Two serious events launched an initiative to implement strategies to improve quality outcomes in a 23-bay Post Anesthesia Care Unit within a Magnet® hospital. Nursing leadership focused on 3 goals to improve quality outcomes, inclusive of improving compliance with the established autotransfusion and line reconciliation policies, and ensuring completeness of critical nursing assessments. A defined 7-step approach was utilized to achieve these goals and has resulted in more than 600 days of quality patient care absent of any error resulting in root-cause analysis.

The first step was to validate that the perioperative leadership and councilor structure fostered a culture of patient safety. Secondly, identifying the “chief quality officer” in the department defined bottom-line ownership for monitoring clinical practice and outcomes. Assuring accurate, consistent data collection, and engaging staff in describing the story that the data told about front-line practice were also critical as steps three and four. Step five included hands-on teaching methods and real-time re-education when non-compliance was observed during clinical rounding. The Plan-Do-Check-Act method was used as the sixth step to continuously re-evaluate the effectiveness of education on any new process implementation. Step seven included celebrating successful practices with the entire team.

Goals obtained include: line reconciliation compliance increased from 50% to current state of 100%; neurovascular assessments completed on eligible patients improved and maintained at 100% compliance; and autotransfusion errors reduced from four in 2010, to none in 2011. This offering will detail how quality goals in perianesthesia nursing practice can be achieved utilizing this 7-step process.