

The Impact of Hourly Nursing Rounds on Patient Satisfaction and Safety Outcomes in Hospitalized Adult Patients: A Systematic Review

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(Received: 9th November 2025; Accepted: 15th December 2025)

Abstract: Background: Nursing rounds are a structured approach in which nurses systematically visit patients to assess their condition, address their needs, and plan care effectively. This practice has become a cornerstone of quality nursing care in modern healthcare settings.

Objectives: To evaluate the impact of hourly nursing rounds on patient satisfaction and safety-related outcomes (falls, comfort, and communication) among hospitalized adult patients.

Methods: A systematic literature review was conducted in accordance with the PRISMA 2020 guidelines. Literature searches were conducted across CINAHL (Cumulative Index to Nursing and Allied Health Literature), Scopus, PubMed, Google Scholar, and other reputable healthcare and nursing journals. focused on measuring satisfaction with care, communication, and responsiveness, and the care provided to patients after the implementation of "rounding." The Prisma framework was used for article screening, and 12 studies were selected according to the inclusion criteria. These studies used diverse methods, including clinical trials, quasi-experimental studies, and cross-sectional studies.

Results: All studies found that incorporating hourly nursing rounds improved satisfaction scores, with patients reporting better comfort, improved communication, and a stronger sense of security. Specifically, the most beneficial were the structured rounds during which care was accompanied by assessment, clear communication, and prompt attention to requests. As the review discusses, challenges such as inadequate staff and inconsistent adherence to these practices hinder implementation.

Conclusion: The review concludes that patient satisfaction is positively influenced by nursing staff routinely checking on patients' well-being and suggests conducting further studies centered on the enduring impact of hourly rounds on patients and other clinical outcomes and safety measures.

Keywords: Hourly nursing rounding, Patient satisfaction, Patient safety, Nurse-patient communication, Nursing care, Hospital outcomes, Systematic review.

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DOI: 10.12816/0062495

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1. Introduction

Healthcare organizations primarily depend on patient satisfaction since this produces high-quality care treatment, leading to better results. These organizations rely on patient satisfaction measurements to evaluate service value and advance medical practice through continuous improvement initiatives. The caregiving responsibilities of nurses in healthcare facilities directly influence how patients view their care journey and how satisfied they remain with their experiences. Hospital patient experience depends mainly on clinical staff interacting directly with patients by delivering responsive care, compassionate practices, and accessibility actions (Aiken et al., 2021). Hourly rounding has emerged as a fundamental element in nursing care while becoming integral to patient satisfaction strategies.

Nursing staff conduct hourly patient checks to evaluate required assistance, pain management, and necessary support following preset one-hour protocols (Anderson, 2010). Anderson (2010) explains how this patient monitoring approach helps providers build better anticipation to enhance clinical success rates and patient satisfaction (Anderson 2010). Several hospitals and healthcare facilities now use hourly rounding as a new approach to improve their overall nursing care quality. This research evaluates patient care satisfaction through routine nursing rounding by measuring how rounding impacts subjective care delivery perceptions and analyzing environmental stability in healthcare facilities.

Studies conducted by Allari & Hamdan (2023) and Wilson (2017) show that hourly rounding produces positive effects on various aspects of patient care (Allari & Hamdan, 2023; Wilson, 2017). Regular nurse rounds reduce patient complaints through specific research findings that show enhanced pain management, decreased fear, and increased assistance needs (Flowers et al., 2016). Through continuous observation by nurses, healthcare complications can be detected early, which leads to superior patient outcomes during recovery. The modern approach to patient-centric care emphasizes predictive treatment delivery methods that directly respond to individual patient needs before medical symptoms emerge (Baron, 2014).

The practice of hourly rounding derives its theoretical foundation from established principles in quality improvement combined with patient-centered care approaches. Healthcare quality improvement activities use systematic methods to develop evidence-based practices while performing continuous assessments to enhance the quality of patient care delivery (Endalamaw et al., 2024). Hourly rounding operates as a structured intervention in the framework to deliver efficient and effective care by reducing gaps in patient service (Masangkay, 2021).

Research findings indicate that consistent rounding protocols better satisfy patients, but conflicting data exist about the importance of such protocols on patient outcomes (Alshammari et al., 2024). The discrepancies among study results stem from differences between research methodologies and, variations in sample sizes and rounded care protocols. The results from hourly rounding initiatives depend on several factors, including healthcare environment characteristics, nursing staff participation rates, and complementary quality improvement approaches (Jenkins, 2024).

