

Background & Purpose

The OR UBPC has been around for more than 5 years, and is regularly looking to improving its efficacy in order to better serve the OR as a unit. A well-functioning UBPC is correlated to improving health across the continuum¹ and encouraging nurse engagement in organizational decision making.² The success of the UBPC is often measured by its ability to successfully implement quality improvement through projects.

Purpose

The purpose of this review is to analyze past project evaluation data in order to improve the efficacy of project implementation for future OR UBPC projects. This will lead to greater nurse-driven improvements to the OR positively impacting patient care across the continuum.

Design & Methods

A retroactive analysis was conducted utilizing qualitative project evaluation data collected between 2013 and 2019 in order to determine factors leading to project success and failure in the Operating Room UBPC's history. Specific metrics were identified to track over the course of every project attempted between the aforementioned years.

Analysis

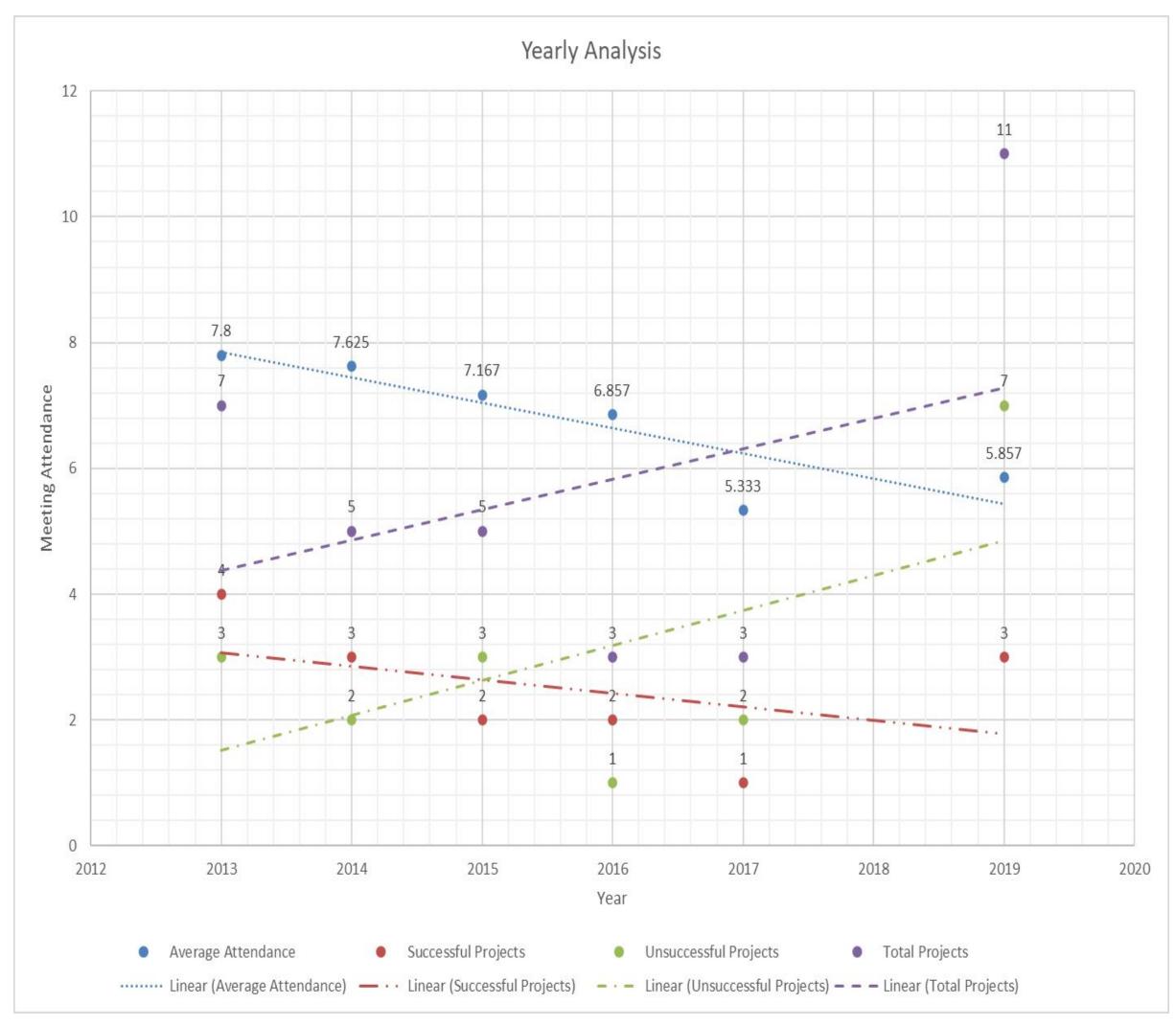
Data was collected on all projects between 2013 and 2019 using the following metrics: project success, barriers to success, reasons for success, meeting attendance, project members, and total projects per year.

Improving Operating Room UBPC Efficacy **Through Retroactive Analysis**

Ian Fong, RN; Julie Chou, RN; Elizabeth Key, RN; et. al.

