

Standardization of Nonverbal Report

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Background Information: Transfer of care of patients travelling from PACU to medical surgical floors can be inconsistent and frustrating to both sending and receiving parties. This transfer usually involves faxing a written report and/or calling the floor to give a verbal report to the receiving nurse. Nurses in the PACU complain of multiple attempts in contacting floor nurses to confirm proper handoff, spending valuable time away from the patients' bedsides. In turn, floor nurses state that report isn't always thorough.

Objectives of Project: The objective of this project is to standardize the handoff between PACU and ED to all eleven medical surgical floors. Since both units transfer patients to these floors, our goal was to develop a standardized *nonverbal* report that maximizes the quality of information given while minimizing time spent trying to pass information along.

Process of Implementation: Teaming up with representatives from all units involved, we worked to streamline a template that every nurse would use in our electronic medical record. All involved were educated on the expectations. The nonverbal portion of report relies on a series of texts, using hospital provided staff cellular phones. Once the report is reviewed, the sending nurse receives a text response from the receiving charge nurse. The amount of time between bed assigned to bed occupied was measured monthly.

Statement of Successful Practice: The national benchmark of bed assigned to bed occupied is 60 minutes. Before the start of this project, the average time for PACU was 85-94 minutes, using the two most utilized floors. Although we hadn't met the benchmark yet, the average time decreased 7-17% (71-87 minutes). There is some positive feedback from both sides, stating that "report is more thorough" and that "there's more accountability".

Implications for Advancing the Practice of Perianesthesia Nursing: As technology advances in healthcare, it is imperative that nursing keeps pace. By utilizing the electronic advances available, safe transfer of care can occur more expeditiously. This will enhance flow of patients to their target destination and increase the patient and nurse experience. PACU nurses feel they can use their time more judiciously in the hands-on care of their patients rather than spending long amounts of time, tethered to the telephone, away from the bedside.