

Impact of the use of the 4Ps in hourly rounds on reductions in patient falls in wards

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Abstract

The merits of using 4Ps hourly rounding by nursing staff of wards in reducing patient falls in hospitals were reviewed using published literature.

Poor in-hospital patient safety compromises positive patient outcomes. If a patient falls just before discharge, his discharge is delayed. If the fall is related to hospital factors, the patient and people around him are disturbed. Spread of this news can affect the reputation of the hospital. This leads to reduction in patient volume ultimately affecting its business performance. While it is very difficult to earn good reputation, it is fairly easy to earn bad reputation and it is very difficult to remove bad reputation and it can take a long time. Both these medical and business factors promoted much research on the topic.

Increasing chronic diseases and ageing can lead to in-hospital patient falls depending upon factors of hospital infrastructure, care policies, patient access to service areas, patient volume in relation to facilities, ward facilities, patient age and physical and medical conditions and competence of nursing staff.

Nurses are in direct charge of patient care. Any laxity in adhering to care standards can lead to patients going out of control and fall. Nurses are first blamed for patient falls, even if it is directly due to patient disobeying instructions and moving out of bed for personal purposes. Weak and disabled patients should not be allowed to move out of bed without help. If the nurse is not watchful or relaxes this requirement, patient fall may occur.

One remedy suggested to reduce and prevent incidences of in-hospital patient falls is hourly rounding of the ward by nursing staff and the principle of 4P is applied in these rounds. The four Ps stand for Pain, Potty, Position and Periphery. Strict codes of procedures for 4Ps rounds have been established in hospitals. The four items of P deal with proper management of toileting behaviour, managing pains of various types and intensities, positioning in the bed or elsewhere in the ward to facilitate risk-free movement and keeping personal items within reach of the patient in properly ordered manner.

Implementation of 4P hourly rounding has many potential advantages. A paradigm shift from physical requirements and service delivery to safety, reduced call lights, Positive nurse-patient interactions and high levels of communications are important to reduce patient falls. Rounding duties are related ensuring patient safety from many points of view. Adherence to guidelines by nurses is very low. Use of 4Ps hourly rounds are proactive, ensure that all patient needs are met in time. Actions taken during these rounds need to be evidence-based as far as possible. The effect of each of the 4P items in reducing patient falls have been found to be substantial.

Lack of training nurses before implementation, lack of commitment, ineffective nursing leadership, insufficient strength of nursing staff, inability to quantify and analyse the results, absence of communication boards and their strategic placing are factors affecting effective implementation of 4P hourly rounds.

4P hourly rounds are purposeful, help early identification of patient needs which reduces falls. Intentional rounds especially in the case of disabled, chronically ill and old patients is critical. Insisting on this can increase accountability and continued management support.

The 4P rounding increases trust of patients on nurses leading to satisfaction. Reminders about 4P rounding at strategic places and close monitoring by nurse managers can ensure that nurses practise it without fail.

Based on the above points, strict monitoring of adherence to 4P rounds, building up and maintaining a patient safety culture across the organisation and evidence-based practice have been recommended.

Keywords: 4P, Patient Falls, Ward, Nursing, Review

Introduction

The primary healthcare sector is currently faced with different issues such low patient satisfaction and poor patient safety, which in turn compromise patient outcome. Maintaining patient safety should be the number one priority of any healthcare facility, as compromised patient safety results in increases in morbidity and mortality (Källberg et al. 2017). It also increases the hospitalisation period, hence increasing associated medication costs such as need to buy more drugs. Different factors have been connected to a decrease in patient safety. Some of the factors include lack of adherence of the nurses to the set patient care standards, reduced emphasis on patient safety by the organisational culture and lack of adherence to the set rounding tool (Hernan et al., 2015). This paper will concentrate on the impact of the use of the 4Ps in hourly rounding on the prevention of patient falls. The essay will provide background information on what the 4Ps entail and how the tool can be used to ensure patient safety via reductions in falls. A literature review of past studies that have been conducted on the impact of the 4Ps tool will be given together with a recommendation that can be implemented in the nursing profession.

Hourly Rounding in Primary Healthcare

Both patient satisfaction and safety outcomes are the key determinants of the success and achievement of any healthcare facility. Hence, healthcare management always works tirelessly to ensure that high levels of patient safety and satisfaction are always maintained (Kirk et al. 2015). Falls are among the ward occurrences that result in compromised patient safety and in increases in the hospitalisation period, hence reducing the efficiency of the healthcare facility. A survey done by Singh et al. (2015) showed that approximately 25% of falls occur outside of hospital beds. The associated injuries include fractures, and they may lead to death. The healthcare organisation's management must therefore ensure that measures are put in place to reduce falls as much as possible.

