Perianesthesia Orientation Redesign Phase I: Standardizing Minimal Documentation Across the PACUs

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Introduction

Standardizing orientation reduces confusion, increasing nursing safe practice. Nursing documentation remains the single largest area where differences exist and errors occur. Along with errors, issues with learning documentation accounts for increases in orientation cost due to extensions. It also accounts for a decrease in orientation satisfaction resulting in orientee and preceptor frustration. When surveyed, orientees reported their documentation differed daily based on which preceptor they were with. At times the variations orientees had to learn due to preceptor preference, lead to orientees either being extended for several weeks or failing orientation. Standardizing the documentation practices of both existing and new hire nurses showed an improvement in orientation outcomes.

Objectives

• Develop a consistent standardized method of charting essential PACU data elements that reflected American Society of PeriAnesthesia Nursing (ASPAN) and the Joint Commission required documentation.
• Increase nurses’ satisfaction and efficiency of care.
• Design training for new and existing RNs to the same standards so all staff charts within per facility guidelines.
• Reduce issues with orientees’ learning clinical documentation requirements due to preceptor preferences.

Implementation

• Eight of the 11 PACUs at the East Baltimore Campus of The Johns Hopkins Hospital worked together via committee to design documentation guidelines based on goals aimed at improving compliance and decreasing confusion.
• Minimal documentation standards were designed and approved to be applicable to many different Prep and PACUs.
• Units identified one champion to manage unit superusers.
• In June, the superusers trained end-user groups. Nurses received classes on the standards then practiced in Epic play environment.
• New standards were piloted on nurses in orientation.
• Preceptors held their orientees to documentation guidelines.
• Audits were designed to track compliance of minimal documentation standards.
• Units were grouped based on their patient population. Each group contained two units (ambulatory, procedural only, surgical only & surgical/procedural mix).
• Baseline audits were performed from dates prior to onset of education.
• Unit champions and superusers performed the audits first on their assigned end-user groups to gauge effectiveness of training.
• By July 2021, the audit data began to be collected and disseminated bimonthly to superusers to give real time feedback to their end-user group members.
• By August, end-users started auditing their team members twice monthly to reinforce minimal documentation training.
• As survey numbers and compliance improved, end user audits were decreased to once per month.

Results

• Data showed an approximate increase from 87% to 98% compliance with ASPAN standards.
• Areas being missed differed from unit to unit. In some cases items missed were required but were not part of the unit’s routine.
• Data demonstrated a need for re-education in those areas to harmonize documentation across all PACUs.
• Areas for improvement were outpatient documentation, specialty assessments, and hospital required documentation (ex: belonging documentation), however some standard items were missed in Prep and in PACU Phase I.
• Orientees stated the review and bedside reminder pages were helpful in making documentation easier.
• Preceptors reported orientees demonstrated increased documentation competency.
• Removing duplication and standardizing the intervals, resulting in more time for patient care was the greatest benefit RNs reported.

Nursing Satisfaction Survey Results

Preop PACU Phase I PACU Phase II

Implication for Practice

In minimizing documentation, we systematically reduced issues with orientation and lowered stress on nurses keeping up with their workload and throughput. In maintaining a standardized documentation practice, we reduced confusion regarding what should be documented and when. This program sparked interest from other JHH Health System Prep/PACUs. The standardized design of this pilot can be readily used by other perianesthesia units to meet both ASPAN and Joint Commission requirements for Epic documentation.

References


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