LEADing Pediatric Surgical Nursing Care



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Purpose

The LEAD (Liaison for Extra Admissions and Discharges) initiative was created to facilitate care of the pediatric surgical/trauma patient across all nursing units at The Children's Hospital of Philadelphia.

Significance

During high volume, surgical/trauma inpatients often exceed capacity resulting in overflow to non-surgical units. During Nov '07 – May '08, approximately 52 patients were diverted to six different non-surgical units. This high number of diverted patients could lead to a gap in specialized care. Therefore, the LEAD initiative was created to facilitate that an experienced surgical RN serve as a liaison to optimize care for the surgical patient admitted to a non-surgical unit. Due to the initial success, the initiative was continued for the 2009 and 2010 high volume periods.

Strategy & Implementation

Initial Time Line = 6 months in development and 3 months of implementation

Development process included: Collection of data, meetings with bed management and medical unit managers, education of staff on new role & responsibilities, data collection tools, and scheduling of LEAD RN

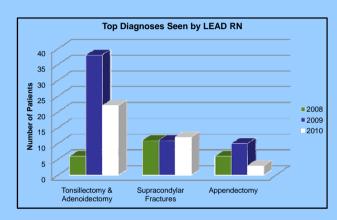
Daily LEAD RN Responsibilities

- Attend bed meeting and obtain list of overflow patients
- ❖Round on non-surgical units
 - Review surgical dx & nsg care
 Review discharge process
 - Review Surgical dx & ris
 Review MD/NP orders
- Patient & Family Education
- Review pain mgmt plan
- Assist with direct surgical care
- *Available by pager for status changes and RN questions/concerns
- ❖Data collection

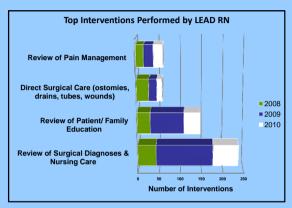
Non-Surgical RN Education

- Shared Governance Council developed educational presentations
 - Post Operative Care highlighting frequent diagnoses
 - Orthopedic Care
 - Tonsillectomy and Adenoidectomy
- ❖Presented to 4 non-surgical units
- Available throughout the year as requested

Results



	2008	2009	2010
Total LEAD/RN Interactions	140	221	101
Total # Overflow Patients	71	158	83
Total # Surgical Services	6	6	6



Evaluation

- Regardless of patient location, the LEAD initiative enhanced surgical patient/family care by assisting and resourcing the non-surgical RN
- As a result of the initiative, the LEAD RN became viewed as an expert and was consulted to assist with non-surgical patients requiring surgical nursing care
- * 100% of non-surgical unit RNs reported that the LEAD initiative was beneficial to patients, families, and staff and that educational presentations provided useful information

Implications for Nursing Practice

- During all surgical high volume periods, the LEAD RN will be available to resource and assist with surgical nursing care on non-surgical units
- The LEAD initiative now also incorporates year-round clinical resourcing for new surgical RNs on the surgical unit
- * As part of the evolving LEAD initiative we plan to:
 - •Continue to collaborate with bed management department to cohort surgical overflow patients
 - •Develop a Surgical Nursing conference for non-surgical nurses
 - Evaluate safety events, length of stay, and patient/family satisfaction for diverted surgical patients