Implementing a Discharge Readiness Process in the Post Anesthesia Care Unit (PACU): An Innovative Approach to Patient Throughput

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Background Information: System inefficiencies lead to long hold times for patients in PACU. Patients ready to progress to Phase II are held in PACU until rooms are available. After hours, patients are admitted to inpatient rooms for discharge.

Objectives of Project: A process was created to identify fast-track patients that could potentially discharge from PACU, improving throughput and decreasing unnecessary inpatient admissions.

Process of Implementation: Criteria were identified for potential fast-track patients who were then flagged the day prior to surgery. PACU RNs were trained in the discharge process and a standard work was created. Pre-data collected for five weeks revealed 100% of patients in PACU (n=330) held for Phase II for an average of 46.6 minutes, three patients discharged from PACU, and twelve patients were admitted to inpatient rooms for discharge. Post-data tracked for five weeks revealed 99% of patients held in PACU (n=717) and holding times decreased to 23.2 minutes. PACU discharges increased (n=41). Zero patients were admitted to inpatient rooms for discharge. Results led to discussions around throughput. Post-data was tracked for an additional five weeks. Data revealed a 10% decrease in patients being held (n=361) and a decrease of holding time to 17.2 minutes. Two patients were discharged from PACU and zero patients were admitted for discharge.

Statement of Successful Practice: We eliminated the process of admitting patients to inpatient rooms to be discharged after hours. Unfortunately, variable staffing levels, inconsistent surgical schedules and lack of appropriate patient population hindered the fast-track discharge process. Especially during busy times in PACU, discharging was not feasible.

Through implementation of this process, we identified system inefficiencies that could be modified to improve throughput. This had a greater impact overall. For example, working with surgeons to eliminate unnecessary orders to void prior to discharge, making sure the patient’s ride stays on site, dealing with pharmacy delays for prescriptions and eliminating unnecessary charting requirements did help improve throughput and decreased PACU holding times.

Implications for Advancing the Practice of PeriAnesthesia Nursing: PACU nurses play an important role in advancing their patients towards meeting discharge criteria. When feasible, discharging appropriate patients from PACU can help with throughput and discharging after hours is cost effective as well.