The design of healthcare facilities initially concentrated on the accommodation of the physical requirements of and service delivery to clients. This has, however, changed to ensure that patient safety is maintained, such as by ensuring that falls are reduced to the lowest level possible. Unlike in the past, the current era is characterised by the emergence of several chronic diseases coupled with an increase in the ageing population (Jawa et al. 2017). These changes have in turn resulted in an increase in the healthcare demand characterised by hospital admissions. The drastic changes in the medical demand consequently call for a radical change in the medical

working culture, especially with respect to the nursing profession. The nursing working culture in place should ensure constant care of the admitted patients to ensure all their needs are met in a timely manner. Several studies done in the past have shown that the tool used in nursing rounds has a significant impact on the fall rate among patients (Jiménez et al. 2018). Effective nursing rounds result in bell calls, patient satisfaction and increased patient safety. According to Daniels (2016), nursing rounding has the potential to reduce call light usage, reduce fall rates and increase patient satisfaction.

Nurses play a pivotal role in patients' experiences during the hospitalisation period. The types of nursing offered can therefore be used to predict the level of patient satisfaction. The existence of effective and continuous interaction with patients results in improved patient safety, reduced fall rates, a reduced hospitalisation period and a quickened recovery process (Gausvik et al. 2015). The nurses execute their medical roles via communication. Therefore, the existence of positive patient–nurse interactions automatically results in better patient outcomes. Nursing rounds offer nurses an opportunity to interact regularly with their patients. This regular interaction puts them in a position to respond in a timely manner to patients' needs. They also have the opportunity to modify unsatisfactory conditions. According to a survey done by Hernan et al. (2015), the majority of falls, especially in the case of patients suffering from critical conditions, occur when patients attempt to deal with their own needs, such as going to the toilet, stretching to pick up personal items and changing sleeping positions, among others. It is therefore important for nurses to ensure that the needs of patients are met, hence minimising their need to move from their beds. In addition, the existence of regular nursing rounding allows patients to be aware of nurse check-ups.

Different hospitals have different tools that are used during nursing rounds. However, the main components of rounding are pain management, changing position, environmental management to ensure comfort and toileting (Olds, 2017). Despite the different tools that can be used to guide nurse rounds, adherence to these tools is still quite low (Brosey & March, 2015). In some cases, nurses do not conduct their rounds according to the set standards. Nurses are not only required to be aware of the care plan, but they should actively contribute to holistic nursing needs. According to Jenko et al. (2019), the use of the 4Ps during hourly nursing rounds ensures that all patient needs are met on time.

Hourly rounding, also known as purposeful rounding, refers to systematic and proactive nursing interventions that are meant to anticipate and address the needs of the admitted patients. It is stipulated that the correct conduction of evidence-based hourly rounding has the potential to increase quality, safety and satisfaction. Consideration of all the 4Ps during rounding further increases efficiency. According to Hutchinson et al. (2017), conducting the 4Ps during hourly rounding has the potential to reduce patient falls by 50%, reduce patients' use of the call bell by 37%, reduce bedsores development by 14% and increase patient satisfaction ratings by 12%. Similarly, a study done by Kelley (2017) showed that improving patients' accessibility to their personal items and meeting their bathroom needs in a timely manner reduced the occurrence of falls by 50%. According to the study, Kelley (2017) argued that utilising the 4Ps in hourly rounding has the greatest influence on the fall rate when compared to other factors. Another study done by Christiansen et al. (2018) showed that the adoption of the approach reduces noises within hospital units and increases both job satisfaction and productivity among nurses.

The 4Ps rounding involves hourly assessment of pain, potty, positioning and possessions which is done during the rounding. The first component involves the assessment and management of

the existence of any pain. Potty involves asking patients whether they need to use the toilet, which could result in a long or short call. The patient is then placed in a comfortable position, for example, changing from a sleeping to a sitting posture or changing the sleeping position. The last component involves ensuring that all of the patients' personal items, such as spectacles, mobile phones and novels, are easily accessible. The use of these 4Ps ensures standardised interventions, as well as encourages consistency and provides guidance to the nurses involved. It also helps the patients to understand the process clearly and recognise interventions. Daniels (2016) stated that the approach improves the early detection of deteriorating conditions of patients and their caregivers.

Despite the numerous advantages associated with the adoption of the 4Ps during hourly rounding, the initiative is still facing numerous setbacks. Some of the cited setbacks involve a lack of sufficient nurse training; hence, nurses are not in a position to fully adhere to the recommended protocol (Flowers et al. 2016). Disorganised nursing leadership and a lack of commitment also hinder the effective implementation of the approach. Furthermore, insufficient nurse staffing makes it difficult to conduct rounding on an hourly basis. The inability to quantify and analyse the obtained result, together with the lack of a communication board in the appropriate place, also hinders effective rounding.

