Utilizing Perioperative Services to Creatively Solve Hospital Capacity Constraints
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BACKGROUND
- In 2012, there were approximately 35,112 adult surgeries performed at Vanderbilt University Medical Center (VUMC).
- Approximately 400 potential surgeries turned away annually
- Local/regional referring physicians were frustrated by the difficulty of getting patients access to our tertiary care system

Solution
Increase bed capacity for patients coming from outside referrals.
1.) Improve access to surgical specialties
2.) Create a surgical transition unit (STU)

STU
6 pre-operative beds converted into inpatient beds

OBJECTIVE
- Increase annual surgical volume
- Optimize the use of perioperative space

IMPLEMENTATION
STU opened in March 2011

STEP 1: STU was created using 6 pre-operative beds
- 6 pre-operative beds, in close proximately, were identified to create the STU
- Vision
- Staff buy-in

STEP 2: Hired nurse practitioner to accept and manage patients
- Hire acute care nurse practitioner to accept and manage patients

STEP 3: Collaborative implementation team formed
- The team developed and orchestrated the action plan for implementation.
  - Collaborative team:
    - Medical Director
    - Acute Care Nurse Practitioner
    - Staff
    - Ancillary services: Pharmacy, Linens, Nutrition, Guest Services
  - Resources:
    - Supplies
    - Documentation / IT
  - Action items:
    - Medication requirements
    - Scope of service
    - Communication map
    - Acuity guidelines
    - Hours of operation

STEP 4: Open Surgical Transition Unit
- Collaborative implementation team formed
- Resources:
  - Supplies
  - Documentation / IT
- Action items:
  - Medication requirements
  - Scope of service
  - Communication map
  - Acuity guidelines
  - Hours of operation

STEP 5: Evaluate

EVALUATION
Successes
- Increase in referring surgical volume within the first 6 months
- Within first 6 months, 25% of referrals become surgical cases
- Reduced capacity restraints within the emergency department and inpatient areas
- Doubled size of STU after first 6 months

Challenges
- Decreased number of pre-operative beds
- Inpatient area within a procedural area
- Two separate documentation systems
- Providing family-centered care

BENEFITS of STU
- STU improved flexibility by working through a rapid cycle improvement process
- Creation of STU expanded role of advanced practice nurses in perioperative services