This systematic review examines existing research evidence to determine how scheduled nursing rounding sessions affect patient satisfaction. It analyzes existing research investigating the effects of hourly rounding practices on patient satisfaction metrics regarding communication, responsiveness, comfort, and general nursing care evaluations. The review examines patterns and inconsistencies within the literature to establish effective hourly rounding implementation practices that boost patient satisfaction and quality nursing care.

2. Literature Review

2.1 Nursing Hourly Rounding and Patient Satisfaction

The hourly nursing rounding method is a proactive approach that requires nurses to attend to patients every hour (Hookmani et al., 2021). It is gaining popularity in hospitals to improve patient satisfaction, mitigating falls, pressure ulcers, and delays in care. Rounding permits nurses to promptly manage and respond to patient requests, leading to a more sophisticated and caring environment. Al-Nusair et al. (2023) demonstrate the positive effect nursing rounding has on patient satisfaction through improved communication, timely pain, and fall management. Wiratikusuma et al. (2023) propose that patients perceive an improvement in quality of care when they have frequent contact with their nursing team and staff, thus increasing satisfaction.

The relation of hourly rounding to patient satisfaction has been studied, and many researchers have shown how it improves patient care. Most importantly, communication with the patients has considerably increased (Al-Nusair et al., 2023). Giving patients attention increases the chances that nurses will capture early and address their issues before they escalate, thus leading to a positive care experience. Rounding remotely elevates nurses' ability to offer individualized attention, building trust and good relationships with patients and the entire healthcare team. In a Saudi Arabian hospital, Pappiya et al.'s (2022) study found that hourly rounding improved patient satisfaction. Notably, the increase in satisfaction became evident by the fifth day of the intervention and was statistically significant ($p < 0.001$). Also, in a different study, Negarandeh et al. (2014) reported that regular

nursing rounds also improved satisfaction among patients in the intervention group ($p < 0.001$). These results imply that the routine nature of hourly rounding assists nurses in addressing and talking to patients promptly, enhancing their perception of the care they receive.

2.2 The Impacts of Nursing Hourly Rounding on Falls Prevention

Rounding can also play a significant role in mitigating falls among nursing patients. Healthcare falls are one of the major problems in the health sector, especially for elderly patients or post-operative patients. These days, several studies have shown that hourly rounding helps reduce falls (Hamdan et al., 2022). Nurses can be proactive in the way that they efficiently assist in mobilizing patients who have call bells within reach and who do not need assistance, thereby preventing falls. Tucker et al. (2012) studied the use of hourly rounding in fall prevention in orthopedic wards in the USA and noted the patient falls per 1000 hospital days, which was 4.5 and is now ≤ 1.6 . Based on the study, the rounded figure was quite effective. In the same manner, Gliner et al. (2022) noted that enhanced communication with nurses during hourly rounds was responsible for the 21% reduction in falls (IRR=0.79, $p < 0.01$). These articles evidence the significance of nurse rounding for patient safety and reduced falls, enabled by prompt support and monitoring.

2.3 Patient Comfort and Quality of Nursing Care Due to Hourly Nursing Rounding

Patients are more comfortable, and the quality of nursing care is improved relative to fall occurrences when hourly nursing rounding is implemented. One of the primary goals of nursing rounding is to ensure that patients feel comfortable and attended to for the duration of their stay in the hospital. (Fan et al., 2021). It has been reported that patients subjected to regular rounds are more comfortable than patients who are not because their needs are being taken care of immediately; this includes attending to patients' calls, repositioning patients' beds, providing analgesics, etc. Roustaei et al. (2023) Evaluated the comfort and satisfaction of patients subjected to hourly rounding at an Iranian hospital. The results indicated that, compared to the control group, patients in the intervention group reported significantly greater comfort ($p < 0.001$), increasing nurses' job satisfaction. The study also noted reduced violence among nurses, indicating improved patient conditions. These results indicate that the impacts of hourly rounding are more far-reaching than simply meeting patient satisfaction but also improve the overall quality of care regarding nurse-patient interactions.

