

## **HUDDLE FOR IMPROVED STAFF PRODUCTIVITY**

Team Leaders: Elizabeth L'Hommedieu, BSN, RN, CPAN;  
Elizabeth Govero, MSN, RN, CMSRN  
Barnes-Jewish Hospital, St. Louis, MO

**PURPOSE:** Our large post-anesthesia care unit (PACU) recently experienced a combination of increased staff vacancy and a higher number of surgery cases. This caused patients to be held in the operating room (OR) after surgery. The PACU leadership team decided to assess staff allocation daily. The goal was to fill the variable needs of the unit and to better utilize all staff members.

**IMPLEMENTATION:** After reviewing staff vacancies and daily scheduled cases in all phases of our PACU, staff redistribution would be discussed. This would take place during a short “huddle” with the charge nurses from four patient care areas: Pre-op, Phase I, Phase 2 and PCCA (Post-anesthesia Critical Care Area). A daily plan was drawn up at the “huddle” to cover our peak hours between 1pm and 5pm. Staff members would be floated between all of the perioperative areas as needed to avoid OR delays and better support staff in busier areas. During the day, communication took place between charge nurses to determine when staff would be available to relocate and to continue to assess the needs of the entire PACU.

**EVALUATION:** The process has been in place for three months. We are still experiencing more than average staff vacancies, however by shifting staff members to other phases of care during peak hours it has decreased the time of OR holds. It has also provided more staff support during the busiest hours of the day. Newly hired staff members are currently being cross-trained in all phases of perioperative care.