

30-SECOND PAUSE: AN EVIDENCE BASED PACU HANDOFF PROCESS

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Background: Due to the palpable dissatisfaction of our PACU (Post Anesthesia Care Unit) nurses with the existing handoff process between the OR nurse, anesthesiologist, and the PACU receiving nurse, the Perioperative Unit Based Council recommended identifying and implementing an effective evidence-based handoff process. The literature suggests that a pause upon arrival from the OR (Operating Room) into the PACU, before the handoff process begins, increases the PACU nurses' satisfaction with the SBAR (Situation, Background, Assessment, Recommendation) report.

Objectives of the Project: The purpose of this project was to implement a 30-second pause upon patient arrival into the PACU before the handoff process begins and to assess the effect of this process on PACU nurses' satisfaction.

Process of Implementation: Before the implementation of the 30-second pause project, PACU nurses' satisfaction with the handoff process (SBAR report) was measured using a 5-point Likert scale consisting of 5 questions derived from the literature. OR and PACU nurses as well as anesthesiologists were educated about the new handoff process. PACU nurses' satisfaction with randomly selected handoffs was assessed, using the aforementioned instrument, at 30, 60 and 90 days after the implementation of the project.

Statement of Successful Practice: PACU nurses' satisfaction increased from 35% strongly agree at baseline to 92% strongly agree at 90 days. PACU nurse signaled initiation of the verbal report in 16% of the cases at baseline and in 92% at 90 days. The 30-second pause occurred in 75%, 83% and 93% at 30, 60 and 90 days, respectively. At the 6-month point, the 30-second pause occurred in 100% of randomly selected handoffs that were audited using a peer review process.

Implications for Advancing the Practice of Perianesthesia Nursing: This simple, empowering 30-second pause process has improved PACU nurse satisfaction with the SBAR report. PACU nurses reported increased ability to concentrate on the content of the SBAR report which, in turn, can improve patient safety.