

BACKGROUND

- The global Covid-19 pandemic has required the rapid development and implementation of processes that support safety and quality of care
- Our satellite pediatric ambulatory surgical center consisted of four units: a preoperative unit (Preop), six operating rooms, a Post Anesthesia Care Unit (PACU), and an Inpatient Short Stay unit
- Preop and PACU nurses were cross-trained to cover both areas
- Inpatient nurses maintained a distinct skill set and were a standalone unit
- A flexible staffing model required the integration of Preop, PACU, and Inpatient nurses into one cohesive team

OBJECTIVES

- Development and implementation of changes to perioperative processes that support quality care and safety during Covid-19

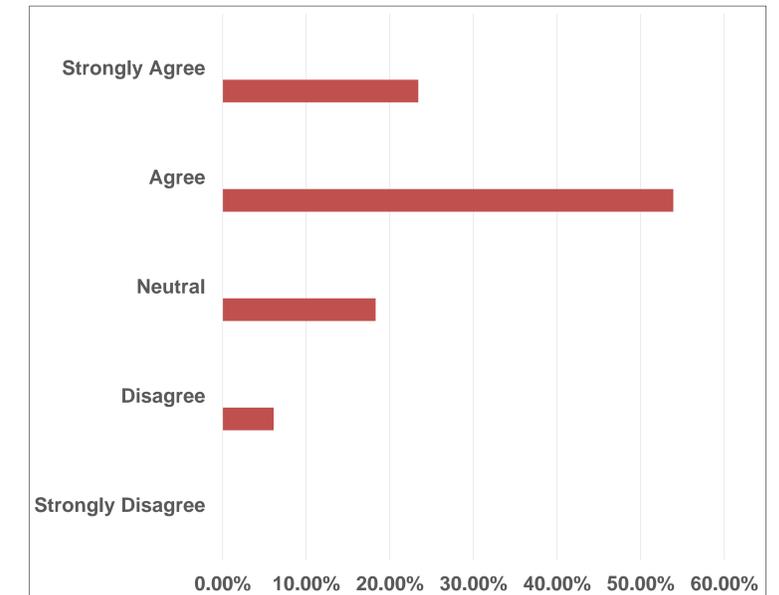
PROCESS OF IMPLEMENTATION

- Inpatient areas were converted to support the Preop care of patients/families and facilitate the adoption of COVID safety regulations
- Inpatient nurses were oriented to the Preop nurse role, Preop Covid test screening, and Visitor/Employee lobby screening. This cross-training educational program included in-services on Preop documentation and procedures and one to one orientation with a Preop nurse
- Presently, nurses may care for the same patient/families preoperatively and during their inpatient stay which promotes quality care and an improved surgical experience
- Changes to staffing models were evaluated through staff survey, analysis of Press Ganey patient satisfaction feedback and surgical throughput data

STATE OF SUCCESSFUL PRACTICE

- A majority (83.3%) of nurses agreed or strongly agreed that the new flexible staffing model promoted team cohesion and ensured safety and quality throughout the surgical experience
- Our integrated perianesthesia team cared for 1206 perioperative patients
- Press Ganey scores were overwhelmingly positive
- One family stated “Before surgery the nurse kept us calm, engaged, & informed. After surgery that nurse did the same thing & was also a great teacher & re: home care”

Flexible Staffing Model Promoted Team Cohesion



Changes to Perioperative Process Feedback Survey (n = 17)

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree	Strongly agree
The recent development and implementation of changes to the perioperative process	12% (n=2)	59% (n=10)	29% (n=5)	0% (n=0)	0% (n=0)	12% (n=2)
Changes in the Perioperative process have enhanced collaboration and team cohesion amongst staff in all areas	7% (n=1)	31% (n=5)	31% (n=5)	31% (n=5)	0% (n=0)	7% (n=1)
Flexible staffing models promote team cohesion and ensure safety and quality care	23% (n=4)	53% (n=9)	18% (n=4)	6% (n=1)	0% (n=0)	23% (n=4)

IMPLICATIONS

- As ambulatory surgical centers continue to adapt during the pandemic
- It is imperative that perianesthesia nurses design and implement flexible staffing models that promote team cohesion and ensure safety and quality during surgery