In October 2008, an initial review of nurses charting revealed only 81.2% of charts were complete. We looked at our charting template and charts monthly to determine how to improve charting in the PACU. The information was collected by all staff nurses in the form of chart reviews, all nurses are required to do one chart review per month. ASPAN standards were used to determine completeness of charts.

During FY 2009 the data collected was used to create a new PACU flowsheet to save time, improve charting, improve patient care, meet ASPAN/JCAHO standards. This was accomplished by reviewing existing forms from other hospitals, brainstormed as a unit, and used Survey Monkey to survey staff for preferences. The new flowsheet was rolled out in December 2009. Education was provided to staff prior to implementation, support was available for the first week of implementation, and individual feedback was provided to staff.

Chart Reviews resumed Feb 2010, chart reviews since implementation reveal a compliance of 94%. Feedback from the staff nurses was the existing chart review tool was that it did not mirror the new flowsheet, and updated chart review tool was completed May 2010. Areas on charting weakness were noted as patients receiving spinals and epidurals. After review and education of nurses of specific weakness charting compliance increased.

The final data indicated that education, involving the entire staff in the project, and creation of a new flowsheet have improved documentation in the PACU.