ENSURING PEDIATRIC COMPETENCY FOR ADULT PACU NURSES  
Primary Investigator: Brittany Elliott BSN RN  
Lyndon B. Johnson Hospital - Harris Health System, Houston, Texas  
Co-Investigators: Renee Russell MSN RN CNOR, Stephanie Rico BSN RN CNOR CST, Kathryn Boschen MSN RN

Introduction: Nurses should have good assessment skills; however, post-anesthesia care unit (PACU) nurses must be particularly diligent in monitoring patients and quick to respond in potentially life-threatening situations. Pediatric and adult patients obviously have different needs when recovering from anesthesia and surgical procedures.

Identification of the problem: The clinical resource nurse (CRN) conducted a needs assessment to determine educational priorities. With increasing numbers of pediatric patients, additional knowledge and skills were deemed essential.

QI question/Purpose of the Study: A team comprised of the CRN, direct-care nurses, and leaders created an evidence-based, quality improvement program to afford nurses the competencies to adequately care for pediatric patients.

Methods: A key imperative included pediatric advanced life support (PALS) certification. Logistics (e.g., fiscal needs; dedicated, protected time for class participation; staffing matrix so all nurses could pursue additional training) were discussed with the CNO. The program was modeled after the PALS curriculum and various educational pedagogies were incorporated (e.g., case studies, simulation, team building exercises). Novice and experienced nurses were paired to hardwire the skill sets.

Outcomes/Results: Over a 14 month period, our unit of 30 Registered nurses achieved a 0-100% increase in PALS certification.

Discussion: The didactic and preceptor-supported education has resulted in expressed perceptions of enhanced knowledge of pediatric care, given nurses (e.g., clinicians, leaders) a “voice” in patient safety strategies, and resulted in cohesive practice across multiple generations.

Conclusion: A number of PACU nurses requested additional training to care for pediatric and neonatal patients. Two nurse clinical managers supported quick implementation of the training. These initiatives strengthened bonds between novice and experienced nurses, enriched nurses’ skill sets, and enhanced the culture of child patient safety in the PACU setting.

Implications for peri-anesthesia nurses and future research: This model provides a roadmap for other peri-anesthesia nurses to evaluate, improve and influence the quality of care for pediatric patients.