

“NO INTERRUPTION ZONE” IN AMBULATORY PROCEDURE UNIT TO REDUCE MEDICATION DISTRACTION AT THE PYXIS

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Background Information: Patient safety and quality of care for the postoperative surgical patient population in the Ambulatory Procedure Unit and the need to prepare medications in an uninterrupted environment is crucial in healthcare today.

Objectives of Project: By Q1 2016 decrease the number of medication discrepancies through the implementation of a No Interruption Zone (NIZ) to reduce distractions at the pyxis.

Process of Implementation: After discussing the increased number of medication discrepancies with the clinical staff at staff meetings and shared governance meetings, it was determined an intervention was necessary. Based on this feedback, an electronic seven-question survey was distributed to the preoperative and postoperative nurses in the Ambulatory Procedure Unit asking generalized questions regarding their perception of the causes of distractions while medication administration at the Pyxis. The survey results supported the need for a “No Interruption Zone” to decrease distractions during medication preparation. Through brainstorming with key stakeholders including the nurse manager and clinical staff, the evidence based Red tape was designed to create a NIZ. The intervention was reviewed with the clinical nurses for their buy in and support. A clinical nurse lead collaborated with the nurse manager to provide 1:1 mandatory education regarding the intervention and its rationale. The inter-professional staff including surgeons and anesthesia providers was informed of the change and the importance of adhering to the red tape.

Statement of Successful Practice: The elimination of interruptions and distractions cannot be eradicated but implement steps to improve and create a less hectic environment for the nurses’ while preparing medications. After the implementation of the NIZ, there was an 87% decrease in medication discrepancies at the pyxis compared to an average of the previous 4 months. In addition, the nurses were resurveyed post implementation which proved their satisfaction with the NIZ and their perception of fewer interruptions during medication preparation at the pyxis.

Implications for Advancing the Practice of Perianesthesia Nursing: In the Ambulatory Procedure setting, there is high volume and patient turnover with the need for many medications administered in a short time. The implementation of a NIZ results in nurse perception of fewer interruptions, and an improvement in pyxis discrepancies. By engaging frontline staff and having the support of leadership, this cost effective change can improve patient safety and staff satisfaction.