

IMPROVING THROUGHPUT OF JOINT AND SPINE PATIENTS FROM PHASE I: A RAPID IMPROVEMENT EVENT

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Background Information: Anne Arundel Medical Center is a 424-bed not-for-profit regional health system headquartered in Annapolis, Maryland. Our organization performs more joint replacements than any other hospital in Maryland, almost 2000 per year. Our 20-bed PACU recovers approximately 60 patients per day; joint replacements and spine surgeries account for 20-30% of our daily volume. Once a patient met Phase I discharge criteria, the average time to transfer that patient to the Joint/Spine Center (JSC) was 62 minutes. The process of transferring patients from PACU to the JSC is untimely, creating variability and delays in patient care. The delays created multiple issues: operating rooms placed on hold due to lack of recovery space, the inability of physical therapy to complete same-day evaluations, patient and family dissatisfaction, and PACU staff frustration.

Objectives of Project: To create a process to decrease the transfer time of patients from 62 minutes to 31 minutes from PACU to our Joint/Spine Center.

Process of Implementation: Using Lean methodology, during a one-week time frame, our team outlined our current state and future state, and identified gaps and barriers in our future state. The group developed over 23 potential solutions, the majority were high-impact and easy to implement. The JSC Charge Nurse received access to the PACU electronic status board, enabling her to see where patients were in the recovery process. PACU standardized its work to ensure all patients met Phase I criteria prior to bed assignments. Flexible staffing was implemented in JSC. We created standard work to maintain this process.

Statement of Successful Practice: Within 30 days of implementing changes to improve flow from PACU to the Joint/Spine Center, we demonstrated an average transfer time of 30 minutes from when the patient was ready to transfer to the patient being transferring to his/her inpatient bed. That is a 50% improvement in turn-around times. Additional improvements included fifty minutes of RN time gained on Joint/Spine and increased staff satisfaction in PACU.

Implications for Advancing the Practice of Perianesthesia Nursing: Other PACUs can take our strategies and implement them into their organizations. Implications for further research could be patient, nurse, and physician satisfaction, OR hold times, same-day PT evaluations and length of stay.