VALUE OF USING PROJECT CHARTER TOOL FOR
PERFORMANCE IMPROVEMENT
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Background:
The Johns Hopkins Hospital has five levels of Clinical Ladder starting with Nurse Clinician I to Nurse Clinician IIII. Nurse Clinician IIE is one level below NCIII. Part of their expectations is to initiate unit-based Performance Improvement Project. Finding time to do other projects and balancing clinical and professional demands have been difficult. One of the Lean Kaizen tools is a Project Charter, which can keep a group focused on the area of interest.

Objectives:
The goal was to create a Performance Improvement Project for the NCIIE group using the Project Charter Tool. The objectives are to establish a common interest, educate the group and engage them in the process from the beginning to the end using the NM as a Team Leader with staff assisting them in data collection.

Process:
The group concern is the prolonged stay of PACU patients related to PONV. It was decided to use ASPAN’s PONV Guideline to assess current practice. The Project Charter tool was used to organize group’s direction on how to approach the project. Considering the time limitations of the group, the tool served as a framework.

Successful Practice:
The NCIIE were self directed and encouraged other staff to be involved. The PONV risk factors findings increased the awareness of staff. Staff has been observed to be more involved in the discussion of PONV management with providers as it relates to risk factors.

Implications:
Perianesthesia nurses need to incorporate ASPAN’s EBP Guideline into their assessment and engage in the discussion with anesthesia providers on how to better manage patient’s PONV. This NCIIE project provided opportunity to examine the current management of PONV in the PACU.

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