DEVELOPMENT OF A UNIT BASED COMPETENCY PROGRAM TO EVALUATE AND ENGAGE THE ADULT LEARNER IN THE PACU

Team Leaders: Staci Eguia MSN RN CCRN, Cori Kopecky MSN RN OCN
The University of Texas at MD Anderson Cancer Center, Houston, Texas

Background Information: In a comprehensive and complex oncology hospital with 125 PACU nurses, annual competency can present many challenges. Annual competency requirements for nursing staff include: ASPAN competencies, institutional requirements, identification of high risk problematic concepts, safety reports, and staff development needs.

Objectives of Project: Competencies were determined based on needs in the following areas: evaluation of patient safety reports, institutional mandates, and nursing needs assessment. This project aimed to improve annual competency by introducing a new structure that would efficiently validate clinical nurses with a goal of 100% compliance.

Process of Implementation: Nurses were educated on the new competency concept and expectations prior to implementation of the process. Validation packets were created and nurses were identified to assist with competency validation. The different teaching modalities included train the trainer, teach back, case scenarios, and simulation stations. The goal was to rotate nurses in using a designated RN for coverage during validation sessions. Competency sessions were completed over the course of a 7 day period.

Statement of Successful Practice: An electronic survey and review of patient safety events were assessed to evaluate effectiveness of the competency process and knowledge of the nurses who attended the competency fair. The electronic survey was provided at 30, 60, and 90 day intervals post competency. In the initial 30 day post survey evaluation, 70-90% of nurses responded correctly based on content knowledge of chest tubes and epidurals. The 60 day post survey showed a decline in nursing knowledge specific to chest tube suction parameters with results ranging from 68%-100%. Additional teach back and education follow up was provided to nurses during frequent rounding and staff meetings. The 90 day post survey evaluation showed an overwhelming 100% in both areas of chest tube and epidural content. During the months of April 2015 through July 2015, there has not been a reported patient safety event related to chest tube and epidurals with patients in the PACU.

Implications for Advancing the Practice of Perianesthesia Nursing: The competency structured unit based validation model can promote professional development of clinical nursing staff, increase staff satisfaction and improve clinical competency in high acuity nursing care area.