do you feel support from senior leadership?

## **Results**

Data from the pre/post tests were analyzed using a paired t-test. The following questions were included in the survey:

1) Do you perform purposeful leader rounding? The comparison of the pre and post survey shows improvement in the knowledge in leaders rounding. The pre-survey shows that 22% of nurse managers are consistently doing leader rounding, another 22% are not consistently performing rounding, and 56% are not completing them at all. One week after the educational

intervention, 78% of nurse managers reported performing the leader rounds and the remaining 22% have not yet performed the rounding.

2) Do you use a scripted rounding tool? The pre-survey identified the same nurse managers who reported regular rounding uses a scripted rounding tool, 22% of those inconsistently rounding uses the tool sometimes, and the others not doing rounding also reported not using a scripted tool. The post-survey shows that of those reporting regular rounding each were using the scripted tool.

3) Are you confident performing purposeful leaders rounding? The pre-survey shows only 22% were confident when performing leader rounding while 78% were not. The post survey results showed that 88% of nurse managers are more confident in performing leader rounding.

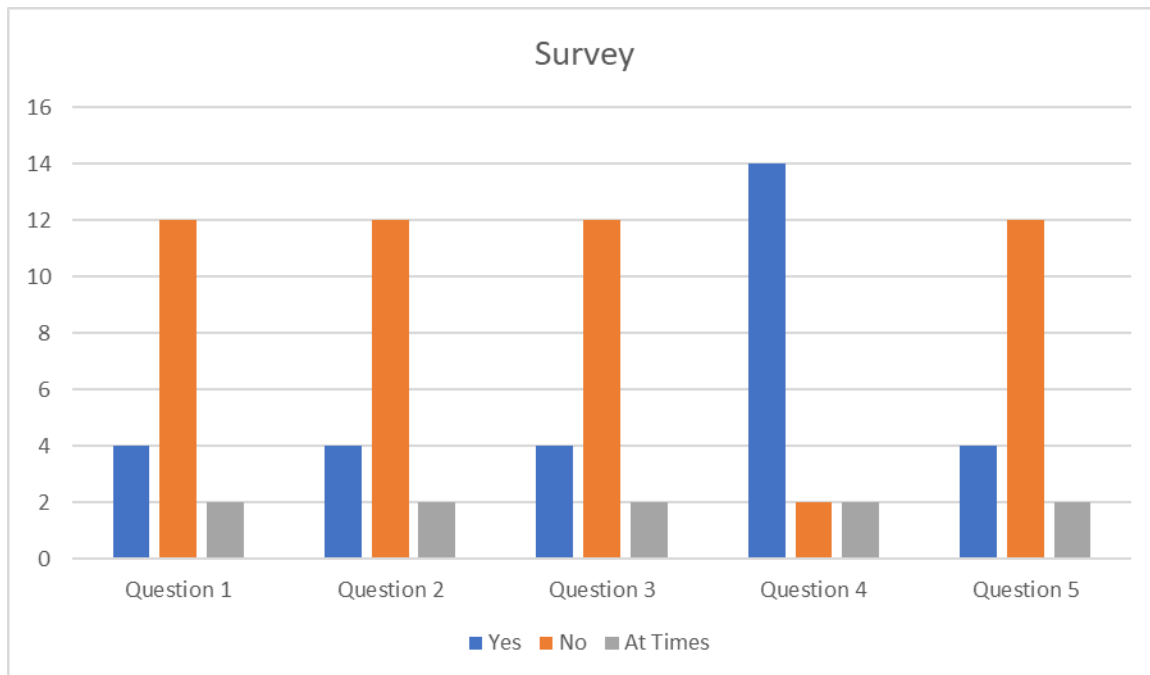
4) Are barriers present in completing purposeful leader rounding? Identification of barriers fell. The pre-survey shows 77% identified barriers; 11% did not, and 11% were unsure. The post-survey showed 22% as identifying barriers; 66% did not, and 11% were unsure. The barriers identified were time in the daily routine and competing priorities. The training/education shows that barriers can be perceived if the knowledge and guidance are not present.

