



ASPAN

American Society of PeriAnesthesia Nurses

Clinical Practice: Frequently Asked Question

Q: Is there an acuity system that ASPAN recommends to help with daily staffing?

A: ASPAN does not endorse an acuity system but “rather staffing related to the critical elements, airway stability, complexity of the patient, skill mix and nursing competencies of the staff.” The PACU environment is constantly in flux with patients coming from the OR and being discharged from the area. The Laidlaw et al v Lions Gate Hospital case referred to the Phase I PACU as “the most important room in the hospital” because it “poses the greatest potential dangers to the patient”.³

ASPAN’s position on acuity-based staffing is discussed in the position statement: A Position Statement on Acuity-based Staffing for Phase I. Noted in the position statement is that an appropriate number of perianesthesia registered nurses with demonstrated competence is available to meet the individual needs of patients and families in each phase of perianesthesia care based on patient acuity, census, patient throughput, and physical facility. “Appropriate nurse staffing, with sufficient numbers of nurses, improves the health of the populations”.²

ASPAN does therefore endorse that the “staffing should reflect the complexity of the patients and their families according to the standards of care.”^{1,2,3}

References:

1. American Society of PeriAnesthesia Nurses. 2023-2024 perianesthesia nursing standards, practice recommendations and interpretive statements. Cherry Hill, NJ; ASPAN.
2. American Nursing Association. Principles for nurse staffing. Available at: <https://www.nursingworld.org/~4a51bc/globalassets/practiceandpolicy/nurse-staffing/staffing-principles-infographic.pdf>.
3. Laidlaw v Lions Gate Hospital, 1969 CanLII 704 BC SC. Available at <http://canlii.ca/t/gc72p>.

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