2.4 Barriers and Challenges to the Nursing Hourly Rounding

Numerous challenges inhibit the implementation of hourly nurse rounding despite the reported advantages of

this practice. One key issue is the potential impact on nursing resources. Efficient and orderly rounding consumes time and energy, resulting in workload congestion for nurses in busy hospitals with high patient-to-nurse ratios. Some studies have pointed out the difficulties of consistently meeting the rounds, particularly during peak times or when nurses are overworked and understaffed. In the study by Hamdan et al. (2022), nurses in Jordan were worried about the time burden associated with hourly rounding, particularly given that they had to perform other critical work when unoccupied. While most nurses universally accepted the importance of fall prevention and care of pressure ulcers, 19.4% indicated that their participation in implementing patient care decisions was restricted. It is clear from the above discussion that the realization of benefits associated with hourly rounding depends on the support that hospitals offer nursing staff in terms of staffing, time, and training on managing their time best: Staff Training and the Effectiveness of Hourly Nursing Rounding (Gliner et al., 2022).

Training personnel dramatically impacts the effectiveness of hourly nursing rounding. Rounding requires a high level of skill; thus, nurses must be trained in handoff communication, patient evaluation, and time management. Hamdan et al. (2022) have indicated that trained nurses positively impact patient satisfaction and care outcomes, particularly when paired with hourly rounding. Nurses trained in time management develop an appreciation for meeting patients in a timely, warm manner, enabling nurses to address patient needs professionally and compassionately. Al-Nusair et al. (2023) illustrated the benefits of structured nursing programs through marked improvements in nursing care quality and patient satisfaction. The study demonstrated an increase in nursing quality scores by 0.85 points ($p = 0.041$) alongside an increase in patient satisfaction by 8.28 points ($p < 0.001$) with the adoption of an hourly rounding program. These findings further highlight that improvements in care delivery through nursing rounding are stifled without appropriate training. There is a strong reliance on the training that enables nurses to perform rounding proficiently. To reap the full benefits of hourly nursing rounding, education, and support must be continuously available to nurses to enhance patient outcomes (Wiratikusuma et al., 2023).

3. Methods

3.1 Study Design

The present systematic literature review seeks to evaluate the impact of hourly nursing rounds on patient satisfaction and safety-related outcomes (falls, comfort, and communication) among hospitalized adult patients by synthesizing existing research. The article screening was conducted using the PRISMA approach outlined by Sarkis-Onofre et al. in 2021. A total of twelve studies met

the selection criteria. The study sample included clinical trials alongside quasi-experimental and cross-sectional studies. These documents systematically deepen the nursing care processes that, in turn, improve patient satisfaction. Utilizing evidence-based medicine will add value to care.

3.2 Databases and Keyword Strategies

The requirement of conducting a systematic analysis underpinned the necessity of carrying out an exhaustive literature search in various academic databases. Such databases include but are not confined to, CINAHL (Cumulative Index to Nursing and Allied Health Literature), Scopus, PubMed, Google Scholar, and

other reputable healthcare and nursing-related journals. Specific searching strategies were designed by applying appropriate rules about the topic so that all relevant studies on hourly nursing rounds and patient satisfaction were captured. Using keywords in combination enabled the retrieval of relevant studies and the exclusion of unrelated studies. Search queries were further streamlined by employing Boolean modifiers, “AND,” “OR,” and “NOT,” to maximize the relevancy of search outcomes. This allowed not only peer-reviewed journal articles but also grey literature, such as government policy documents and hospital policy documents, to be included to form a comprehensive view of the issue being investigated. Table 1 shows databases and search strategies.

Table 1 Databases and search strategy

Database	Keywords
PubMed	“Hourly nursing rounding,” “Patient satisfaction,” “Nurse-patient communication”
CINAHL	“Hourly nursing rounds,” “Nursing care,” “Hospital outcomes”
Scopus	“Nursing interventions,” “Patient satisfaction,” “Nursing quality improvement”
Google Scholar	“Impact of nursing rounds,” “Patient outcomes,” “Nursing care satisfaction”

