Improving Care and Communication of Critical Care Patients in the PACU

Team Leaders: Mary Grzybinski DNP RN CPAN, Chrystal Maki BSN RN CPAN Beth Israel Deaconess Medical Center, Boston, Massachusetts Team Members: Emilia Berrena RN, Ceara Conley BSN RN, Ashleigh Dziedzic BSN RN, Julie Holland BSN RN, Brittany Leblanc BSN RN, Stacy Marta BSN RN, Colleen Mutrie BSN RN, Carol O'Connell BSN RN, Marisa Peskin BSN RN, Elizabeth Szatkowski BSN RN, Mari Yuskowski BSN RN

Background Information: BIDMC is a large academic medical center that has many types of documentation systems. This can make care coordination a challenge. PACU is still on a paper flowsheet until our new universal system is instituted. Critical care patients use a system called Metavision. While boarding patients who need an intensive level of care there was no way for a provider to track patients care and progress unless they came to PACU.

Objectives of Project: To allow universal documentation of critical patients even when they are boarding in a PACU awaiting an intensive care bed. This will allow physician a more comprehensive view of their patient's condition in real time. Coordination of care, sharing information with the right providers and streamlining workflow was the aim of this project. Reducing error and improving patient care, and provider communication was the goal.

Process of Implementation: The hospitals Information **S**ystems department partnered with the PACU to install the Metavision icon on our bedside laptop computers. The patient population who needed this form of documentation was identified as the ICU level patient and the Neuro Intermediate Care Unit patients. Both of these units currently use Metavision, so the transition of documentation from PACU to these units would be seamless. Online teaching was sent to all PACU nurses. Small group sessions were held with super users training the staff. Real time support was implemented in the first several weeks after the roll out.

Statement of Successful Practice: Over seventy nurses have been trained in successful documentation in Metavision for ICU and Neuro Intermediate Care patients. Continuity of care with a single form of documentation was implemented. Physician appreciation for real time information from any location in the medical center was evident. Interdisciplinary communication was enhanced and documentation was standardized. Improved patient care and safety was achieved.

Implications for Advancing the Practice of Perianesthesia Nursing: Sharing patient information for care decisions in real time across the medical center enhances positive patient outcomes. Improving communication and teambuilding are evident when everyone has access to the same patient information.