IMPROVING THE PROCESS OF IDENTIFYING DEFECTIVE EQUIPMENT BY DURABLE LABELING SYSTEM IN THE POST ANESTHESIA CARE UNIT

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Background Information: Post Anesthesia Care Unit (PACU) nurses are responsible for initiating IVF/PCA/Epidural on patients in PACU; however, sometimes the pumps are not functioning properly. Upon evaluation of our current process, it was determined that there was not a standard procedure to identify defective equipment. The practice among nurses varied and most often when a pump was not working, a piece of tape was placed on the pump and marked as defective, broken, or not working. Identifying broken or defective equipment in this manner provides vague ambiguous information for the bio medical team repairing the equipment.

Objectives of Project:
- Evaluate barriers to labeling defective equipment
- Pilot a new labeling process and standardize process for defective equipment
- Educate staff members on identifying and documenting the problem of malfunctioned equipment on the label
- Increase nursing job satisfaction by reducing barriers to efficient patient care.

Process of Implementation: A nursing survey was given to 30 PACU nurses about the current process of labeling and identifying defective equipment. The results indicated 80% of nurses found defective equipment in their work area**,** 40% of the nurses were not aware of current labeling process nor the policy and procedure**,** and 32% of the nurses stated it affects their daily productivity. A pilot project was developed and supported by members of the following interdisciplinary teams: pharmacy, clinical engineering, BioMed, and Office of Performance Improvement.

Statement of Successful Practice: Collaboration with biomedical and nursing to develop a standard process for identifying and properly labeling defective equipment has decreased the number of defective equipment recirculated to the PACU. Post survey results indicated an increase from 32% to 80% of nurses who felt the new process of labeling and reporting defective equipment was effective in their practice. In addition, staff knowledge of the institutional policy of reporting defective equipment increased from 40% to 75%.

Implications for Advancing the Practice of Perianesthesia Nursing: The identification and removal of system barriers that obstruct PACU nurses in delivering efficient, timely nursing care using a collaborative approach has allowed more focus on patient care. This process has future implications for all defective equipment within any institution.