IMPROVING THROUGHPUT AND PATIENT FLOW IN THE PACU
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Background Information: Patient flow and throughput is an essential piece of Post Anesthesia Care Unit (PACU) operations. Bedside nurses noted patterns in delays that varied in length and rationale which contributed to decreased throughput in PACU. This variability in delay highlighted the need for a formalized approach to understanding PACU bedflow delays.

Objective: To reduce patient transfer delays and increase patient flow in the PACU.

Process of Implementation: The PACU nursing unit council (UC) defined a "delay" as any reason for holding a patient in the PACU once recovery criteria was met. The UC identified common reasons for bedflow delay and created a method of measurement to capture and quantify delays. A delay key was designed to measure specific delays regularly encountered, i.e., floor nurse unable to take report, MD requests patient remain in PACU, etc.
Data was collected over two months to assess delays of patient transfer out of PACU. The data identified three common delays related to: floors delaying transfer (113 hours), physician related delays (36 hours), and bed assignment delays (34 hours).
The PACU UC identified the top three receiving floors that were delaying PACU transfers and collaborated to identify and implement solutions. PACU nurses were in serviced on a "Criteria Met Refresher" underscore consistent "PACU criteria met" expectations. All PACU nurses were given access to Teletracking so they could independently monitor their patient's bed status. PACU Nurses collaborated with physicians to create a "Resident Welcome Letter" outlining expectations for patient's PACU stay and meeting PACU Criteria. A monthly PACU Operations Council was then created by PACU nurses and physicians to monitor the PACU patient's delays and bedflow.

Statement of Successful Practice: Post intervention data showed a reduction in delays of PACU bedflow related to: floors delaying transfer (28 hours), physician related delays (9 hours), and bed assignment delays (23 hours).

Implications for Advancing the Practice of Perianesthesia Nursing: The PACU bedflow project supported the strategic initiatives of operational excellence. The bedflow project also enabled the PACU nurse to achieve more autonomy by setting guidelines and collaborating with physicians for decision making.