

- Can you tell me how long you have been working on this ward for?
- Are you aware of the term ‘intentional rounding’? *(If the participant doesn’t understand what the term means, explain that we mean regular (often hourly) nurse rounds where a structured format is followed. If participant uses another name for these rounds, insert this name throughout interview instead)*
- Can you tell me how intentional rounding operates in the ward you work on?

(Possible prompts:

- How long have you been doing intentional rounds on this ward?
- How frequent are the rounds?
- Is this is same for all patients?
- Who does the rounds? (what levels of staff etc)
- What sort of documentation is used? What are your thoughts on the documentation used?
- Is documentation monitored? By who?
- What happens at night? Is it different to daytime?)
- Why was intentional rounding implemented on this ward and was it explained to you? By who? How?
- What was your initial reaction to it?
- Has your reaction to intentional rounding changed over time?
- Were you able to influence the introduction of intentional rounding?
 - If yes, how?
 - If no, why not?
- Is intentional rounding explained to patients and their families?
 - If yes, how?
 - If no, why not?
- What do you feel intentional rounding is intended for / What issues is it supposed to address?
- How does intentional rounding fit with other nursing routines on the ward? (e.g. does it replace a previous type of round or has it been added on top of existing routines?)
- What difference does intentional rounding make to you and your colleagues?
- What difference does it make to patients and their families? (E.g. does it impact the quality of patient care?)

- In your experience, what are the most positive aspects of intentional rounding? (e.g. does it give you more time at the bedside? Does it add value?)
- And what are the most negative aspects of intentional rounding? (e.g. does it give you less time at patients' bedside? Does it detract from time that could be spent on other tasks?)
- What would you class as a 'successful' implementation and delivery of intentional rounds?
- What factors influence this success of intentional rounds? (possible prompts: level of staff involved, personal characteristics of individual staff members/patients etc)
- What factors hinder the success of intentional rounds?
- How can the benefits of intentional rounding be maximised?
- Do you feel intentional rounds make you more or less able to be proactive in meeting patients' needs? Why?
- Has the introduction of intentional rounds made any difference to the atmosphere on the ward? (e.g. a feeling of calm or otherwise, use of buzzers)
- What are the key personal qualities and/or training needs that healthcare staff require in order to deliver intentional rounding effectively?
- What do you think are the key issues around intentional rounding that require further research and development?
- If you could design a rounding programme for nurses, what do you think would be the most beneficial method of doing so (I.e. how regularly? by who? for how long? structured or unstructured? monitored or unmonitored? for all patients?)