Quality Improvement Pilot in the Same Day Surgical Center: Improving Patient Safety and Nurse Satisfaction Utilizing Patient Care Zones Primary Investigators: Lisa Englerth BSN RN CAPA, Sandra Price MS RN CAPA, Colleen D'Angelo BSN RN CAPA, Margaret Zotter MSBA RN CAPA University of Rochester Medical Center's Same Day Surgical Center, Rochester, New York

Introduction: The flow of patients in a fast-paced, high volume, and high acuity area can lead to decreased nurse engagement and satisfaction, along with an increased concern for patient safety.

Identification of the Problem: A larger geographical footprint can lead to difficulty in visualizing and caring for patients, causing significant concerns for nursing staff disengagement and decreased satisfaction. The potential for adverse events is greater when nurse's (RN's) proximity to their patients increases.

Purpose of the Study: The purpose of this nurse driven quality improvement (QI) study was to identify the barriers of a larger geographical footprint and to improve the nursing satisfaction with staff input on nursing assignments, workflow, and zoning the unit for PreAn and Phase II level care.

Methods: A paper survey utilizing a 5-point Likert scale, from strongly agree to strongly disagree, was administered to gain knowledge on the nurse's perception of working in a large geographical area. RN's with interest in finding solutions were identified and provided suggestions at taskforce brainstorming sessions to improve buy-in with leadership. A reevaluation survey of the pilot change will be conducted monthly post-implementation to obtain feedback.

Outcomes/Results: Survey respondents (n=27/33 or 82% response rate), 17 (63%) rated neutral to disagree with their satisfaction of the current process and flow. All (100%) of the respondents rated strongly agree or agree that better flow promotes patient safety and proximity to the patient as a nurse satisfier.

Discussion: Utilizing a multidisciplinary approach, a large geographical area was divided into smaller "care zones", with nurses assigned to a specific area of 6-7 rooms versus the entire 20 bed unit. Color-coded care zones allowed for equitable teams, accountability, and efficiency being in close proximity to patients.

Conclusions: Improving patient assignments and workflow enhanced nurse satisfaction and patient safety by geographically positioning nurses closer in proximity to their patients. A color-coded zoning model allowed nurses to visualize their assigned area and patients more effectively.

Implications for Perianesthesia Nurses and Future Research: Improving nurse engagement in this QI study led to better patient flow, safety, and nurse satisfaction that may ultimately improve recruitment, and retention of nurses.