

## **Action Plan Template**

Identify up to three opportunities for improvement that would be beneficial to you or your group.

	Goal
1. What is the opportunity or gap?	The incidence of post-operative nausea and vomiting (PONV) in the post anesthetic care unit after providing a general and/or spinal anesthetic in September 2023 was 14.2%.
2. What is your SMART goal?	Reduce incidence of PONV to less than 10% over the next six months.
3. Who will lead the change?	Physician.
4. Who will help implement the change and how will they need help?	Administrative support to ensure that all patients complete a pre-operative nausea and vomiting risk assessment. I will need to designate a risk scoring instrument and ensure access to it.
5. How will you identify the root causes of the issue?	Suspect underuse of pre-treatment for PONV is contributing to the incidence.
6. Considering root causes, what is a potential intervention which may be tested to improve the challenge you are facing?	I aimed to increase my use of aprepitant pre-operatively in patients with patient and/or surgical risk factors for PONV.
7. What resources are needed?	PONV risk assessment tools. Patient information sheets need to have aprepitant information added.
8. What is the timeline?	Six months.
9. What barriers may compromise success?	Time pressure, language barriers, lack of administrative support.
10. What strategies will you employ to mitigate the barriers identified?	Request additional administrative support to help with risk assessments as decreased PONV rate will decrease demand on the post-operative unit.
11. How will achieving the goal be identified or measured?	Review charts in six months to determine if there is a measurable change in PONV.

	Goal
12. What strategies will you employ to evaluate and sustain the change?	Add reminders to pre-op workflow. Consider working with IT to add PONV incidence to metrics displayed on anesthesia dashboard.