3.3 Inclusion and Exclusion Criteria

Table 2 shows the inclusion and exclusion criteria

Table 2 inclusion and exclusion criteria

Inclusion Criteria	Exclusion Criteria
Studies published in English between 2000 and 2023	Studies published in languages other than English
Peer-reviewed articles and clinical trials	Non-peer-reviewed literature (e.g., opinion pieces, editorials)
Studies focusing on hourly nursing rounds and patient satisfaction	Studies that do not report patient outcomes or nursing interventions
Studies conducted in hospital settings	Studies conducted in non-hospital settings (e.g., outpatient clinics)
Studies with patient and/or nurse participants	Studies without clear patient or nurse involvement
Quantitative and qualitative studies	Studies that lack a clear methodology or valid data analysis

3.4 Data Analysis

The approach applied in the content analysis of the data for this systematic review was primarily analytic, which entails the classification and integration of findings from different studies into logical categories. Content analysis is a qualitative approach to studying data to identify recurring elements in multiple studies. In this case, studies were analyzed to obtain relevant information about the study’s goal and the design and outcomes of hourly nursing rounds on patient satisfaction. The analysis process involves a comprehensive scrutiny of each study’s methodology and a detailed explanation, comprising the design adopted, the sample size chosen, and the instruments used for data collection.

4. Results

4.1 Study Selection:

A total of 3,469 records were identified after screening and removing duplicate records (260) from the databases. 2,589 papers were excluded as irrelevant after screening 3,209 records. Of the remaining 620 reports asked for retrieval, 560 could not be retrieved. After excluding 40 reports for publication dates before 2010 and additional reports not published in English, 60 reports were assessed for eligibility. This systematic review finally included 12 studies that met the inclusion criteria and were included in the final synthesis. The selection process is illustrated in the PRISMA flow diagram (Figure 1)

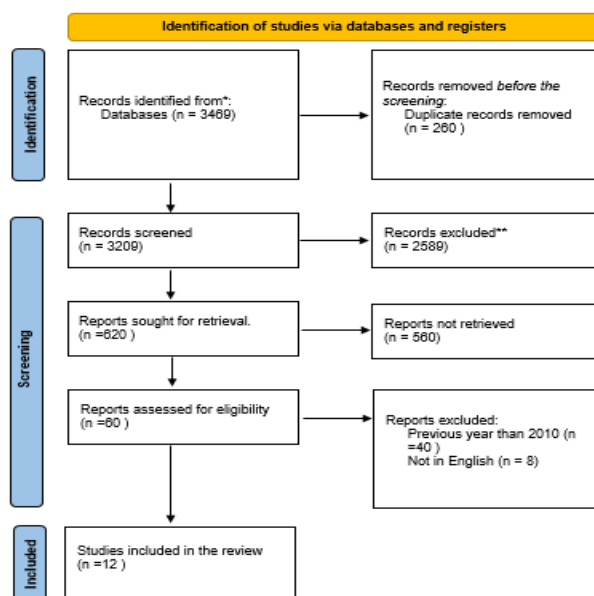


Figure 1: PRISMA Flow Diagram

Table 3 shows the Main findings of the studies.

Table 3 Main findings

No.	Author(s)	Title of the Study	Method	Population	Region	Sample Size	Analysis Technique	Results
1	Hamdan et al. (2022)	The Role of Nursing Rounds in Fall and Pressure Ulcer Prevention	Cross-sectional correlational design	Nurses	Jordan	1,378	Descriptive statistics, t-test, ANOVA, Kruskal–Wallis H test	87.9% of nurses agreed that nursing rounds improved fall prevention; 87.2% acknowledged their role in pressure ulcer prevention.
2	Ahmed (2023)	Evaluating Patient Satisfaction in Structured Nursing Rounds	Mixed-methods (Clinical trial + Interviews)	Patients	Saudi Arabia	68 (quantitative), 10 (qualitative)	Nonequivalent control group design, t-test	Structured nursing rounds significantly improved patient satisfaction, increasing the experimental group's mean score from 4.75 to 6.06.
3	Mulugeta et al. (2020)	Effectiveness of Nursing Rounds on Patient Satisfaction	Quasi-experimental, nonequivalent groups design	Hospitalized patients	Ethiopia	104 (52 control, 52 intervention)	Independent t-test	Nursing rounds significantly increased patient satisfaction scores from 71.02 ± 14.37 to 79.69 ± 12.21 ($p=0.001$).
4	Jennings & Mitchell (2017)	Quality Improvement in ICU Trauma Nursing through Structured Rounds	Quality improvement project	ICU trauma nurses	USA	132 trauma patients	Descriptive statistics	Implementing structured nursing rounds led to 452 patient care modifications, averaging three per patient.
5	Roustaei et al. (2023)	Impact of Nursing Rounds on Patient Comfort and Nurse Safety	Quasi-experimental	Patients and nurses	Iran	100 patients, 35 nurses	Chi-square, Fisher, independent t-test, paired t-test	Nursing rounds improved patient satisfaction ($p<0.001$) and comfort ($p<0.001$) and also reduced violence against nurses ($p=0.041$).

