

## **Bridging the Communication Gaps from Preop to Phase II**

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**Background Information:** Lack of a standard process or tool to communicate patient information and parental concerns from Preop to PACU resulted in less than optimal care for a sometimes very complex patient population. Lack of a consistent process or tool for PACU resulted in incomplete handoffs from surgical and anesthesia colleagues. Lack of a standard process for handoff from PACU RN to Phase II RN also resulted in less complete movement of information with the potential to compromise care.

### **Objectives of Project:**

Develop a tool to

- improve communication of patient information from Preop to PACU
- provide prompts to obtain more complete PACU handoffs from surgery and anesthesia colleagues
- provide structure for RN to RN handoffs downstream from PACU

and therefore, improve parent and patient care and satisfaction, safety and efficiency.

**Process of Implementation:** Audit current process for passing information, surveyed staff pre and post implementation of tool regarding communication gaps and handoff challenges, developed a tool, trialed and reformatted the tool based on feedback from users and post-implementation audits of the new tool.

**Statement of Successful Practice:** The use of the tool has been well adopted by the staff and surveys indicate staff feel the quality of handoffs have improved with audits indicating good use of the tool to provide patient and parent information from the preop side and improved quality of handoffs on PACU arrival which flow down the line.

**Implications for Advancing the Practice of Perianesthesia Nursing:** In the age of electronic health records this easy to use tool captures targeted specific information and provides structure for handoffs from Preop to Phase II. Processes to improve communication have been shown to improve safety and efficiency.