INTRODUCTION

With clinical expertise that spans a patient’s surgical experience – preoperative, intraoperative and postoperative – perioperative nurses work to ensure that the highest standard of care is delivered to each individual throughout his or her journey.

The scope of professional accountabilities is broad, including the assessment, planning and implementation of the nursing care patients receive, maintaining a sterile and safe surgical environment, educating the patient and his or her family and monitoring the patients’ physical and emotional well being.1

Given the level of detail required and the vulnerable status of patients undergoing what can be high-risk procedures, these registered nurses shoulder a great deal of responsibility when stakes are high.

Increasingly, healthcare providers are acknowledging the burdens and contributions of these professionals by integrating perioperative Care Plan solutions into their electronic health records (EHRs). Such decision support, must address the unique elements of the perioperative settings while connecting to the broader continuum of care.

As patients move from caregiver to caregiver, across venues and disciplines, their care plan and documentation can be left behind. This creates knowledge gaps that can lead to treatment inconsistencies, redundancies and even clinical errors.

The perioperative environment should be a key focus of healthcare leaders for the financial implications of process and outcome improvement. Hospitalizations that include a surgical procedure – about 29 percent of all U.S. hospitalizations – account for nearly half of all hospital costs, according to the Agency for Research and Quality [2011 figures]. As will be shown, perioperative care impacts an organization’s ability to meet a great number of the demands of health reform.

THE IMPORTANCE OF CARE PLANNING

Care planning is an essential part of healthcare, although sometimes underappreciated. Without specific documentation delineating the plan of care, key components are likely to be neglected.2

While Care Plans are traditionally identified with nursing practice, the fact is that they are, or should be, interprofessional, providing a single road map to the successful end of the patient’s surgical journey. Plans serve as a means of communication among the interprofessional team involved in a patient’s care, and a mechanism that helps assure “all the boxes are checked” and activities reported.

A hallmark of perioperative care is interdisciplinary collaboration, because there are front-line clinicians who directly interface with the patient and family, but also scores of staff who help to support the safe movement of the patient and family through the care trajectory.3

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2Holly F. Sox, RN, BSN, RAC-CT, What is a Careplan? https://www.careplans.com/pages/about.aspx
3Daphne Stannard, PhD, RN, CNS, Dru Riddle, DNP, CRNA, Evidence in Perioperative Care, Nurs Clin N Am 49 (2014) 485–492
Utilizing an EHR-integrated care planning solution that embeds the patient’s story and an interprofessional longitudinal plan of care across care settings can help organizations overcome a wide variety of challenges, including workflow optimization.

Obviously, manual paper-based Care Plans are not effective tools for the Digital Age, and electronic systems can be less than useful if not implemented and maintained appropriately. Solutions and assistance are available, however, to make the task easier than it may seem.

**FEWER NURSES, OLDER PEOPLE**

The United States has been dealing with a nursing deficit for decades, however, due to an aging population, rising incidence of chronic disease, an aging-out nursing workforce and the limited capacity of nursing schools, this shortage is “on the cusp of becoming a crisis”.

According to the Bureau of Labor Statistics, 1.2 million vacancies will emerge for registered nurses between 2014 and 2022.

Looking at these and other factors individually, a driving force is the aging of the Baby Boomer generation, a group that will increase by 75 percent to 69 million between 2010 and 2030 and the complexity of their health issues. About 80 percent of older adults have at least one chronic disease, according to the National Council on Aging, and 68 percent have at least two, compounding the situation.

Also contributing to the influx of potential patients are the millions of newly insured under the Affordable Care Act, who could increase surgical volume through pent-up demand. Care Planning for these persons is made much more difficult by the paucity of supporting health documentation available about them.

As nurses often are the primary “teachers” for patients and their families, it is important that providers understand the impact that these increased patient populations and their concomitant socioeconomic diversity have on clinicians’ ability to provide, and assure understanding of, often complex issues.

An integrated Care Plan solution maintains the communication continuum for patients who are admitted following their surgery, representing the critical thinking behind decision making and attention to preventing complications.

The fact is that 36 million U.S. adults fail to read better than the average third grader. In addition, only 18 percent of adults are rated “proficient” in health literacy, defined as “the capacity to obtain, process and understand basic health information and services needed to make appropriate health decisions”.

