

NURSES' PERCEPTIONS ON THE ROLE OF CLINICAL LEADER IN A POST-ANESTHESIA CARE UNIT

Team Leaders: Sharon Carson, RN, CPAN; Elsy Puthenparampil, MSN, RN-BC
MD Anderson Cancer Center, Houston, Texas

Team Members: Harolynn Kelly, RN, CPAN; Arlene Lastimoso, RN, CPAN;
Lourdes Maningat, RN, CCRN, CPAN; Evelyn Acosta, MSN, RN, CPAN;
Edwin T. Tagab, MSN, RN, VA-BC; Teresita Degala, RN, CVRN; Imelda De Castro, RN;
Soo Ok, RN, CPAN; Florine Mendonsa, RN, CPAN; Elsa Bahiru, RN, CPAN

Background Information: The Post-Anesthesia Care Unit (PACU) is a fast paced, critical care area. An influx of new hires, nurses with no prior PACU experience, and the high acuity of the unit led to an increased need for additional nursing support expressed at staff meetings. Nurses expressed concern about potential risks related to the lack of a strong nursing support structure. Consequently, the clinical leader role was created. The role requires educational and clinical expertise to assist clinical nurses in clinical decision-making and communication.

Objective: To explore how PACU nurses perceived the clinical leader role and its usefulness to them in their practice.

Process of Implementation: Thirty-two nurses with varying levels of clinical expertise were randomly surveyed six months after the clinical leader role was implemented to determine their perception on the role.

Statement of successful Practice: The findings suggest that PACU nurses perceive the clinical leader role positively and believe it has an impact on unit productivity and provides greater support to clinical nurses.

Implications: This project suggests that there may be potential benefits for other PACUs who choose to develop similar roles.