

PACU ACUITY

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PACU acuity is an important consideration in staffing and in identifying length of stay. We recognized the challenges in differentiating between a low acuity patient and a high acuity patient and implications for staffing and understanding volumes and increased length of stay. In order to better explain monthly variances in volumes, it was felt it was important to consider the acuity of the patient. The acuity of our patients varies significantly. Our facility provides care to pediatric to geriatric patients and specialties include Vascular, Neuro, Ortho, Gyne, GU, Plastics, ENT, General, etc.

An acuity grid was developed with categories of mild, moderate, substantial or severe. Points were assigned to categories. Mild was assigned a 1 point value. Moderate was assigned a 2 point value. Substantial was assigned a 3 point value. Severe was assigned a 6 point value. In each category criteria was developed based on the acuity of the task.

Examples of Mild acuity tasks are B/P requiring extended stay, respiratory treatments, analgesic or antiemetic administration, Ice bags applications. Examples of Moderate acuity tasks are Vital signs required more frequently than every 15 min, chest tubes, Language barrier, child over 8yrs, D/C art line. Examples of Substantial acuity tasks are Ventilator, chest pain requiring treatment, discharge to ICU, Invasive monitoring, combative or restless patient. Examples of Severe acuity are cardiac or respiratory arrest, Malignant Hyperthermia, Isolation patient, child under 8 yrs.

Points are totaled at the end of the patient stay based on each category values. The patient is assigned a class which equates to a nurse to patient ratio based on ASPAN standards. Class I patients have 0 points and are a 1:2 nurse/patient ratio. Class II patients are mild with total points equal to 1-5 and are a 1:2 nurse/patient ratio. Class III patients are moderate with 6-14 points and are a 1:1 nurse/patient ratio. Class IV patients are substantial with 15-20 points and are a 2:1 nurse/patient ratio. Class V patients are severe with greater than 20 points and are a 2:1 nurse/patient ratio.

The data is compiled at discharge and a monthly acuity score was assigned to pt volumes in PACU. On YTD average Class I pts are 1% of volumes, Class II equal 56% of volumes, Class III equal 35% of volumes, Class IV equal 5% of volumes and Class V equal 3% of volumes.

Defining acuity for patients assists the dept in explaining variances related to salaries and patient length of stay. Staff had input in the development of criteria assigned to categories. Criteria is evaluated yearly and modifications are made based on changes to patient care. The acuity values benefited our unit in identifying staffing variances related to budgeted volumes.