PROMOTING SUCCESSFUL TRANSITIONS FROM PACU TO INPATIENT UNITS

Team Leaders: Stephanie Gingerich, RN, BSN, B-C, Sasha Sakurets, RN, BSN
University of Minnesota Medical Center and Masonic Children's Hospital, Minneapolis, MN
Team Member: Mary Briggs, RN, BAN, CAPA

BACKGROUND INFORMATION:

We sought to improve patient transition from our Children's PACU to the pediatric inpatient units to provide the best possible experience for our patients and their families.

OBJECTIVES OF PROJECT:

- Improve patient satisfaction by improving workflows from Children's PACU to Inpatient Units
- Improve staff satisfaction and collaboration between units

PROCESS OF IMPLEMENTATION:

- Used evidence-based "co-design" process to evaluate and redesign workflows
- Surveyed patients and families before and after interventions to obtain feedback regarding the transfer of care
- Surveyed Children's PACU and Inpatient RNs to obtain feedback regarding the flow of the transition of care between units
- "Change of Shift" Pilot
- Follow-up surveys to measure satisfaction by staff and patient/families

STATEMENT OF SUCCESSFUL PRACTICE:

- This grass-roots, staff nurse-led process improvement project led to greater satisfaction among pediatric patients and their families and the participating staff.
- This successful collaborative group continues to tackle new workflow issues.
- Unexpected outcome: an initiative to improve postoperative pain management
 - Delayed availability of pain meds on inpatient units was identified as a satisfaction impediment
 - Pharmacy intern collected data, measured delays, provided supporting evidence
 - Analysis of workflows: delays were related to release of orders in the electronic record and associated pharmacy workflow
 - Process changed to release pain med orders in PACU: new inpatient pharmacist process has meds available for administration on inpatient unit right after transfer from PACU
- Replicated this model with adult PACU transitions to inpatient units—established an adult transitions workflow collaborative

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:

The success of this collaborative project provided inspiration for the members to tackle additional workflow issues. The bonus effect was to roll out the pain management "successful practice" to adult PACU/inpatient units. The word has spread: our sister campus colleagues want to replicate this process in their adult PACU. The Perianesthesia Nurse Manager has lent ongoing FTE support for staff nurses as project leads, which has been elemental to this successful practice.