## IMPROVING CARE COORDINATION IN A NEW PACU: PUTTING THE PIECES TOGETHER

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**Background Information:** Care coordination is an integral part of professional practice through which nurses at every level can influence patient experience, quality of care, cost effectiveness, and patient outcomes (ANA, 2012). Care coordination in a newly opened Non OR Recovery unit in a major cancer institute presented a multifaceted challenge to the leadership team. Fundamentally, challenges occurred due to the uniqueness of the Non OR Recovery unit serving both pre and post anesthesia care to patients from five different departments.

**Objectives of Project:** Utilizing transformational leadership through effective communication, staff empowerment, mentoring, and change management to improve care coordination in the newly opened PACU.

**Process of Implementation:** A list of common issues that affected care coordination were identified by team members as: ineffective communication, accessibility of medical team, inconsistency in practice and nonstandard discharge planning.

- Enhanced interactive communication by standardizing hand off report, monthly unit and interdepartmental meeting, and daily rounding.
- Staff empowerment: unit based shared governance that provides autonomy to define, implement, evaluate, and maintain clinical practice at the unit level. Development of operational and clinical guidelines, escalation process to access medical and administrative support for the unit.
- Motivate and mentor: identify team leads to work with all stake holders to discuss and resolve issues. Create succession plan for leadership. Support and rewarded best practices with administrative leave or the cash reward system.
- Change management: Implemented and sustained QI projects to improve hand off process, medication reconciliation, RN communication on medication management, sepsis education on discharge, patient survey to monitor quality of care, and charge nurse leadership development classes.

**Statement of Successful Practice:** The progressive reduction in the number of incidents reported in safety intelligence indicated improved care coordination in Non-OR Recovery. Thirty incidents on care coordination were reported from January to June of 2014, which reduced to 15 reported incidents during from July to December and 12 from January to June 2015.

**Implications for Advancing the Practice of Perianesthesia Nursing:** Providing transformational leadership could potentially enable PACU nursing teams to function efficiently, provide safe, high quality and cost effective care, enhance care coordination, and improve patient satisfaction.