OR TO PACU HANDOFF: EFFICIENT AND SAFE TRANSFER OF CARE

Team Leader: Carolyn Benigno MSN RN CPN
Children's National Health System, Washington, DC
Team Members: Randall Burd MD PhD, Jennifer Fritzeen MSN RN PCNS-BC,
Victoria Alexander BSN RN CPN, Dianne Cochran BSN RN CPN,
Kristen Laheta BSN RN CPN, Teresa Roberts MD, Evonne Greenidge MD,
Haeok Chung MSN MHA RN, Aileen Pinola BSN RN CPN

Background Information: The OR to PACU handoff should always include patient history and surgery details. However, even in a Magnet®-designated facility, that process of providing key details and performing necessary clinical actions was not well organized. Missed information often led to delays in discharge to home, transfer to the in-patient unit, or delays in care or treatment.

Objectives of Project:

- To develop a systematic process for handoff of patients from OR to PACU that would include clinical actions and key details related to the patient and his/her surgery.
- To have OR nurses, anesthesiologists, surgeons, and PACU nurses fully participate in handoff.
- To create a visual handoff cue for every perioperative team member to use for every patient.

Process of Implementation: A perioperative process improvement committee with nurses, anesthesiologists, and surgeons met weekly to streamline the handoff process. The committee established: 1) the order in which individuals would provide handoff, 2) the flow of essential information, and 3) the identity of people to perform specific initial clinical actions when patients entered the PACU. Large-sized posters were created for each PACU bay for everyone's reference. They also created and shared a brief video that demonstrated 'inefficient' handoff and the new, improved efficient and safe handoff.

Statement of Successful Practice: Changing to a new "OR TO PACU HANDOFF" process was initially met with resistance by stakeholders; however, with time and practice, the new handoff has become habit. Nurses, surgeons, and anesthesiologists fully participate in handoff. This new standardized method of communication promotes efficient, safe transfer of care. It promotes favorable patient outcomes and patient-and-family satisfaction. A visual cue facilitates relaying of specific patient data and provides an opportunity to ask questions. Moreover, it is a communication tool that is simple to use when educating rotating residents or fellows as well as new nurses.

Implications for Advancing the Practice of Perianesthesia Nursing: Inter-professional teams can collaborate to drive improvements in handoff and accountability. A standardized workflow leads to patient safety and increased satisfaction.