Results

A total of 33 projects were evaluated. Collected data was placed on graphs that compare different metrics year to year with trendlines and frequencies of boons and hinderances to project success:



Overall Trends

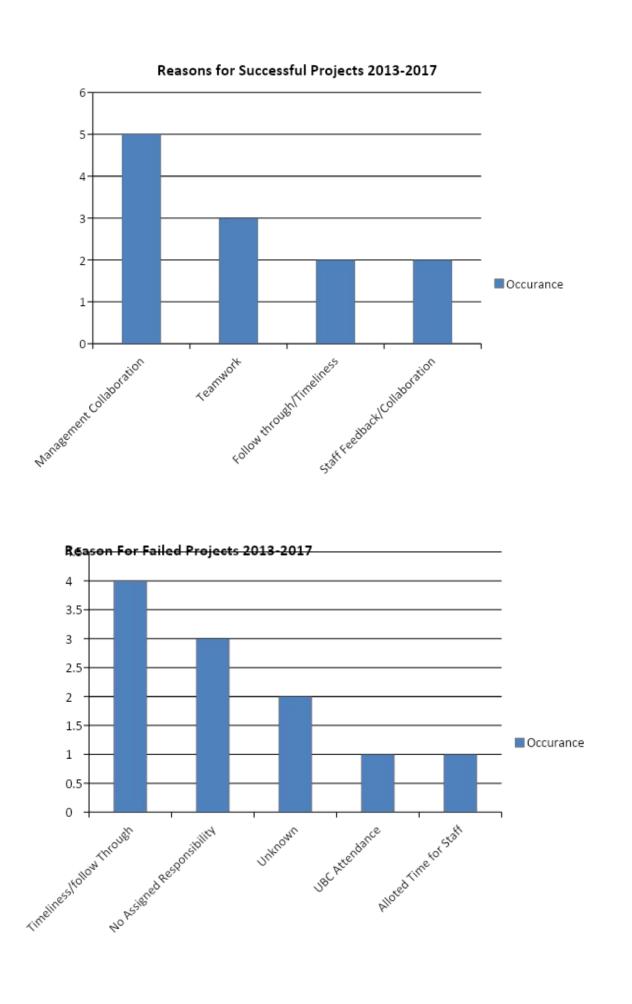
There's a downtrend of meeting attendance and successful projects correlating with an uptrend of total projects and unsuccessful projects. 63.3% of projects reported pre-implementation barriers. 83.3% of successful projects are attributed to successful teamwork and collaboration. There is a positive correlation between number of meetings per project and success.

A Closer Look at 2019

Management presence at meetings had no correlation with success, though buy-in was deemed a barrier. Only 25% of barriers to success were i outside of the UBPC. Successful projects correlated to more team members.

			6			1st Meeting	
	Name	Month	Success	Barrier	Leads	Attendance	Admins
1	New Membership Drive	Jan	No	Buy-in		2	7 1
				Knowledge/Data			
2	Review Current Projects	Jan	No	Collection		2	7 1
3	Pressure Ulcer	Feb	No	Communication		2	5 1
				Knowledge/Data			
4	Meeting w/ CQI	Feb	No	Collection			5 1
5	Family Satisfaction	March	Yes	Communication		3	9
6	Distraction in OR	March	Yes	Buy-in		3	9
	Steps to Improve Family						
7	Updates	June	Yes	Data Accuracy		3	2
8	Daisy Team Award	Sep	No	Time			10
9	Implant-Related Issues	March	No	Project Scope		2	9
10	SCD use during Surgery	Apr	No	Project Scope			6
	Red bag/Financial						
11	Stewardship	Sep	Ongoing			3	10





Conclusions & Further Study

The data suggests that the pre-implementation barriers should be targeted to promote project success. This can be done by limiting the number of attempted projects, assigning at least 2-3 members per project, increasing project working opportunities while on the unit, and increasing opportunities for feedback and communication through improved UPBC attendance. With fewer projects, the UBPC can focus early in the year and spend more meeting hours on each project.

These recommendations should to be implemented by the OR UBPC and continuing data needs to be collected on future projects before deciding whether the purpose of this study has been achieved. To that end, a standardized evaluation form containing the same metrics analyzed here has been created for future use.

Limitations

Limitations to this data include subjective reporting, small sample number, holes in the data (missing info from some meetings), and external factors including a hiring freeze and a new CSC department.

References

- 1664-1672.



This study was done independently by the OR UBPC. Questions: icfong@ucdavis.edu

UCDAVIS HEALTH

MEDICAL CENTER

1. Dragoon, Nicole, et al. "Nursing professional governance: Patientand family-centered design." Nursing Management 50.10 (2019): 15-19. Journals@Ovid Full Text. Web. 04 July. 2020.

2. Choi, Sujin, and Miyoung Kim. "Effects of structural empowerment and professional governance on autonomy and job satisfaction of the Korean nurses." Journal of Nursing Management 27.8 (2019):

Funding & Acknowledgements