In addition, a clear, consistent message is critical in assuring safe transitions of care and avoiding readmissions.

**CHANGING ENVIRONMENT, NEW DEMANDS**

A brief look at the way perioperative nurses help their organizations comply with the mandates and goals of reform further shows the need to provide this critical group of clinicians with the most effective tools available. For instance:

**Patient/family-centric care:** Care Plans provide tremendous support to perioperative nurses in this pursuit by making it easier for them to maintain the documentation necessary to promote meaningful communication throughout the patient experience.

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**Improved outcomes:** Care Plans promote consistent, standardized, collaborative care and adherence to best practices. Robust referential information guides decision making with key “must know” information. Care Plans also allow every member of the team to apply evidence-based practice and work from a single plan at the point of care. Proven to improve clinical performance on “Never Events” conditions, Care Plans also help reduce adverse events. Care Plans can reduce avoidable complications and readmissions, and, especially significant in the perioperative environment, provide guidance in preventing and mitigating sepsis, drug-resistant and other infections and additional threats to patient recovery and well being.

The perioperative environment also should be a key focus of healthcare leaders for the financial implications of process and outcome improvement, as hospitalizations that include a surgical procedure – about 29 percent of all U.S. hospitalizations – account for nearly half of all hospital costs, according to the Agency for Research and Quality [2011 figures].

**Revenue Cycle:** Care Plans can contribute heavily to the transition from volume-to value-based care, helping create the quality documentation provided for appropriate reimbursement and incentive payments based on quality.

**Risk Avoidance:** Care Plans can help reduce errors that often lead to litigation and damage to reputation, while enhancing organizations’ ability to achieve Magnet status.

**Patient Satisfaction:** Perioperative nurses are critical to providing information and support to patients and their families, assuring that patient preferences are recognized, building trust by reducing unintentional duplication and repetition and making the patient feel cared for in a time of uncertainty and fear.

**PATIENT SAFETY: “A FUNDAMENTAL PRIORITY”**

As noted by the Association of Perioperative Registered Nurses, the safety of patients undergoing operative or other invasive procedures is the primary responsibility of the perioperative RN.

Perioperative patients are vulnerable to injury, because of diminished or absent sensations of pain, the inability to act on those sensations and the inability to communicate or make personal care decisions. These vulnerabilities increase patients’ risks and require that health care providers value patient safety as the fundamental priority.7

**Administration:** Integrated Care Plans optimize workflow, as well, improving efficiency and reducing costs. They also enhance accountability. W. Edwards Deming said, “It is not enough to do your best; you must know what to do and then do your best.” Care Plans bring practice and evidence-based information into the clinician workflow, supporting them in knowing what to do so that they can do their best.

In addition, Care Planning promotes excellence in clinical documentation. Communication of patient information is critical in the perioperative setting as the patient moves from phase to phase.

**WHAT TO LOOK FOR IN CARE PLANS**

Integrated systems should address the unique elements of the perioperative setting and connect to the inpatient continuum of care. Prebuilt and preconfigured to be interoperable across care settings, today’s best Care Planning solutions assure longitudinal access to one content data set. Healthcare organizations should assure that the content used is of the highest quality available.

Given the vulnerable status of the perioperative patient, coupled with the complex nature of these areas, evidence-based practice and clinical decision-making must be rooted in high-quality evidence for safe and effective patient and family care.\(^8\)

Such a solution should seamlessly integrate into existing workflow, streamlining processes and providing staff with the expert guidance they need, when they need it, as well as powerful tools to efficiently document and monitor care.

Clear communication of the patient’s story in combination with evidence-based clinical practice guidelines and standardized assessments across care venues results in one patient-centered plan to which the entire interprofessional team is aligned. The patient’s well-documented history becomes his or her story, greatly enhancing communication during care transitions.

Care Plans help healthcare organizations to meet regulatory, safety and quality measures, as well as Magnet designation and Meaningful Use requirements.

Vendors of integrated systems provide technical expertise, deploying experienced implementation teams to work with organizations in a collaborative, structured approach to meet specific needs.

CONCLUSION

Perioperative care is complex, and represents a high percentage of provider costs. By integrating an effective care planning solution into the perioperative workflow, healthcare organizations can better support their perioperative clinicians in providing evidence-based care that is individualized to the unique needs of the patient.

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