Implementation of an ICU Style Rounding Tool in the PACU: an Evidence Based Practice Initiative

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Introduction: ICU boarders are considered those patients that stay in the PACU due a lack of inpatient beds. Excessive boarders in the PACU lead to congestion and extended length of stay subsequently delaying care. Boarder patients may have slower progression of care due to informal rounding processes.

Identification of the Problem: The PACU does not have a formal surgical team rounding process in place. This lack of a formal process leads to delay in patient goals being met, which in turn increases the length of stay in the PACU.

EBP Question/Purpose: Does using a Formal ICU rounding tool in the PACU on ICU borders reduce the time spent bordering in the PACU?

Methods/Evidence: Literature review of rounding tools suggested usage increases safety, advancement of patient progress, as well as improved communication between services caring for patients. A Rounding tool was developed after meeting with stakeholders and end users for the General PACU. This rounding tool was used daily by nurses on every ICU patient boarding in the PACU. This was done to influence patient care with the goal of decreasing length of stay.

Significance of Findings/Outcomes: Using EPIC's Slicer Dicer, we measured length of stay for PACU boarders for six weeks prior to and during implementation. Success was measured in the ability to move patients to less days spent as a boarder in the General PACU. During implementation, we were able to move 3 patients from needing 2 days in the PACU to only needing one day. Satisfaction with the process was evaluated using Likert scale formatting. Nurses surveyed stated the rounding tool was "easy to use", "comprehensive" and "flows well with systems". Most staff found it "user friendly and simple to use."

Implications for perianesthesia nurses and future research: Continued edits and improvements to the rounding tool based on end user feedback have been made. Having a formal process for communication and safety streamlined workflow and progresses patient care. Overall, in a short amount of time we were able to make a large financial impact by helping improve the patient flow in the PACU and increase capture cost by facility.