Strategies to Improve Post-procedural Safe Patient Handoffs

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Problem/Impact: As a result of changing criteria and lack of appropriate communication between staff; timing, patient flow and patient/RN satisfaction may suffer. Furthermore, with the addition of a new bed management department (One Call Central), RN → RN verbal communication has been taken away during handoff, reducing the ability of each unit to understand the full impact of current situation and a reduction in RN satisfaction. This leads to the units not being able to leverage positive relationships for the ultimate goal of safe patient centered movement in a timely manner.

Scope: In Scope: All process steps from when a patient clears phase 1 criteria until they arrive safely in Ambulatory Surgery Recovery (ASU) or Short Stay Unit (SSU)
Out of Scope: Volume of patients, number of beds, bed designations, direct admits to SSU and space challenges

Goals/Objects:
1. To improve the PACU/SSU score for “Things fall between the cracks when transferring patients from one unit to another” question on Culture of Patient Safety Survey from 36% to 47% by end of FY18
2. Increase PACU/SSU score for “Problems often occur in the exchange of information across hospital units” question on Culture of Patient Safety Survey from 36% to 47% by end of FY18
3. To sustain improvements with at least 5 joint KPIs between PACU, ASU, RADCU, SSU, ADV. ENDO and One Call Central

Baseline Metrics/Current State:
Time from PACU RTM → Pt. occupies bed on SSU is currently 78 minutes
Time from room assignment → Pt. occupies bed on SSU is currently 42 minutes

Root Cause Analysis:

Countermeasures:

<table>
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<th>Action</th>
<th>Owner</th>
<th>Completion Date</th>
<th>Status</th>
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<td>Scope: Initial project meeting with Leadership to determine scope and overall goals of the initiative</td>
<td>Gail Chop, Peggy Anderson, Janice Nichols and Stephen Tyzik</td>
<td>6/27/18</td>
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<td>Scope: Integrate PACU/SSU/ASU/RADCU/ADV. ENDO to ensure alignment of SSU, RADCU, ASU and PACU</td>
<td>Gail Chop, Peggy Anderson, Janice Nichols and Stephen Tyzik</td>
<td>10/1/18</td>
<td>Complete</td>
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<td>Scope: Joint project methodology</td>
<td>Gail Chop, Peggy Anderson, Janice Nichols and Stephen Tyzik</td>
<td>8/1/18</td>
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<td>Scope: Joint project methodology</td>
<td>Gail Chop, Peggy Anderson, Janice Nichols and Stephen Tyzik</td>
<td>10/1/18</td>
<td>Complete</td>
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Outcomes:

PACU/Short Stay Safe Handoffs & Transitions Pulse Survey

Things fall between the cracks when transferring patients between these units
Problems occur in exchange of info between hosp units
There is good cooperation between these units
These units work well together to provide the best care for patients

It is often pleasant to work with staff from these units

AHRQ benchmark PACU/SSU baseline PACU/SSU pulse survey

Next Steps:
1. Utilizing ED/R2/P3CD staff to help coach and educate the staff in SSU/PACU/RADCU/ADV. ENDO to their experience with this process, lessons learned and outcome measures
2. Hardwire ideal state target mapping utilizing multiple waves of joint KPIs (2-3 departments with same KPI)
3. Utilize PACU/PACU/RADCU/ADV. ENDO staff to serve as Champions of this work and help coaching other teams on joint KPI development and implementation