Impact of Hourly Nurse Rounding on Patient Outcomes

Falls and related injuries are a common occurrence among hospitalised patients. Purposeful hourly nurse rounding helps nursing staff to identify patient needs early enough, which in turn reduces fall outcomes. Flowers et al. (2016) conducted a study on the benefits of and barriers to intentional rounding with the aim to describe the implementation, practice and sustainability of intentional rounding. The survey was done in aged care and maternal healthcare facilities, and it was necessitated by the fact that the profiles of admitted patients often decline with time, hence demanding more attention from nurses. In this case, rounding is only done when time is available, reducing its efficiency. The descriptive qualitative approach was used to collect the required information from the focus groups. The results obtained showed that intentional rounding was a management tool being used to promote the accountability and continuity of management support. The sample clinicians attributed the increase in patient and staff satisfaction to intentional rounding. The rounding practice was, however, influenced by the type of patients, ward layout and staff experience. Although the study produced insightful results, there is a need to conduct similar studies with larger sample sizes. The small sample size, drawn from a single healthcare facility, limited the generalisation of the obtained results to other facilities. The results obtained are however similar to several past studies that advocated for intentional rounding.

Similar results were also found by Woodard (2009), but the study was conducted in a medical surgical unit. Woodard (2009) concluded that the presence of the 4Ps in hourly nurse rounding promoted patient safety. The increased patient safety can be seen in the reduction in fall occurrences. Unlike Flowers et al. (2016), Woodard (2009) also collected views from patients who had been hospitalised. The patients reported that they were certain about the nurses' presence and hence had increased trust in the provided nursing care. According to the study, it was clear that the use of the 4Ps in hourly nurse rounding increased patient satisfaction. The strength of this study was that it used a large sample size and also incorporated patients' views.

However, the study was only conducted in one healthcare facility, limiting the generalisation of the obtained conclusions.

The 4Ps Model

According to the above literature review, it is obvious that the utilisation of the 4Ps in the nurse rounding approach has the potential to reduce patient falls in the wards. Thus, it is the responsibility of the hospital administration to ensure that nurses are strictly adhering to the standards of the recommended rounding approach. Nurses play a key role in ensuring that high standards of both patient satisfaction and patient safety are maintained. This is achieved via the utilisation of a good nursing round intervention, which should help in improving patient communication and staff responsiveness. The hospital management must include all the staff in the implementation of the appropriate nurse rounding approach. An effective rounding approach should cater to the 4Ps, which are pain, possession, potty and position (Woodard 2009). This is an all-around approach that ensures all patient needs are met on time. The nursing management must develop a strategy to ensure high rates of adherence to the hourly rounding system, which can be achieved by strategically putting reminders in places, such as the boardroom, tea room and washroom. This is meant to remind nurses continually why they should adhere to the set rounding standards. Adherence can also be enhanced by initiating a proper training program to help the nurses familiarise themselves with the tool to be used during rounding. Proper staffing must also be considered because it would be impractical to have nurses suffering from burnout undertaking hourly rounds.

Recommendations

Based on the literature review, the following recommendations have been proposed:

Primary healthcare facilities must implement stringent measures to monitor the extent to which nurses adhere to hourly rounding. This will be critical in improving adherence levels among the nurses.

Primary healthcare facilities must implement and support a patient safety culture that encourages nurses and other healthcare professionals to maintain patient safety at all times. A patient safety culture will be essential in promoting overall patient safety and improving health outcomes

In the process of conducting routine hourly rounding, nurses must implement and adhere to the 4Ps at all times. Evidence-based practice has shown the value of 4Ps in improving patient safety during hourly rounding.

Conclusions

High levels of patient satisfaction and safety should be the priority of all healthcare facilities, where patient satisfaction is characterised by ensuring that all patient needs are met on time. Patients should also be in a position to participate in their healing process actively. On the other hand, patient safety leads to improved patient outcomes, reduced hospitalisation periods and reduced medical costs. Thus, it is the responsibility of each hospital management to ensure that high standards of patient safety are maintained at all times. Frequent falls within the wards are one of the major indicators of compromised patient safety, as falls occur when patients attempt to meet some of their needs on their own while they are still weak. The adoption of an efficient routine for nurse rounding, such as the 4Ps hourly rounding approach, can significantly help in the reduction of falls (Woodard 2009). The 4Ps approach ensures that all patient needs are met

on time, which not only helps increase patient safety, but also encourages patients to develop trust in the nursing care. All hospitals should therefore ensure they have efficient nursing rounds in place, and more studies should be conducted on how the adherence of nurses to the proposed approach may be increased.

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