No.	Author(s)	Title of the Study	Method	Population	Region	Sample Size	Analysis Technique	Results
6	Tucker et al. (2012).	Nursing Rounds as a Strategy to Reduce Patient Falls	Repeated measures design	Orthopaedic inpatients	USA	Not specified	Descriptive statistics, focus groups	Nursing rounds helped reduce fall rates from 4.5 to 1.6 per 1,000 hospital days, though rates fluctuated post-intervention (3.2 per 1,000 days).
7	Pappiya et al. (2022)	Influence of Nursing Rounds on Patient Satisfaction Over Time	Clinical trial, nonequivalent control group	Hospitalized patients	Saudi Arabia	68 (34 control, 34 intervention)	Chi-square, independent t-test	Nursing rounds significantly increased patient satisfaction by the fifth day ($p<0.0001$), compared to no improvement on the first day ($p=0.288$).
8	Negarandeh et al. (2014)	Improving Nursing Care Quality Through Regular Rounds	Controlled clinical trial	Medical-surgical inpatients	Iran	100 (50 control, 50 intervention)	Patient Satisfaction with Nursing Care Quality Questionnaire	Structured nursing rounds led to a statistically significant increase in patient satisfaction ($p<0.001$) in the intervention group.
9	Al-Nusair et al. (2023)	Effect of Structured Nursing Rounds on Care Quality and Patient Experience	Nonequivalent control group pretest-posttest	Orthopaedic ward patients	Not specified	145 (70 experimental, 75 control)	Difference-in-difference analysis	Nursing rounds improved nursing care quality scores by 0.85 points ($p=0.041$) and patient satisfaction by 8.28 points ($p<0.001$).
10	Gliner et al. (2022)	Communication in Nursing Rounds and its Impact on Fall Prevention	Poisson regression	Military treatment facility patients	USA	31 facilities	Regression analysis	Improved nurse communication through structured rounds reduced fall rates by 21% ($IRR=0.79$, $p<0.01$), while poor nurse communication increased falls 8.6 times ($IRR=8.6$, $p<0.01$).
11	Wiratikusuma et al. (2023)	Enhancing Patient Empathy and Assurance Through Nursing Rounds	Pre-experiment design	Hospital patients	Indonesia	46	Chi-square, Mann-Whitney test	Nursing rounds enhanced patient empathy satisfaction ($p=0.007$) and assurance ($p=0.001$).
12	Ali et al. (2022)	Effect of Nursing Rounds on Patient Satisfaction Over Five Days	Clinical trial, nonequivalent control group	Medical-surgical inpatients	Saudi Arabia	68	Descriptive and inferential statistics	Nursing rounds significantly improved patient satisfaction from 6.06 (experimental) vs. 4.75 (control) on Day 1 to 8.21 (experimental) vs. 5.76 (control) on Day 5.

5. Study characteristics

5.1 Study Design and Analysis

The works in this analysis utilize various research methods such as clinical trials, repeated measures, controlled clinical trials, pre-experimental designs, and statistical regression modeling. These methods explain the implementation of fall preventative measures and patient satisfaction within the hospital environment. In the case of (Pappiya et al., 2022) and (Ali et al., 2022), both employed an interventional time-series design with nonequivalent control groups in their studies. They also measured the change in patient satisfaction from the baseline with descriptive statistics, t-tests, and chi-square tests. Similarly, (Negarandeh et al., 2014) conducted a controlled clinical trial using the Patient Satisfaction with Nursing Care Quality Questionnaire to assess the impact of clinical nursing educational interventions on patient satisfaction. Other studies, like (Tucker et al., 2012), employed a repeated measures design, which allowed them to assess the advanced change in the number of falls amongst orthopedic inpatients over time. (Gliner et al., 2022) used Poisson regression analysis for military treatment facilities and portrayed the consequences of inadequate nurse communication on patient falls.

