

APPLICATIONS OF TEAM APPROACH FOR IMPROVED NARCOTIC COUNT SECURITY

Jane C. Dierenfield, RN, BSN, CPAN, CAPA
Kona Surgery Center, Kailua-Kona, HI
Team Members: Anne Waugh, CRNA; Pam Santimer, LPN

Evidenced Based Practice in nursing indicated that medical errors are made through poor communication. Group involvement in processing patients through the Peri Anesthesia Unit can lessen medication errors. The surgical journey is one in which the patient transitions through a number of different care team areas. At the Kona Surgery Center the Pre-op, Intra-Op, Post-op and Anesthesia Nurse are included in our daily narcotic count. The model successfully increased the narcotic accountability.

THE PROCESS:

1. Two narcotic boxes for each CRNA (Certified Registered Nurse Anesthetist) were established.
2. All Peri Anesthesia Nurses were involved in the set-up and count of narcotics.
3. The Quality Committee was informed of the new model for narcotic count.
4. Safety and efficiency were improved by including the CRNA in the narcotic count.

THE GOAL

1. Optimize workflow within the Peri Anesthesia Unit.
2. Improve staff satisfaction with the model of narcotic count.
3. Maximize patient safety.
4. Greater continuity of patient care eased the stress of the narcotic count.

OBJECTIVES

1. Reduce the number of narcotic count errors and re-counts to correct the errors.
2. Increase ease by including the CRNA in the narcotic count process.
3. Create a standard narcotic count worksheet to be used daily by the CRNA.
4. Accuracy and details of the daily narcotic count eased with the CRNA closing the count daily with the Peri-Anesthesia Nurse.

THE NEW MODEL

1. Created a morning narcotic count with the Peri-Anesthesia Nurse and CRNA.
2. Re-counceled the CRNA's individual narcotic box at the end of the day count with a RN and CRNA.
3. Relieved a Peri-Anesthesia RN from the morning and evening narcotic count.
4. Involved the Anesthesia Department in the responsibility of the narcotics they administered during the day.

WHAT WAS ACCOMPLISHED:

1. Decreased stress among staff related to the daily narcotic count.
2. Increased safety in our narcotic administration and documentation.
3. Increased patient safety.
4. Re-designed the narcotic count worksheet for ease of accountability.