Increasing Recovery Room Utilization through a Merger of Ambulatory Surgery Units

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Background Information: Prior to January 2018, the hospital followed a traditional method for post-surgical recovery and experienced many Operating Room (OR) delays due to Recovery Room (RR). Patients were moved from the OR to the RR and then transferred to Day Surgery (DS) or Inpatient Unit. When RR reached capacity, the Registered Nurses (RNs) stopped accepting patients. With nowhere to transfer them, the OR was then forced to begin recovery care and not proceed with the next patient. Between July and December 2017, OR delays totaled 204 hours, an estimated cost to the organization of \$113,000.

Objectives of Project: Increase RR utilization and reduce OR delays.

Process of Implementation: DS and RR merged into one new unit "Peri-Anaesthesia Care Unit (PCU)". This eliminated physically moving patients between two care teams and locations. Utilizing a collaborative model, the Registered Practical Nurse (RPN) similar to the Licensed Practical Nurse, was integrated into the initial recovery of a patient in consultation with RNs. Revised Aldrete Scoring System was created to support transfer of patient care from RN to RPN. Furthermore, all former DS nurses completed a Post Anesthesia Care Certificate course, in-unit orientation and ongoing training.

Statement of Successful Practice: OR delays decreased by 82% in the first six months (est. cost savings of \$92,000) while reducing patient recovery time by 28% (from an average of 200 to 145 minutes). Staff and physicians satisfaction increased by 17%.

This initiative highlights the benefits of combining two separate but similar patient care units. The PCU has improved patient flow by employing a nursing practice that is more fluid. Through human resources optimization, financial benefits gained have been reinvested in patient care. The team continues to seek opportunities for improvement by soliciting patient feedback through post discharge calls.

Implications for Advancing the Practice of Perianesthesia Nursing: Colleges in Ontario offer the PCU Certificate course to RPNs and RNs. The hospital has taken the theory of the Integrated Practice Unit to the next level. This has been accomplished by embracing a new model of care which includes the RPN practicing to their full scope, in the PCU.