Along with other studies, (Al-Nusair et al., 2023)) performed a difference-in-difference analysis, an approach that measures the effect of interventions using a pre-and post-approach, focusing on evaluating the change in patient satisfaction as well as nursing care quality scores before and after the intervention took place. Broadly speaking, as described above, some blend of experimental and quasi-experimental, alongside statistical modeling techniques, all at once served to reliably evaluate nursing interventions (Wiratikusuma et al., 2023). These methodologies made the accuracy of the results more reliable by adjusting for factors like initial patient demographics and the characteristic features of the hospital.

5.2 Type of Population and Sample Size

The population studied for this research was mostly composed of hospitalized patients from medical-surgical, orthopedic, and military treatment wards. There was some variation in the sample sizes across studies, which impacted the generalizability and the statistical power of the findings. (Pappiya et al., 2022) Moreover, (Ali et al., 2022) focused on studying hospitalized patients in Saudi Arabia, where they sampled 68 patients (34 in each interventional group). Likewise, (Negarandeh et al., 2014) focused on 100 medical-surgical inpatients in Iran (50 in each group). These sample sizes were adequate for determining statistical differences regarding patient satisfaction. Other studies, such as (Al-Nusair et al., 2023), observed 145 orthopedic ward patients, out of which 70 were assigned to the experimental group and 75 to the control group. (Tucker et al., 2012) did not mention exactly how many orthopedic inpatients they had.

However, we know from the analysis of fall rates that they did have a considerable number over several studied periods, suggesting a much larger sample. In contrast, (Wiratikusuma et al., 2023) studied 46 hospitalized patients in Indonesia, several subjects that pose limitations to generalizability. (Gliner et al., 2022) incorporated a large-scale dataset from 31 military treatment facilities in the US, which increased the external validity of the findings. Although most studies had sample sizes adequate to achieve statistical significance, differences in hospital settings and population types necessitate extreme caution when applying findings across diverse healthcare systems.

5.3 Main Outcomes

The literature under consideration has focused on investigating the effects of implementing a nursing round system on patient satisfaction, reducing fall rates, and the overall quality of nursing care provided to the patient. Findings consistently showed that patient satisfaction levels and the incidence of falls in the hospital's surgical units improved significantly when proactive, organized nursing rounds were performed. (Pappiya et al., 2022), (Ali et al., 2022) and many other authors provided evidence that nursing rounds greatly enhanced patient satisfaction, with the p values documented being less than 0.001 on the fifth day of the study. Study participants reported improved responsiveness, communication, and overall care as a result of active participation by nurses. Similarly, (Negarandeh et al., 2014) noted that the execution of hourly scheduled nursing rounds resulted in an increase in patient satisfaction scores ($p < 0.001$), which underscores the impact of consistent nurse availability and contact. Falls prevention studies emphasized the role of encompassing nursing rounds as part of the initiative. (Tucker et al., 2012) noted a decline in the rate of falls from 4.5 to 1.6 per 1,000 hospital days after the introduction of structured nursing rounds, which suggested that intent observation and early action positively impacted patient safety. (Gliner et al., 2022) showed that ineffective nurse communication was associated with an 8.6 increase in the IRR ($p < 0.01$) for falls while rounding led to a 21% decrease in falls ($IRR = 0.79$, $p < 0.01$). The above evidence strongly supports the claim that incorporating guided nursing rounds into the system positively impacted patient satisfaction and safety.

5.4 Efficacy

Nursing rounds were punctual and routinely completed. This led to profound advancements in comprehensive nursing care, patient satisfaction, and fall prevention. As noted from various studies, the quality of nursing care has improved remarkably. These included check-ins, proactive engagement, and optimized communication, which were effective in patient care. In regards to patient satisfaction, Pappiya et al. (2022) and Ali et al. (2022) noted that structured nursing rounds over five days significantly improved patient satisfaction

scores ($P<0.001$). With timely rounds, patient needs could be addressed more easily, which enhances care and responsiveness perceptions. During the academic terms, nursing students reported high levels of satisfaction with clinical placements. According to FNegarandeh et al. (2014), consistent hourly nursing rounds improved patient satisfaction rates remarkably ($P<0.001$), demonstrating the difference consistent nurse presence can make in attentive patient care experiences.

