

PATIENT ENGAGEMENT DRIVES REGIONAL BLOCK EDUCATION AND OUTCOMES

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Introduction: Andrews Institute has performed nearly 30,000 regional blocks since opening in 2007. Our mission statement “to improve patient care through research and education” set the foundation for our perioperative team to study ways in which to improve patient education.

Identification of the problem: Autumn 2015, 30 Regional Block Pain Pump patients were contacted, 10% (3/30) were not satisfied with their education, post-op pain level/return of normal sensation and responsiveness of our team. Patient education at that time included one-on-one verbal presentation with written instructions and one follow-up phone call.

QI question/Purpose of the Study: To seek patient engagement related to improvements (education, responsiveness, pain score and follow-up communication) made to our Regional Block Program.

Methods: Patient education was modified to include: video instructions followed by one-on-one, hands-on and printed instruction sheets. Patient feedback was obtained and recorded daily following discharge until pain catheters were removed/normal sensation returned to the extremity. Post-operative Phone Record was modified to ensure capturing of expanded data, consistent and consecutive questioning. Excel Spreadsheet/Graph(s) were utilized to measure the data patients provided. Patient feedback was analyzed, used by staff to brainstorm and drive corrective actions.

Outcomes/Results: Discussion: 964 patients were contacted 3.09 (average) times or until normal sensation returned during the 12-month study. 931/964 patients rated their education a 10/10. 44 patients directly contacted our anesthesia team, 97.72% were 100% pleased with the center responsiveness. 789/964 (81.85%) reported experiencing no pain. The remaining 175 patients reported pain score of 1.64/10 (average) and took 1.42 pain pills/day (average) during their first week post-op.

Conclusion: Perioperative staff efforts and improved patient engagement resulted in 9.92/10 (99.2% - average) Quality of Teaching (12-month rating). Patient feedback resulted in the development of instructional pain management/catheter videos, revision of patient discharge instructions, improved communication related to increase in follow up phone calls, also improved data collection indicating the overall effectiveness of our regional block program. In addition, the feedback laid the foundation for other programs.

Implications for perianesthesia nurses and future research: A robust Regional Block Program with dedicated Perianesthesia RN's ensure that patients educational and follow-up needs are met using collaboration between departments (Anesthesia, Pre-Post, QI).