

COMMUNICATION HANDOFF TOOL IMPROVING PATIENT SAFETY AND PATIENT OR READINESS

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Background Information: Nurses in the pre-admission testing (PAT) and the surgical prep area (SPA) identified a problem with communication that affects patient safety and readiness for the operating room (OR). The current practice in our organization is for PAT to be the initial contact for the patient. The PAT nurses are then able to identify areas of concern which could impact the SPA admission process and result in OR delays or cancellations.

Objectives of Project: There was a lack of standardization that was identified when relaying information between the PAT and SPA nurses. The object of the project was to develop a concise communication tool that met the needs of both departments and would ensure patient safety. A well-developed standard operation procedure (SOP) would allow the SPA nurses to determine the appropriate plan of care for the patient on the day of surgery. All aspects of this project affect patient readiness for OR procedures.

Process of Implementation: A literature review was performed through Pub Med. Collaboration between the two shared governance teams led to the creation of a communication handoff tool. The shared governance teams of PAT and SPA emailed a sample tool to the nurses of both units with an explanation of the rationale and the planned implementation date. A joint shared governance meeting was held for feedback from the staff to evaluate the components of the original tool and to finalize any suggested changes. Once the tool was finalized, we determined a time line for staff education and roll out dates.

Statement of Successful Practice: The outcomes to date include; staff accountability, improve patient safety with clear and concise communication, create a standard of process, cultivate an environment of teamwork, and improve nurse satisfaction.

Implications for Advancing the Practice of Perianesthesia Nursing: A standardization of the communication tool improves patient outcomes and decreases errors.