

everyone was given two questions a week to answer. We continued to keep score but found it difficult to maintain a weekly schedule of games. We have since moved on to weekly questions emailed to the whole unit. Staff responds individually and correct answers with rationale are given out the next week. Weekly drawings are held to acknowledge the high scores.

Statement of Successful Practice: Staff is more confident and has shown more interest in taking the CPAN/CAPA exams. Three of the 16 staff have successfully completed the exam and several others have committed to taking Fall 2019.

Implications for Advancing the Practice of Perianesthesia Nursing: Provides the nursing staff an educational format that encourages participation and inspires staff to become CPAN/CAPA certified.

COLLABORATION AND SUCCESS: ONE TEAM MOVING FORWARD



Team Leader: Michelle Johann, BSN RN PHN
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Team Members: Peter Hirsch, BSN RN CNOR, Ida Antonio, MSN RN PHN CNOR CSSM NEA-BC, Kerry Caldwell, MBA BSN RN CNOR

Background Information: The recruitment of Oncology trained perianesthesia nurses can be an extremely difficult task to achieve. As our patient census continues to grow, the need to meet the high acuity recovery demands with minimal staff continues to be overwhelming for our comprehensive cancer center. Through collaboration with department leadership and the clinical educators, the resolution was clear, a perianesthesia nurse cohort must be developed. The idea was to envelop and develop nurses to gain oncology and recovery knowledge in order to perform independently at the highest acuity level in an oncology perianesthesia unit.

Objectives of Project: The object was to create a sustainable and thriving perianesthesia nurse cohort comprised of cohesive members. The training program would support the nurse cohort by including a critical care training course and a comprehensive didactics curriculum, clinical preceptorship, coupled with a weekly, monthly and semi-annual post conference follow up.

Process of Implementation: Trainees were rigorously validated on their communication skills, clinical skills and critical care aptitude during the interview process which included a panel interview, hands on practicum and a written exam. This innovative approach allowed the team to view the candidates in a scientific forum, supporting diverse perspectives by engaging the stakeholders.

Statement of Successful Practice: The successful practice is reflected in the longevity of the perianesthesia nurse cohort, now celebrating their thirtieth month anniversary. All six members of the original perianesthesia cohort continue to be nurse leaders within both inpatient and outpatient recovery care areas. They continue to thrive among a high acuity patient population with a high level of compassion, integrity, intellectual

curiosity, excellence and service with a sense of urgency all of which encompass our mission and values (City of Hope Values, 2018). With continued mentoring and academic support, the perianesthesia nurse cohort remain successful practitioners.

Implications for Advancing the Practice of Perianesthesia Nursing: Creating a specialty nurse cohort advances the practice of Perianesthesia Nursing by training and cultivating a team of nurses to become experts in their field. Perianesthesia Nursing excels when members of their team are trained, supported, cultivated and encouraged to become the echelon nurses that they can be.

MASS CASUALTY INCIDENT RESPONSE: FLEXING PACU MUSCLES



Team Leader: Elizabeth Resweber, MPH BSN CPAN
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Team Members: Alya Nadji, MPH(c), Aviva Mandel

Background Information: Mass Casualty Incidents (MCIs) have greatly impacted hospitals across the United States. These unplanned traumatic events place extraordinary demands on hospital systems. Frequently, casualties from MCI events arrive unannounced via EMS and personal vehicles. Even ten traumatically injured patients would overwhelm a level-one trauma center. Each casualty could require a health care team of up to 10 professionals with skillsets including critical care, trauma, radiology, laboratory and social work. Collaborative communication across all services is essential in providing care in a Mass Casualty environment.

Objectives of Project: Identify opportunities for the PACU to support a MCI response in Philadelphia. Increasing situational awareness among PACU staff by developing and rehearsing the PACU response to a MCI in collaboration with the entire enterprise.

Process of Implementation: Our Emergency Preparedness Department has led the development of "mass casualty response plans" for departments throughout the institution. The close proximity of the PACU provides readily available access to the OR, anesthesia and surgical staff and is an ideal location to cohort patients requiring surgical intervention. PACU staff are ACLS/PALS certified, however, the staff do not routinely care for hemodynamically unstable trauma patients. To reinforce these skillsets, we have implemented monthly simulations focused on hypovolemia and shock. The PACU participates in regular hospital-wide emergency preparedness drills, including a full-scale table top exercise utilizing the Command Center and all available resources.

Statement of Successful Practice: The PACU has conducted 14 trauma simulations with 92 total attendees since July of 2017. These simulations have strengthened PACU nurses' trauma assessments and resuscitation skills. Additional learner engagement includes interdisciplinary Emergency Preparedness drills to identify learning opportunities. These simulations have elicited improved confidence around MCI preparedness in the PACU.

Implications for Advancing the Practice of Perianesthesia Nursing: The PACU has the capacity and resources to act as a staging area for the operating room to support a MCI.