Perioperative Handover – Talking to each other (better)!
An I-CAN project.
Dr. Deepi Vissa, DNB
Department of Anesthesia and Perioperative Medicine
Western University, London, Ontario, Canada

Introduction & Background

- Leading a project involving stakeholders at 3 tertiary care hospitals can be overwhelming. Leadership and Organizing for Change has immensely helped me understand the concepts of leading a team towards a common goal.
- Urgent challenge: Wide individual performance variability in communication during the handover process between the operating rooms and the post anesthetic recovery room (PACU).
- Sharing similar personal stories helped to build relationships among stakeholders that promoted commitment towards a shared goal.

Outcomes

- Baseline data collection was completed after organizing one-to-one meetings with team leaders and group meetings with PACU nurses.
- The baseline results were presented to anesthesiologists and PACU staff to encourage them to commit to change.
- Empowered frontline clinicians to promote interdisciplinary changes to improve care
- Represented an opportunity for frontline clinical staff to address an area of shared inconsistent performance (interdisciplinary communication) across three hospitals.

Team

- Anesthesiologists, PACU nurses, PACU nurse educators, Anesthesia site chiefs, OR managers and Surgeons
- Individual team leaders for each hospital were selected after conducting one-to-one meetings. Perioperative Nurse Educators addressed nursing professional practice and led the respective PACU nursing teams at each hospital.
- Anesthesia chiefs at the three hospitals were committed to the project.

Organizing Sentence

The project involved organizing Anesthesiologists and Post Anesthesia Care Unit (PACU) nurses to use established tools/strategies – SBAR (Situation–Background-Assessment-Recommendation) to improve perioperative communication during handovers between the operating rooms and the PACU at 3 hospital sites in 1 year.

Map of Actors and Assets

Supporters: Hospital Accreditation team, Hospital administration, OR managers & I-CAN team
Values: Support best practice
Interests: Improvement in communication leading to best practice in the field.
Assets: Guidance on hospital policies and authority

Competition: Perioperative Handover 1
Values: Patient safety
Interests: Improving crisis management in PACU
Assets: Data collection and simulation

Opposition – Few anesthesiologists and PACU nurses
Values: Belief that current process does not need change
Interests: To continue current behavior
Assets: Ability to influence others

Strategy and Tactics

- We intended to increase awareness of the SBAR (Situation background Assessment Recommendation) tool for perioperative handover to improve the communication between Anesthesiologists and Post Anesthesia Care Unit (PACU) nurses in 3 hospital sites simultaneously
- I have conducted one-to-one meetings with PACU nurse educators in all the 3 hospitals.
- Led team meetings involving PACU nursing staff in all the three hospitals.
- Conducted an interdepartmental grand rounds to describe the project and seek collective action and commitment from all stakeholders.

Key Learnings

- Having a similar personal narrative helped in building a team.
- One-to-one meetings immensely helped for building relationships with Nurse educators to gain mutual commitment.
- Drawing an asset map made it easy to concentrate the efforts necessary to engage all stakeholders to develop strategies for collective action.
- Creating a snowflake diagram made it extremely convenient to understand individual roles which helped to mobilize resources.

Measures

- We are measuring completeness of content of handover using SBAR communication tool in perioperative medicine.

SITATION
Introduction of self and patient

BACKGROUND
Preoperative details

ASSESSMENT
Perioperative events including vital signs, airway problems, labs, etc.

RECOMMENDATION
Anticipated problems
Action to take in an emergency

Data

- Challenges: Cultural inertia and pressures to minimize turnover time
- To engage and gain commitment from all stakeholders by demonstrating improvement.
- To tackle one aspect of the process at a time in series of PDSA cycles

Contact Us

- Deepi Vissa dvissa@uwo.ca
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- Thank you!