Bedside Handoff Report to Improve Communication:
PACU and Receiving Medical/Surgical Unit

Team Leader: Michele Popik BSN RN
Cleveland Clinic Marymount Hospital, Garfield Heights, Ohio
Team Members: Patricia Fritzsche BSN RN CAPA, Michele Hurless BSN RN

**Background Information:** In 2016, when a surgical patient met PACU discharge criteria and was ready for transport to the medical/surgical nursing unit, the PACU nurses provided handoff report via phone call to the receiving nurse. The PACU nurses spent time away from the bedside to wait for the receiving nurses to answer calls while the medical/surgical nursing staff experienced repeated interruptions. This resulted in delays in transport, conflicts among caregivers, and risks to patient safety.

**Objectives of Project:** The purpose of this project was to promote teambuilding and improve the patient experience while engaging patients and caregivers in the handoff communication process during the postoperative phase of care.

**Process of Implementation:** PACU and medical/surgical nurses utilized a handoff communication tool. Compliance is tracked and reported monthly in Performance Improvement Manager (PIM). Goal is greater than or equal to 90%.

**Statement of Successful Practice:** PACU nurses’ compliance with bedside handoff report has consistently achieved the target of 90% since implementation in 2017. PACU and medical/surgical nursing teams verbalize their satisfaction with this process and it has been fully integrated into their workflow as a best practice.

**Implications for Advancing the Practice of Perianesthesia Nursing:** The practice of bedside or face to face handoff report serves as method to improve patient and caregiver satisfaction while promoting patient safety with the postoperative patient. Communication between PACU and the medical/surgical unit has dramatically improved. PACU and medical/surgical nurses report enhanced professional relationships with their peers.