Optimizing Throughput by Increasing Nursing Education and Decreasing Length of Stay

Team Leader: Molly DeLong MSN RN CPAN
Team Members: Danielle Wineberg MSN RN, Jamie Raab BSN RN CPAN,
Amy Ulmer MSN RN, Rachael Tarczy MSN RN, Hannah Palmiscno MSN RN
UPMC Magee-Womens Hospital, Pittsburgh, PA

Abstract Background Information: Based on patient satisfaction scores and baseline data, PACU phase 1 times were longer than the national benchmark. Ineffective throughput has significant financial implications and decreased patient satisfaction scores related to early ambulation, pain control and seeing families sooner. This provided the opportunity to reevaluate the process of phase 1 care and create a length of stay (LOS) project without compromising quality and safety of care.

Objectives of Project: Our aim was to decrease Phase 1 LOS to increase OR throughput and utilization, decrease OR holds, increase patient satisfaction and outcomes, and maximize utilization of resources. Many of our patients have elective surgeries that are not truly elective due to the oncologic nature of their disease. We aimed to provide surgical intervention to more of these patients in a timelier manner through OR utilization.

Process of Implementation: Perianesthesia clinicians, director and educator met with charge RNs to discuss audits of LOS. It was determined there were no trends in longer LOS patients and broad education was needed. Education was provided to all RNs in the form of "back to basics" and deep diving into the WAKE score to move patients based on criteria rather than time frames. A discharge tool was created as a stoplight report for reference. Charge RNs became discharge champions, checking in with RNs whose patients were approaching 60 minutes in phase 1 to offer help if needed. Monthly updates were provided to the staff on the progress of the project.

Statement of Successful Practice: In the first 5 months, average LOS overall decreased from 100.5 average minutes to 90. Our highest Phase 1 LOS, hysterectomies, decreased from 151.8 average minutes to 113. Patients reported higher satisfaction with early ambulation and visiting with family. Fiscal productivity and OR utilization also increased.

Implications for Advancing the Practice of Perianesthesia Nursing: By safely decreasing LOS in phase 1, inefficiencies and complications were reduced. Phase 1 RNs play a critical role in optimizing throughput and capacity management. Providing RNs with continuing education and resources promotes teamwork and a shared responsibility of operational goals. Decreasing Phase 1 LOS can improve patient satisfaction and outcomes while affording the organization the opportunity to provide life changing surgical intervention to more patients.