Regarding fall prevention, Tucker et al. (2012) demonstrated that falls per 1,000 hospital days dropped from 4.5 to 1.6 after implementing structured nursing rounds, and through the collaboration of patients, rounding with patients aided in fall prevention. Gliner et al. (2022) showed that poor nursing communication increased the odds of falls by 8.6 times ($IRR=8.6$, $p<0.01$). Moreover, the same research found that rounding interventions reduced the rate of falls by 21% ($IRR=0.79$, $p<0.01$).

6. Discussion

6.1 Improvement in Patient Satisfaction Through Nursing Rounds

The studies reviewed show that systematic nursing rounds enhance patients' satisfaction. (Pappiya et al., 2022) (Ali et al., 2022) cited that satisfaction scores shot up following the implementation of hourly nursing rounds. The studies included in this review granted that regular nurse contact improves patients' perceptions of nurse-mediated care. (Pappiya et al., 2022) Reported a statistically significant improvement in patients' satisfaction on day five of the intervention ($p<0.0001$). This aligns with other studies that have demonstrated that patients' satisfaction depends on the number and quality of interactions they have with nurses during their admission. Previous studies, particularly the one conducted by (Negarandeh et al., 2014), have revealed that systematic nursing procedures like hourly rounds result in greater levels of satisfaction ($p<0.001$). This improvement is due to the tailored care patients receive, the reassurance from regular check-ups, and the anxiety alleviation accompanying the uncertainty of care. Alongside the technical intricacies of the care provided, the satisfaction a patient receives also entails great attention to interrelations, thus forming a holistic experience throughout the service, as emphasized by (Mulugeta et al., 2020) and (Roustaei et al., 2023). These two studies further highlight the perception of care quality from a patient's viewpoint and emphasize that such perception is associated with the grade of attention and communication given to them by the health staff. The rationale for nursing care rounds influencing satisfaction levels is the proactive attention to patient needs. Nurses can respond to requests, alleviate discomfort, and provide reassurance, fostering patients' trust in the health care system. Hourly nurse-patient interaction, or the simple visibility of the nurse during the check, helps the patients

to feel that they are listened to, which alters their attitude toward satisfaction in a health institution.

6.2 Communication and Nurse-Patient Interaction

Effective communication with patients is essential to improving patient satisfaction, and the studies reviewed suggest that consistent nursing rounds improve communication between nurses and patients. As Gliner et al. (2022) explain, enhancing nurse-patient communication during rounds mitigates falls by improving the overall caregiving atmosphere, which shows that communication influences patient outcomes. This is based on findings from Tucker et al. (2012), who reported lower fall rates associated with structured nursing communication interventions. Similar results were reported by Wiratikusuma et al. (2023), where patients reported increased satisfaction with nurse empathy and assurance about hourly nursing rounds. Prior literature emphasizes that patient satisfaction is highly correlated with the quality of communication between nurses and patients. Gliner et al. (2022) study demonstrated that falls among patients were more likely in the case of poorly communicated by nurses, highlighting the need for safe communication practiced in nursing sufficiency. Regular nursing rounds allow effective communication between nurses and patients, explaining care procedures, addressing concerns, and providing emotional assistance. Such relationships help develop rapport, which is fundamental in improving a patient's satisfaction and perceptions about the care administered.

Furthermore, Roustaei et al. (2023) reported that hourly rounds not only enhance communication but also create a conducive atmosphere for patient support. This is where the nurses can empathize with the patients, listening and responding to their needs in good time. These communication components are of great importance in improving the patient experience and increasing satisfaction.

6.3 Patient Outcomes Beyond Satisfaction: Implications for Nursing Practice

Patient satisfaction is an important measure of quality care; however, other outcomes like fall prevention and reduced adverse events are also important in measuring the impact of nursing rounds. The review indicates that nursing rounds mitigate falls, which supports (Tucker et al., 2012) and (Gliner et al., 2022) conclusions. These two studies reported that structured initiatives enhanced communication between nurses and patients and prompted more proactive address of patients' needs, which significantly reduced fall risks—an important issue in patient safety. Reduction of falls during hourly nursing rounds has been reported in previous studies that highlight the significance of prompt nursing action in injury prevention. Gliner et al. (2022) reported that the combination of communication skills

