Introduction
Proper staff practice, cautious equipment handling and careful environmental management promote safe, effective and efficient ward operations. Cross ward round enhances mutual understanding amongst wards and to strengthen intra-departmental communication and collaboration. In Department of Respiratory Medicine and Extended Care (RM&E) of Kowloon Hospital, ward rounds by senior nurses in the past few years identified good practices, inadequacies, below-standard practices, infrastructure defects which triggered a series of quality improvement works yielding significant staff and patient benefits.

Objectives
In RM&E, regular cross ward rounds were carried out since 2011. The rounding was implemented by senior nurses visiting and examining wards not under their direct management in order to reduce self-judgment and bias. According to risk stratification of current year and / or incident occurred, they appraised specific ward practices with targeted theme(s) or looked at overall ward practices based on established standards and guidelines and their rich clinical and management experiences. Department operation manager, ward managers (WMs), nursing officers and advanced practice nurses of the department spent one to two hours in visiting each selected ward, in the presence of the responsible WM who explained ward practice when necessary and received comments directly. Actual situations or practices worth for attention were then reported for follow-up actions by individual wards or department.

Methodology
All BiPAP machine/mechanical ventilator/defibrillator/infusion pumps/electric beds/hoists are now attached with operation guides and trouble-shooting instructions; regularly clearing drugs of discharged patients from drug cupboard is implemented to avoid stocking of unnecessary drugs or use of expired medications; specimen trolley layout and format of specimen send-out records have been standardized to facilitate
safe and secure send-out process; layout of napkin round trolley has been rearranged to prevent cross-infection; practice of posting signage indicating high fall risk and flagging in medical notes is aligned for minimizing patient fall; work instructions on change of IV infusion set and line labelling are being developed to align different ward practices for avoiding bloodstream infection and medication error; ward assistants’ practice of refilling hot drinking water has been examined to regulate the location of such procedure and water temperature to prevent injury on duty.

**Result**
Cross ward rounding not only provides chances of self-inspection and self-reflection to managers and frontline colleagues, but also has been benefiting patients, staff and the department. It has become an accustomed practice in RM&E and has cultivated a mindset of continuous quality improvement in every department member.