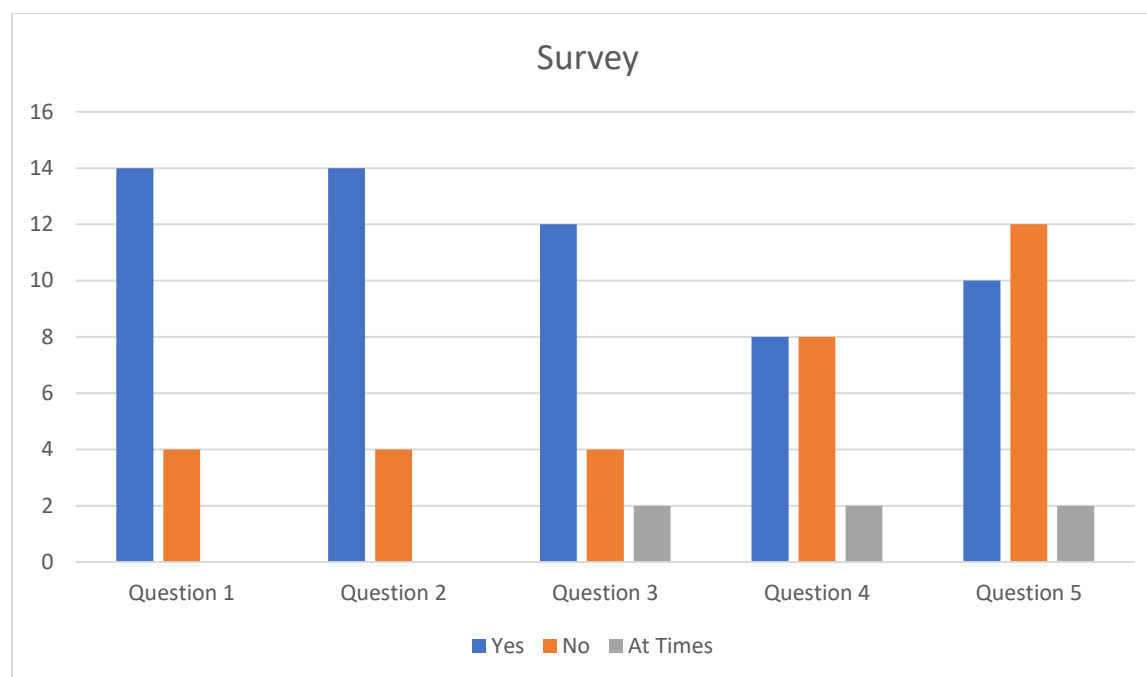
5) Do you feel support from senior leadership? 66% report that they are not receiving leadership support before or after their education on purposeful rounding. This will be included in the report presented to executive leadership. The recommendation will include communication from leadership to the nurse managers of the importance of leader rounding and the support that will be provided. Also, to increase the perception of leadership support, executive leaders will need to have a physical presence during the rounding.



The pre-implementation survey identified the post-survey was conducted a week after the interactive educational program was initiated and completed. The post-survey showed a 70% increase in knowledge and self-confidence with purposeful leader rounding. Also, with the additional education provided, the perception of barriers and leadership support positively increased as compared to the pre-implementation survey results.

**Figure 1: Pre-Implementation Survey**



**Figure 2: Post-Implementation Survey**

The measures indicating the project demonstrated an increase in knowledge and self-confidence of participants using pre/post testing. The program enables leaders to accurately perform formal employee rounding. Leader rounding is crucial to increase retention rates, patient and staff satisfaction, and prevent patient safety events from occurring (Bayram et al. 2022).

The interactive educational program for purposeful leader rounding on staff is sustainable if repeated with new hires and with holding the nurse managers accountable for this practice, thus impacting the operations of the medical center. Hardwiring this practice can strengthen managers' skills and strategic thinking to retain staff and provide patients with safe quality care (Foster et al. 2023).

The limitations that occurred were slight delays in implementation due to nurse managers scheduling difficulties and managers that were unable to attend due to being on extended leave. The contingency plan for these instances was to have an alternative from the unit such as charge

nurses participate in the program. The education was specific to one VA hospital and the results may not be generalizable to other facilities. Should the education be utilized in other VA and non-VA facilities, it may allow others to introduce and reinforce the evidence-based practice of purposeful leader rounding.

### **Conclusion**

The implementation of the interactive educational program for purposeful leader rounding on employees should impact the facility in positive ways. The program gave leaders the knowledge and confidence to perform the rounding, collect and analyze data, and create actions plans based of the information received. Literature supports that scripted rounding assists in staff retention, staff engagement, staff and patient satisfaction, and decreases patient safety events (Kline et al. 2019). The benefits that are brought by the practice change enhances the care provided to patient, allows staff to voice concerns, and participate in the resolution of issues.

It is recommended that the project lead, nurse managers and quality management department conduct a formal evaluation and reporting at the completion of implementation and quarterly thereafter. This will include post implementation survey, SHEP and AES scores, retention rates, and patient safety reporting. The literature also supports the mentoring of nurse managers in the process of implementation, so senior leaders should continue to support this process (Meyer et al. 2019). It is also recommended that a rounding tool application that will record and collect the results of leader rounding be part of the electronic health record so that the data can be more thoroughly evaluated. This will allow for a more efficient and effective way to rounding and report results to executive leadership.

Leader rounding is a strategy which helps in retention of staff and minimizing patient safety events. Engaging frontline staff by getting their feedback and involving them in the resolution process increases staff satisfaction. This will assist in the delivery of safe quality care and an increase in patient satisfaction. The national nursing shortage is greatly affecting nurse-patient ratios, staff morale, staff and patient satisfaction scores, and overall outcomes in healthcare facilities. Leader presence and engagement with frontline staff will assist in developing corrective actions to minimize any shortfalls. The social change of leadership support for nurses has the potential to improve care for all patients, regardless of diversity thus supporting equity and inclusion.

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