

# IMPROVING OR OUTCOMES: NURSE LEADER ROUNDING FOR SAFETY AND QUALITY

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## INTRODUCTION

A multidisciplinary perioperative leadership team collaborated to enhance surgical safety and quality. Each member brought a distinct focus that collectively strengthened accountability, standardized practices, and improved OR outcomes.



**Administrative Director and Director** – Provided strategic oversight, resource allocation, and alignment with hospital goals.

**Manager** – Maintained operational efficiency, supported frontline staff, and addressed workflow barriers.

**Educator** – Facilitated ongoing staff training, competency development, and adoption of best practices.

**Quality Manager** – Monitored performance metrics, led compliance initiatives, and implemented safety standards.

Together, this collaboration created a structured leadership rounding tool to promote consistency, safety, and continuous improvement in perioperative services.

## METHODS

To address inconsistent safety practices and limited leadership visibility, the team developed a structured nurse leader rounding tool with input from clinical stakeholders.

Implementation followed six steps: planning, tool development and pilot, weekly leadership reviews, real-time interventions, focus area reassessment, and a supportive, non-punitive approach. This ensured leadership presence, proactive risk identification, and staff engagement in continuous improvement.

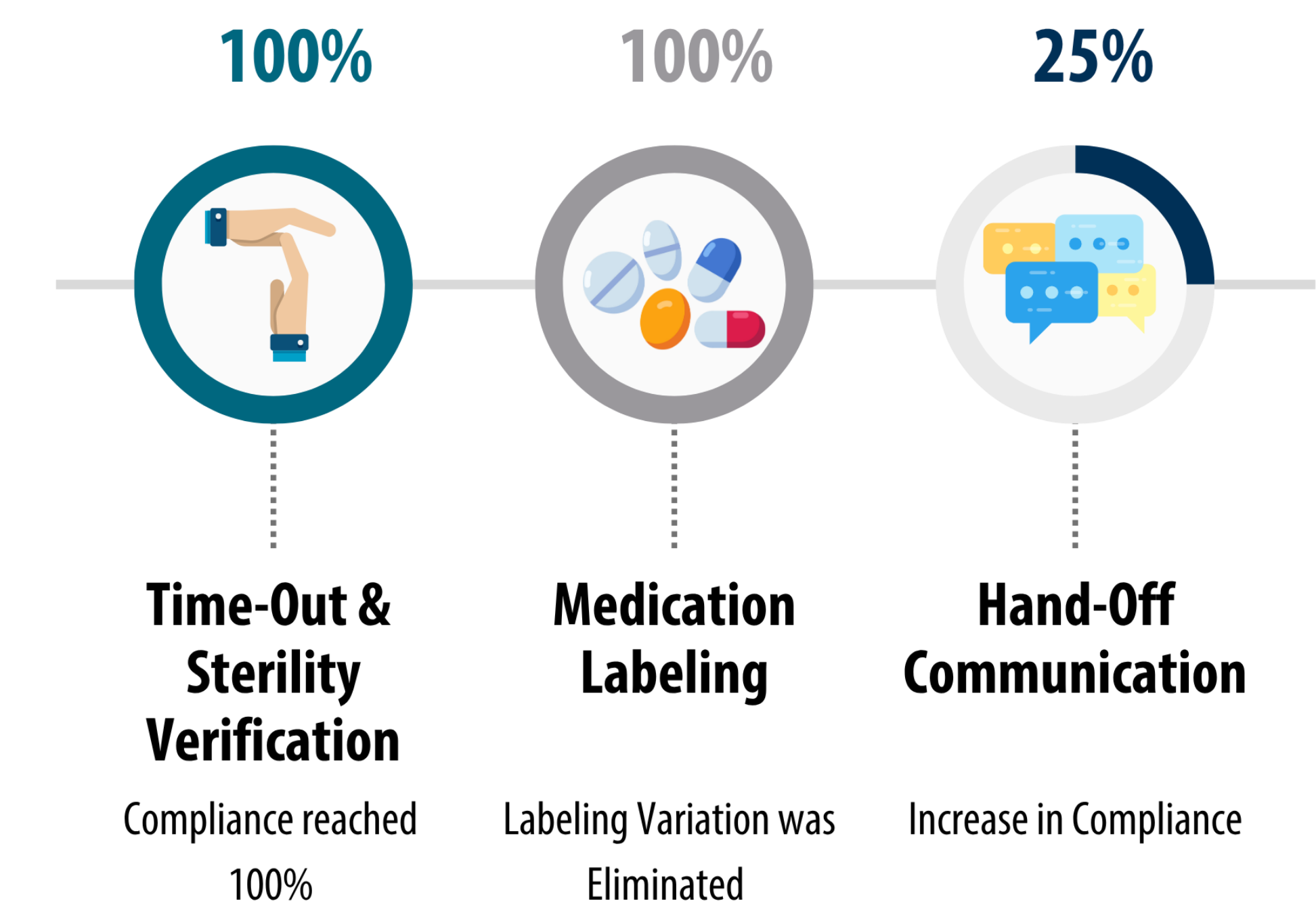


## IMPLEMENTATION PROCESS



## RESULTS

The tool improved adherence to critical safety practices:



Beyond metrics, staff reported increased perception of leadership support, enhanced teamwork, and more consistent application of protocols.

Weekly reviews provided trend analysis, and real-time coaching ensured immediate correction of unsafe practices. Leaders' visibility fostered trust and strengthened collaboration with frontline staff.

## CONCLUSION

Leadership rounding reinforced the essential role of perioperative nursing leadership in advancing safety and quality. Real-time coaching, immediate access to leaders, and reinforcement of standards promoted psychological safety and continuous learning.

The initiative strengthened transformational leadership by building trust, visibility, and shared responsibility for patient outcomes. This model provides a scalable framework for other surgical departments seeking to standardize practices, strengthen safety culture, and empower perioperative teams through intentional leadership engagement.