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# Performance Improvement in Procedural Areas

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The Procedural Quality Council is a multidisciplinary council with representation that includes; Cardiac Catheterization Lab, Gastroenterology, Special Procedures from Thornton, Interventional Pulmonology, Interventional Radiology and Electrophysiology.

The primary focus of this council is to identify practice improvement issues that share a common theme throughout the various departments. Previous completed projects included addressing the special needs of sleep apnea patients when receiving moderate sedation and/or general anesthesia for various procedures and their requirements post procedure. This included a patient questionnaire which helped identify those with diagnosed sleep apnea and more importantly those who did not have a diagnosis of sleep apnea but were considered to be at greater risk for post procedure complications due to sleep apnea. This information was collected for a committee assessing the sleep apnea risks at UCSD.

Another project looked at time management issues. Scheduling conflicts and patient care delays affect all procedural areas. We developed a tool that included tracking times from the scheduled time to patient's arrival time, patient ready time and start of procedure time as well as out of room and discharge times. In Interventional Pulmonology (IP), we also had 16 possible reasons for those delays, including patient arriving late, complicated patient, staffing issues, MD issues, scheduling errors, etc. Each procedural area added their own list of time management glitches and it is a tool that we still use in IP.

We reviewed the recommendations for use of capnography for moderate sedation by various professional

organizations. We found that this technology was not in great use by outside facilities. After the council discussed the various types of measurement tools it was decided that the cost of capnography outweighed the benefits.

Last year the council decided on a yearly skills day for each area which was to meet the needs of each individual department. We also surveyed the nurses and found a need for more education regarding radiation exposure. We developed a one hour educational presentation for radiation safety for nurses, to be presented at skills day which was also presented at the nurse management meeting

Current performance improvement projects include:

- Partnering with the Epic team to develop Epic Optime for use in the procedural areas.
- Peer review of nursing care in the various areas.
- Review of central line use and the development of an educational tool for procedural clinical staff.

This is a unique group that has the benefit of collaboration with professionals in different specialties but face many similar challenges. By working as one council we develop professional growth and improve the multidisciplinary relationships among departments.



**Laura Peluso, BSN, RN** has been a nurse at UCSD Medical Center for over 20 years. She found a home in the Interventional Pulmonology Unit, where she has spent most of her career.