

+VISILERT

Simple. Effective. Inexpensive.

Rounding Competency Checklist

Name _____ Date ____/____/____

	Self Assess		Evaluator	
	YES	NO	YES	NO
Introductions				
Knock on door prior to entering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Manage up your/co-worker's skill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Use good eye contact	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Explain Rounding				
Explain purpose of rounding	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Describe rounding schedule	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Update White Boards				
Place name on white board	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Update nursing plan/goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Evaluator _____ Dept _____

	Self Assess		Evaluator	
	YES	NO	YES	NO
4P's (Position, Possessions, Pain, Potty)				
Are you comfortable?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Are your personal items within reach?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How is your pain?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Do you need to use the bathroom?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Perform Scheduled Tasks				
Complete MD ordered treatments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Complete nursing care as needed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Administer scheduled medications	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Closing				
We will round again in about an hour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Is there anything else I can do for you?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Document your rounding on log	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Patient Rounding Checklist

- Turn off **Visilert** device prior to entering patient's room.
Press Start/Stop Button
- Use opening **Key Words** such as **"round"** to introduce yourself, your skill set, your experience and others. This will make the patient comfortable with the term. Show a genuine interest in your patient.
- Complete scheduled tasks needed for that patient such as medications, treatments, procedures, and feedings.
- **Assess the patient's Pain.** Offer PRN medications at the beginning of the round and write the next available time of pain medication administration on the white board.
- **Assess the patient's Position.** Straighten sheets, offer something to drink, open or close curtains as desired by patient and adjust lighting/temperature.
- **Assess the patient's Personal Items.** Is the call light, water, telephone, light switch, TV control, trash can, and bedside table within the patient's reach?
- **Assess the patient's need to use the bathroom (Potty).** Offer to take the patient to the bathroom.
- Use closing **Phrases** such as **"Is there anything else I can do for you?"** Do not say, **"Call if you need me."**
- Reset **Visilert** device and document rounding once you ensure round is complete.
Press Reset (select appropriate rounding time)
Press Start/Stop Button

“Delivering quality healthcare that focuses on the patient.”