



# Nurse Leader Rounding Inventory

## Evidence-Based Considerations to Refine This Practice for You and Your Organization

Use this inventory to assess your organizational or personal “readiness to round” for impact:

- Organizational Commitment:** Senior leaders send “universal” messages to staff about the importance of this practice, and when and what staff should expect to see and experience as part of nurse leader rounds
- Nurse Leader Rounding Infrastructure:** Senior-level clear expectations regarding expected rounding process that includes:
  - Time blocking
  - Permission to evaluate and de-prioritize less essential activities
  - Training
  - Coaching
  - Accountability “checks and balances”
  - Clear expectations about tracking, feedback, and follow-up
  - Identification of specific metrics to assess progress
- Time:** Nurse leaders are supported to maintain organizationally-blocked time to complete daily nurse leader rounds efficiently
- Delegation:** Nurse leaders have a structured and transparent mechanism to delegate rounds if away or facing significant, competing demands
- Staff Engagement:** Nurse leaders use intentional and consistent verbiage when talking about rounds to staff both before, during, and after
- Patient Engagement:** Nurse leaders utilize and have mastered a structured dialogue and specific talking points to use with patients during rounds
- Recognition:** Nurse leaders (and their senior leaders) are consistently identifying, tracking, and celebrating recognition opportunities that are discovered during rounds
- Performance Management:** Nurse leaders (and their senior leaders) are ensuring that consistent and progressive staff follow-up about problems or issues is occurring