

UF Health Jacksonville Perioperative Services COVID-19 Reactive Care Model

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Background Information: Rise of the COVID-19 pandemic prompted an imperative need to design a reactive patient care model to protect perioperative staff caring for patients at a level one trauma center. The UF Health Jacksonville Perioperative COVID-19 Reactive Care Model (PRCM) was created after literature review based on team concepts, isolation practices, and communication strategies. The model is now the standard of care in perioperative services and has endorsed no positive staff conversion from exposure to COVID-19 known or unknown.

Objectives of Project: UF Health Jacksonville perioperative team created the model after extensive literature review on how to mitigate risk of exposure to caregivers while maintaining the highest standard of perioperative practice. Implications for practice include use of adult learning theory, didactic training, custom coded language and a reactive process which has translated to practice changes and established competency standards. The model implementation allows for nursing to practice in a reactive manner without direct orders from the provider.

Process of Implementation: A team of content experts developed the proprietary PRCM for UF Health Jacksonville. Didactic training emphasized viral pathophysiology, isolation principles, personal protective equipment, environmental controls and use of a custom common coded language to convey critical information. A model checklist, roles and responsibilities grid, and a smart phone application were used to ensure model compliance. The perioperative nursing leadership team has audited perioperative staff, given in the moment feedback, facilitated case debriefing, and surveyed pre and post knowledge acquisition from simulation and drill training scenarios.

Statement of Successful Practice: A minimum of 136 known COVID-19 + and 550 person under investigation (PUI) patients have been cared for utilizing the PRMC since April 15, 2020.

To date, no positive conversion from exposure has occurred to any perioperative staff including Registered Nurses (RNs), Surgical Technologists, Environmental Services Associates, Preoperative RNs and Post Anesthesia Care Unit (PACU) RNs since model implementation. The model subscribes to standard CDC recommended PPE for COVID-19+/PUI/AGP which includes: N95 mask, water impermeable gown, gloves (double glove if scrubbed in), face shield-goggles/ eye protection (personal eye glasses are not acceptable), head cover, and shoe covers.

Implications for Advancing the Practice of Perianesthesia Nursing: The PRCM along with the communication tools and operational strategies are reproducible for any perioperative setting. The PRCM has been replicated within the UF Health Jacksonville procedural areas including outpatient surgery, ophthalmology surgery, GI lab, interventional radiology and cardiology. The model is now fully implemented at UF Health Jacksonville where the risk of positive conversion from exposure to a COVID-19 patient for staff has been contained.