Background
In a progressive oncology facility that recently transitioned to an electronic health record (EHR), variances in discharge scoring by nursing staff were observed. A focus group was established to identify and address barriers related to consistent understanding and application of post anesthesia recovery (PAR) scoring and discharge criteria.

Aim
• Assess nursing staff’s current knowledge and practice
• Review established ASPAN standards and guidelines
• Identify variations in the EHR charting system
• Develop and provide education to team members
• Promote standardization in practice and EHR documentation of discharge scoring

Process of Implementation
Chart audits and staff feedback revealed variances in nursing staffs’ understanding and application of post anesthesia recovery scoring and discharge criteria. Hospital conversion to new EHR system created confusion among team members. Inconsistencies in the EHR charting system, related to various patient populations, were a source of confusion amongst staff.

• A timeline with deadlines and action items was developed by a focus group to ensure objectives were met.
• Knowledge deficits of ASPAN definitions and guidelines were identified.
• Education included team huddles, one to one discussion, screen shots of documentation, and case scenarios were developed and disseminated.

Statement of Successful Practice
- The initial survey showed that 50% of the nursing team were unable to appropriately identify when discharge criteria was met based on a case scenario.
- After education and removal of barriers, 97% of respondents indicated increased comprehension and application of PAR scores.
- Nursing staff verbalized understanding of EHR documentation based on patient’s environment and discharge scoring. Increased knowledge of ASPAN standards and guidelines was noted among team members.

Implications for Perianesthesia Nursing
Reviewing an extensive education of established ASPAN guidelines of discharge assessment and scoring promotes cohesive understanding and use of PAR scoring. Standardized application of discharge criteria will improve efficiency and communication as evidenced by decreased patient wait times and improved patient satisfaction.

Chart audits, nursing surveys and direct observation of nursing team members at 30, 60 and 90 days post survey will be conducted.

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