

# A Bird's Eye View of PACU Triage

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## Background Information

Our hospital census has been increasing to outstanding numbers, creating new challenges within the Perioperative Department. With the closure of several surrounding hospitals, merging of our outpatient surgical center, alternative care units (ACU) occupying post anesthesia care unit (PACU) spaces, increase of daily surgeries, and creation of an outpatient stay unit, our triage Clinical Nurse IV role was necessary to problem solve twenty-four hours a day. Our department has 6 specialty units, with 134 Preop/PACU bays, and 200 staff. A usual day averages 130 surgeries.

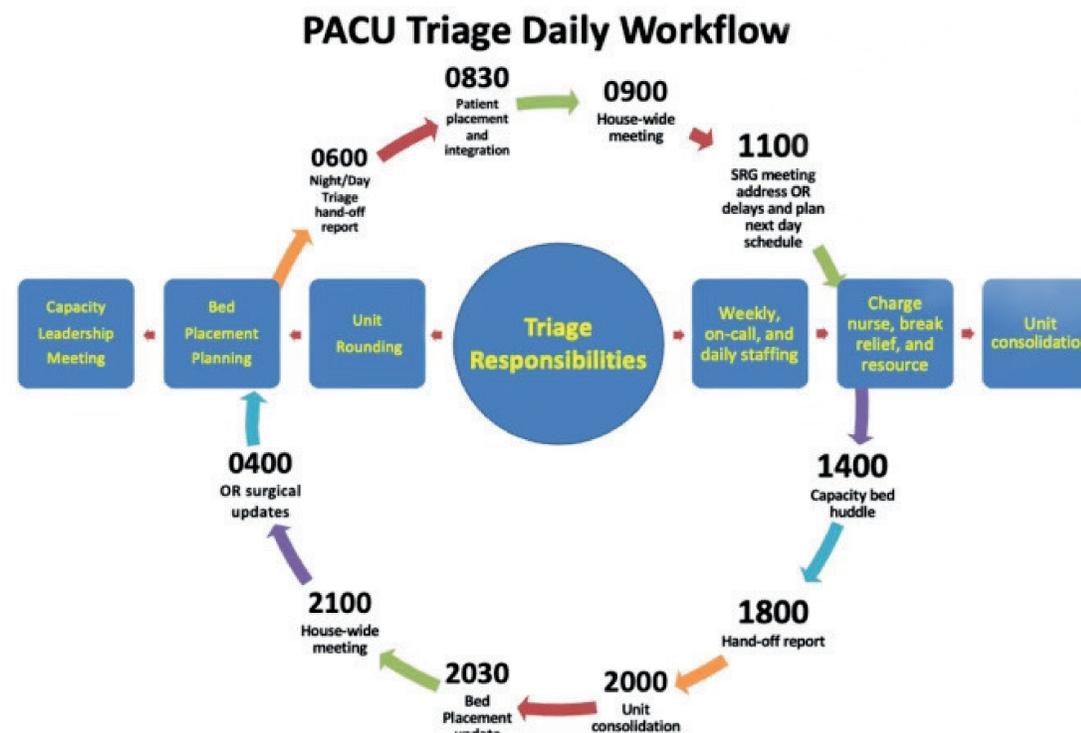
## Objectives

- To improve patient throughput, staff/patient satisfactions, OR holdings, and manage inpatient bed placement, evening PACU consolidation, and implementation of a PACU Core float team.

