

DECREASING POST OPERATIVE LENGTH OF STAY THROUGH INCREASING EDUCATION AND AWARENESS

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Background Information: The post anesthesia care unit (PACU) is a transitional unit that monitors surgical patients for complications associated with general anesthesia and sedation. The Affordable Care Act has approved a shift from the pay-for-service model to Hospital value-based purchasing for Medicare and Medicaid patient reimbursement. Current estimates project reimbursement for 90 minutes of PACU time. Our unit baseline average phase one recovery was calculated to be 129 minutes. Our goal was to deliver superior value to the patient as well as increase the quality of the patient experience by decreasing length of stay (LOS).

Objectives of Project: The purpose was to decrease LOS by five minutes from our initial average through increased education and awareness while not increasing adverse patient events.

Process of Implementation: A patient's Phase I LOS concludes when the patient is recovered and the nurse transfers the patient to inpatient hold. Inpatient hold communicates that the patient is transferred to floor status but is waiting for a room. Inpatient hold justifies staffing but does not charge the patient unnecessarily for phase one recovery time. Increasing utilization of inpatient hold, when appropriate, can reduce Phase I LOS. Nurses were surveyed on perceived non-patient related factors affecting the patient's Phase I LOS. Top causes included: bed availability, waiting for admission orders, care handoff, and transport delays. Staff received education on initiatives to reduce LOS. This included PowerPoint presentation and five short continuing education articles on nursing interventions to improve patient recovery, with the goal to reduce LOS. An electronic report was developed to track individual LOS as well as view average LOS of each PACU facility across the health system. Individual lengths of stay were de-identified and displayed monthly for staff to review. The LOS task force reviews results monthly and further develops initiatives and identifies barriers to improving LOS.

Statement of Successful Practice: Since the implementation of the project, the average LOS in the PACU has been reduced from 129 to 86 minutes without an increase in adverse or untoward effects to patients.

Implications for Advancing the Practice of Perianesthesia Nursing: Through education and increased awareness among staff, LOS can be decreased and the patient receives superior value in care.