with structured rounds led to a 21% reduction in falls (IRR=0.79, $p<0.01$), which supports the argument that nursing rounds aid in preventing avoidable incidents. Furthermore, Hamdan et al. (2022) and Al-Nusair et al. (2023) reported improvement in nursing care scores and patient satisfaction, highlighting the impact of nursing rounds on patient outcomes. Integrating hourly nursing rounds into standard practice enhances patient satisfaction and safety, improving healthcare outcomes. These rounds enable nurses to evaluate patients' psychosomatic requirements and risks and formulate the necessary modifications to care plans (Roustaei et al., 2023). The strategy allows nurses to recognize the signs of health deterioration and take immediate action, thus averting serious complications, including but not limited to falls, pressure sores, medication blunders, and medication errors. The effectiveness of hourly nursing rounding may vary across cultural contexts due to differences in patient expectations regarding nurse-patient interaction and communication styles.

Cultural norms dictate how patients expect to interact with their care providers, which directly impacts the effect of nursing rounds. A patient's cultural respect can influence their willingness to actively engage or voice concerns during nursing round. A culturally sensitive approach requires active listening and attention by the nurse to non-verbal cues.

In multicultural healthcare systems, language barrier may affect the patient- nurse communications. Relying on simple scripts, non-professional interpreters (like family members), or simply using non-verbal communication during nursing round can lead to misunderstandings about pain levels, medication instructions, and follow-up care, ultimately undermining patient safety and satisfaction.

7. Conclusion

The literature review on the effectiveness of nursing intervals posits that this intervention significantly enhances patient satisfaction, relationships with caregivers, and overall clinical metrics. These outcomes are consistent with the existing debate literature highlighting the constructive impact of nursing rounds on providing services in hospitals and healthcare facilities. The advantages of performing nursing rounds on an hourly basis extend well beyond clinometer satisfaction; there are also advancements in safety and reduced adverse outcomes such as falls. Incorporation of hourly nursing rounds into clinical practice is one of the simplest ways to enhance patient care and clinical outcomes. Developing and applying structured protocols for nursing rounds can effectively improve patient satisfaction metrics, patient safety measures, and overall satisfaction ratings for these healthcare facilities. More research is needed to understand the long-lasting impacts of nursing rounds on patients and how best to integrate such practices into nursing care.

7.1 Recommendation

From the findings of this systematic review, it is suggested that nursing rounds every hour be instituted at healthcare facilities to improve patient satisfaction and patient care. Facilities must educate and assist nursing personnel so that the rounds are systematic and address the physical and psychosocial needs of the patients. Hospital management also needs to provide the required resources, like additional nurses, to implement the nursing rounds properly. It is also essential that these healthcare institutions equip nurses with proper supervision and evaluation skills to realize these nursing rounds and rate these patient communication techniques. To optimize patient satisfaction, nurses should be trained to actively listen, show empathy, and deliver patient-centered care to ward patients. Nursing rounds should be assessed routinely for patient experience and safety ventilation. Nurse administrators need to collaborate with other healthcare professionals to deliver whole patient care during rounds.

7.2 Future Directions

Further studies should assess the clinical outcomes, patient satisfaction metrics, rate of readmissions, and overall duration of hospitalization to better understand the longitudinal results of hourly nursing rounds. There remains a gap in the literature regarding randomized control trials (RCTs) that delve into the association between nursing rounds and achieving enhanced patient outcomes. Thus, more RCTs are warranted. Additionally, research should focus on the most effective methods of implementing hourly rounds in various healthcare settings and those that are under-resourced or experience high turnover. Understanding the perspectives of patients and nurses regarding the implementation of hourly rounds' strengths and weaknesses will be important to identify the gaps presented by this intervention. Moreover, additional research is needed to determine the impact of hourly nursing rounds for patients with chronic illnesses, elderly patients, and patients in critical care to better understand the differential advantages associated with these groups.

7.3 Study Limitations

Although this review followed PRISMA guidelines, several limitations should be acknowledged. The studies included demonstrated considerable heterogeneity in patient populations, rounding frequency, settings, and intervention duration. Most studies relied heavily on self-reported patient satisfaction measures, which may introduce response bias. Additionally, no quantitative meta-analysis was performed, limiting the statistical power and the estimation of pooled effects.

8. References

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