

BOARDING PASS: IMPROVING STAFF AND PATIENT ENGAGEMENT IN THE PRE-PROCEDURE VERIFICATION PROCESS

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Background Information: Preprocedure verification addresses potential safety concerns before any invasive or diagnostic procedure under anesthesia is performed on a patient. Evidence supports the use of a preprocedure checklist to improve communication among the healthcare team to ensure safety. From May 2014 to March 2015, 19.5% of pediatric surgical patients arrived to the holding area without the required elements leading to delays and dissatisfaction.

Objectives of Project:

1. To develop a standardized process for preprocedure verification that is initiated at the time the patient is scheduled for surgical or diagnostic procedure using a pediatric-specific checklist.
2. To improve staff and family engagement in the preprocedure verification process.

Process of Implementation: A Boarding Pass Team composed of nurses from the pre-op/holding area, pediatric floors, pediatric and neonatal ICUs was formed. The goals were to educate the nurses on the importance of each key element in the checklist, establish a standardized process of accurately completing the checklist prior to entering the OR, include Child Life Specialist evaluation to minimize patient and family anxiety, and include pediatric-specific information to the current checklist to communicate key information prior to any procedure. Education was done and a paper-form checklist was piloted and rolled out to the pediatric surgical units. Continuous PDSA cycles helped to refine the checklist. The electronic checklist was revised to include pediatric-specific information and the format was changed so multiple nurses working on the checklist within a 24-hour period were able to view, modify, and verify the information in a single document.

Statement of Successful Practice: Compliance with the preprocedure checklist by the bedside nurses from pediatric floors increased from 4% (Jan-May 2015) to 94% (July-December 2015). Incomplete checklists were reduced to 14.73% from March to May of 2016. Identified missing elements in those incomplete checklists (e.g. consents, site marking, and progress notes) were presented to surgeons and anesthesia partners for improvement. Child Life Specialists are actively involved in preparing the patient and the families for the procedure since consults are done within 24 hours.

Implications for Advancing the Practice of Perianesthesia Nursing: A standard preprocedure verification process assisted this team to drive compliance, improve patient safety and reduce delays. Data collected identified specific areas for improvement and enhanced involvement of stakeholders.