## USE OR HOLDS TO YOUR ADVANTAGE! REQUEST MORE FTE'S BY BLENDING ASPAN PRACTICE RECOMMENDATION 1 PATIENT CLASSIFICATION/STAFFING RECOMMENDATION AND AORN POSITION STATEMENT ON PERIOPERATIVE SAFE STAFFING AND ON-CALL PRACTICES

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**Background Information:** Between October 2, 2013 and October 2, 2014, 448 patients were held in the OR due to the "P888" light which indicates PACU saturation. Insufficient numbers of adequately trained staff limited the ability to accept additional patients from the OR, in spite of open available PACU bays. Hold time in the OR equaled 16,133 minutes; at a cost of \$36.44 a minute, these delays added additional unnecessary cost to Surgical Services of \$587,886. Ramifications of this inefficiency included dissatisfaction for patients, physicians, staff, and families. There was also a negative impact on the interdisciplinary team; patients could not be efficiently moved to their inpatient destination. Nursing, pharmacy, dietary, laboratory, hospitalists and intensivists all were delayed in receiving surgical patients. Outpatients awaiting discharge home found themselves waiting in an OR.

## **Objectives of Project:**

- Significantly reduce "P888" light usage
- Develop a staffing formula that supported full PACU capacity
- Write a proposal to defend hiring FTE's
- Interview, hire and orient qualified staff

**Process of Implementation:** Utilizing ASPAN's Practice Recommendation 1 Patient Classification/Staffing Recommendations and AORN Position Statement on Perioperative Safe Staffing and On-Call Practices, leaders formulated a staffing plan that would match PACU bay staffing to peak OR times.

- Identify time of day, hours and number of PACU bays needed
- Determine how cases will arrive based on the OR schedule
- Staff one RN for two bays that includes a plan to care for any patient that requires 1:1 staffing
- Provide support staff for transport, lunches and breaks

**Statement of Successful Practice:** Upon successful implementation of the new staffing formula, an additional 15 RN FTE positions were approved and filled. From October 2, 2014 to present, the P888 light were not utilized.

Implications for Advancing the Practice of Perianesthesia Nursing: Using resources from ASPAN and AORN, perianesthesia nursing departments can develop and implement a successful staffing formula that will decrease expensive hold time in the OR. The downstream effect is positive for all members of the healthcare team, but most importantly increases the satisfaction of our patients and families who are no longer delayed going to surgery or awaiting admission to the PACU.