

ALARM MANAGEMENT IN THE PACU

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Identification of the problem – Overview: The Joint Commission identified alarm management as a national patient safety goal for 2015. While reviewing the literature there were no PACU specific studies found. The studies which were reviewed endorsed decreasing alarms for patient safety. Our PACU chose to focus on decreasing the duration of alarms, thus decreasing the amount of time an alarm was sounding.

Objectives: Alarms in the PACU are ignored or not heard. There are also a number of nuisance alarms with no nursing intervention required, however, these alarms account for the majority of alarms in the PACU. The purpose of this project was to identify the number and duration of alarms in PACU, discover if the alarms required nursing intervention, and implement a solution to decrease the duration of alarms in PACU.

Process of Implementation: Data was gathered on alarms in the PACU. This was accomplished by the investigator identifying and recording all alarms in the PACU for various 1 hour periods of time. The cause and duration of the alarm, as well as the nurse response were recorded.

A staff survey was conducted to discover what they observed in relation to alarms in PACU. They were also asked how frequent they felt alarms were. The survey results demonstrated nurses felt alarms were too frequent and ignored because they weren't necessary. As an intervention monitor alarm volumes were set to default at their highest level, making it more difficult to ignore an alarm.

Initial data found an average of 7 alarms per hour and average alarm duration of 11.5 minutes. It also showed 91% of the alarms didn't require nursing intervention. After alarm volume changes and staff education alarms not requiring nursing intervention dropped marginally to 90%. The average alarm duration significantly decreased to 2 minutes.

Statement of Successful Practice: Alarms in the PACU are frequent, but many times avoidable. By raising the awareness of alarms and making them harder to ignore, the duration of alarms was significantly decreased. We will continue to focus on alarms and attempt to decrease the actual number of alarms sounding in an hour.

Implications for Advancing the Practice of Perianesthesia Nursing: The duration and number of alarms can be decreased dramatically in the PACU. There were different methods we were unable to try due to equipment restriction. A formalized process for decreasing alarms in PACU is necessary.