CREATING A CULTURE OF SAFETY

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BACKGROUND INFORMATION:

The AHRQ set a goal to support a culture of patient safety and quality improvement. Culture of Safety can be defined as the commitment of a high-reliability organization to minimize harmful events and maintain safety at all levels. Through the use of an AHRQ survey, the PACU identified room for improvement in regards to communication.

OBJECTIVES OF PROJECT:

Assess barriers to staff communication in the PACU. Identify areas of improvement and create a culture of safety by implementing solutions. Specific areas in need of improvement included: feedback and changes, information about errors and ways to prevent their reoccurrence, freedom to question decisions of those with more authority, and the ability to speak up when they see something that does not seem right or negatively affects patient care.

PROCESS OF IMPLEMENTATION:

Daily huddles were initiated to help improve communication in the PACU. Huddles, are led by the charge nurse and Patient Care Director, and encourage staff to participate in discussions regarding issues affecting the unit. The collaboration of staff from all levels creates an advantage since it enables safety issues affecting the PACU to be examined from different perspectives. Topics of discussion include staffing, census, clinical issues, broken equipment, great catches, Keep Safe, and patient centered care. Also, staff members are encouraged to read their emails frequently in order to stay current with significant updates. Lastly, a PACU Unit Report Card was created and displayed centrally on unit. The report card conveys information regarding department financials, quality performance indicators, patient centered care, and the "Making It Better" plan. All staff is familiar with the data, which is updated on a monthly basis.

STATEMENT OF SUCCESSFUL PRACTICE:

A follow-up survey indicated an over-all improvement in scores regarding communication. Specifically the dimensions of "ways to prevent errors from happening again" increased by 25%, and staff getting "feedback about changes put into place based on event reports" increased by 13.3%

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

Strategies implemented promote the national patient safety goals such as improving staff communication, identifying patient safety risks, and reducing errors.