

Implementation of Virtual Preoperative Evaluation During a Pandemic

Team Leader: Nickisha A. Hurlock MSN FNP-C

Brigham and Women's Faulkner Hospital, Boston, Massachusetts

Team Member: Pam Park APRN FNP-C

Background Information: Preadmission testing visits have historically been in-person and or via phone calls facilitated by nurse practitioners and registered nurses. Due to the pandemic, a change in process was required to address national and state social distancing recommendations. Project was conducted at a 171-bed community teaching hospital in the Northeast United States.

Objectives of Project: To implement a smooth transition from onsite preoperative evaluations via phone or in-person visit, to 100% virtual visit.

Process of Implementation: In October of 2020 the interdisciplinary leadership and Chief NP made the decision that all permanent RN staff would work from home and that all NP visits would become virtual. The Chief NP and Project Manager collaborated and created a Microsoft Teams account, revised paper resources, and uploaded them so that staff could access electronically. The Telecommunications team transferred existing telephone numbers and linked them with hospital provided laptops, head- sets and Jabber accounts for RN staff. They also provided cameras for the desktops utilized by the NPs. The Clinical Business Analysis team updated and created new appointment types to facilitate phone screens. The Chief NP updated the After Visit Summary which included, Covid screening, visitor restrictions and safe patient commitment. Education was provided to all staff regarding the change in process and available updated resources by the Chief NP and one staff NP.

Statement of Successful Practice: In November 2020 100% of all preoperative visits became remote or virtual. Staff are utilizing a messaging app for internal communication to communicate patient concerns, inquire with clinical questions, scheduling changes. Positive feedback from nursing staff regarding new process.

Implications for Advancing the Practice of Perianesthesia Nursing: High satisfaction and safety for patients and clinicians are the driving force behind these visits. To aid in addressing the long-standing concerns surrounding location and availability, telehealth provides greater flexibility to both patients and clinician while closing the service gap. Having local resources more broadly available via a common online resource, provides the clinician access to the most current clinical information while integrating care efforts that improve health outcomes.