

Managing PACU Workflow on the Integrated Procedural Platform (IPP)

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Background Information: From 1996 to 2018 there were 2 separate OR locations supported by 2 PACU locations. Each 15 bed PACU had unique staffing schedules, RN assignments, and patient flow patterns. Surgical procedures were specific to the OR locations with staff knowledge specialized in those patient populations. The new 44 bed PACU opening in the fall of 2018 required all staff to care for all patient populations.

Objectives of Project: Develop a new workflow that includes best practice from each PACU. Create a physical flow pattern and communication system that allows for smooth transition from OR/procedural rooms to the PACU. Develop education ensuring all staff are competent in caring for all patient populations. Include all staff in the change process by encouraging their input through surveys and unit representatives.

Process of Implementation: Staff were surveyed and encouraged to provide best practice from their home PACU. We created an IPP workflow team including nurses from both PACUs, the manager and educators. Over the eight months prior to opening the combined PACU we considered all aspects of workflow including staffing, RN assignment, patient arrival through two entrance points, and impact on OR/Procedural staff. The new workflow process was communicated via staff meetings and emails.

Statement of Successful Practice: PACU staff rotate through 5 PACU pods and 1 Pre-op pod. Impending PACU admissions are called to the charge RN who then pages the appropriate pod. Staff self-assign patients and support each other with cares, lunch relief and getting out of work on time, decreasing overtime to the unit. A charge nurse and unit clerk support all staff.

Reevaluation changes included an adjusted 8 week to 16 week schedule, thereby increasing staff satisfaction by allowing the opportunity to work with a wider variety of team members.

Implications for Advancing the Practice of Perianesthesia Nursing: We found that it is possible to bring two cultures of PACU nursing together by focusing on best practice from each unit. Staff input during the initial planning, implementation, evaluation and revision process was key to our success.