## Process of Implementation

Our leadership team realized the importance of having twenty-four-hour triage coverage which consists of multiple nurses in a hybrid role of leadership and clinical nurses. The responsibilities include:

- Patient integration and placement meetings
- Weekly/daily staffing
- House-wide bed huddles
- Charge nurse and break relief coverage
- First case on-time start delay reports
- Problem solving, conflict resolution, and service recovery
- Distribution and diversion of OR cases throughout the PACUs
- Evening PACU consolidation to one centralized PACU unit
- Creation of a PACU CORE team



### DAILY ROLE OF A PACU TRIAGE NURSE

#### 8:30AM Patient Integration and Bed Placement Meeting

Patient integration is a process of accounting for every surgical patient with their inpatient bed request for the day. Triage reviews the surgical list and assigns respective surgical units as appropriate, including ICUs. There are 5 surgical units to which respective leaders represent at the 0830 bed placement meeting. The surgical list and appropriateness of postop bed assignments are reviewed. In this meeting, availability of postop beds and number of discharges are discussed.

#### 9:00AM, 2:00PM, 9:00PM House-wide bed huddles

Led by the Capacity Command Center, a house-wide meeting is held virtually and is attended by Executive and Unit leadership. The purpose of the huddles is to communicate any important information and current hospital census, including anticipated admissions, discharges, transfers, need to expand/contract the use of Alternative Care Units, and barriers to care coordination.

#### Weekly/Daily Staffing

Weekly and daily staffing is evaluated, in collaboration with PACU Leadership, to ensure adequate staff for all six units. Triage manages adjusting staff's shift times and allocating staffing where needed. The PACU CORE staff are assigned accordingly, based on the needs of the units.

#### Assignment of the PACU CORE Team

After review of the weekly and daily schedules, PACU Triage assigns staff from the PACU CORE Team to fill the staffing gaps. In addition to the weekly planning, daily coordination and triaging of staff are needed throughout the day.

#### Charge Nurse and Break Relief Coverage

PACU Triage fulfills the role of a Charge Nurse on weekends and relieves the charge nurses for breaks wherever needed on a daily basis.

#### First Case-On Time Start Delay and Cancellation Reports

PACU Triage reviews and investigates any surgical cases that are delayed or cancelled for the day, and reports to the Surgical Readiness Group meeting daily. In collaboration with the OR Command Center, surgeons, anesthesia team, and nurses, Triage assists in improving workflow to increase productivity and efficiency.

#### Distribution and Diversion of OR Cases

After review, PACU triage distributes the OR cases throughout the PACUs as needed, to ensure appropriate use of space and staff. To prevent OR holds, Triage diverts the OR cases to PACUs that can accommodate admissions, considering the complexity and acuity of the patients. In addition to the OR cases, any anesthesia-guided procedures from Imaging, Cathlab, and Interventional Radiology also recover in the PACU.

#### Evening PACU Consolidation

Four PACU units consolidate to the 24/7 PACU unit in the evening. PACU Triage plans and coordinates the transition of patients and staff to ensure safe and appropriate patient care. Triage ensures timely closure of respective PACU units, consolidating staffing to reduce overtime.

#### Problem Solving, Conflict Resolution, and Service Recovery

In this leadership role, PACU Triage functions to address any issues that arise in the units. They serve as the advocates for staff and patients to resolve any conflicts and handle any complaints that arise.

## Statement of Successful Practice

The role of triage coverage ensures adequate staffing for safe patient care. OR holding has decreased by diverting cases to other PACU units. House-wide bed meetings ensure proper patient placement to decompress the PACUs. Implementation of the PACU Core group helps fill staffing gaps. By coordinating and combining all resources and staff to our 24-hour unit, evening consolidation and staggered shift times increase staff satisfaction, allowing patients to continue to receive timely appropriate care and staff to end their shift on-time.

## Implications for Advancing the Practice of PeriAnesthesia Nursing

PACU triage is responsible for daily operational flow within the Perioperative department, ensuring safe and smooth transition of patient care delivery from pre, intra, and post operative phase to discharge or the appropriate inpatient unit. The role of PACU triage can help strengthen institutions that are seeking expansion within their Perioperative Department. They are integral in the management and transition of patients and staff, enhancing efficient and safe quality patient care.



**Triage team:** Maria Angelica Claveria, Christine Cajigal, Olivia Tanada, and George Halab

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