

## L'IMPACT DE L'INFIRMIERE/INFIRMIER DE LIAISON SUR LA SATISFACTION DU PATIENT QUANT AUX SOINS PERIOPERATOIRES

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### RESUME

Améliorer la satisfaction, maintenir la communication et réduire l'anxiété des patients est un élément important des soins périopératoires. L'introduction d'infirmières et d'infirmiers de liaison en soins périopératoires aura un impact important. Grâce à la capacité de ces professionnels de se concentrer sur le patient et de l'aider à naviguer les différentes étapes de son expérience chirurgicale, les soins qui en résultent seront moins fragmentés et l'amélioration sera manifeste.

La déclaration de l'AIISOC intitulée *The Perioperative Nurses' Role in Primary Health Care* (Le rôle de l'infirmier(ère) périopératoire en soins de santé primaires) traite de ce sujet important. Reportez-vous au module 1 de l'Association des infirmières et infirmiers en salle d'opération du Canada (AIISOC). *ORNAC Recommended Standards, Guidelines and Position Statements for Perioperative Registered Nursing Practice* (8<sup>e</sup> édition).

## THE IMPACT OF THE SURGICAL LIAISON NURSE ON PATIENT SATISFACTION IN THE PERIOPERATIVE SETTING

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### ABSTRACT

Improving patient satisfaction, communication, and the reduction of anxiety, is an important factor in perioperative care. The introduction of a surgical liaison nurse (SLN) will have significant impact. Through the SLN's ability to focus on the patient and to transition with the patient through all areas of the surgical experience, the resulting care will be less fragmented and the improvement will be evident.

The majority of health care organizations are targeting the key concepts of escalating patient satisfaction, improving the process of communication, and reducing the perception around levels of anxiety in all areas. The concern in these areas as it relates to surgical patient is no exception. Millions of patients, and their family members, come into contact with surgeons, anesthesiologists, nurses, and other perioperative health care professionals on a daily basis as a result of any number of surgical procedures.

Who prepares these patients or their family members for the anxiety and fear that they face while they wait, often hours at a time, to be informed about the condition of their loved ones? As noted by Cooke, Chaboyer, Schluter and Hiratos the long waits throughout the

perioperative experience may enhance the perceptions of anxiety,

*"Waiting time, with its opportunity for brooding, thinking, worrying and fearing the forthcoming surgery may also exacerbate perceptions of anxiety".<sup>1</sup>*

The perioperative environment is often seen as impersonal and unfriendly. Patients arrive, are relieved of their belongings, families are asked to wait, often in a remote waiting area. These waiting areas are often congested with a high level of noise and a lot of movement of patients and staff.<sup>2</sup> How do patients or family members know what to expect?

Patients and their family members often note, throughout the perioperative phase of hospitalization, a fragmentation of the communication process. This fragmentation may add to heightened levels of stress and anxiety. Dunne articulates the importance of good communication,

*"Communication is an essential part of good practice in nursing and is the basis for building a trusting relationship that will greatly improve care and help to reduce anxiety and stress for patients and clients, their families and their carer".<sup>3</sup>*

Not only can ineffective communication be linked to higher levels of stress and anxiety, a lack of communication can also result in an overall feeling of dissatisfaction with hospital care.<sup>4</sup> Nurses, the main service providers within most health care settings, are most often responsible for having the greatest influence on overall patient satisfaction levels.<sup>5</sup>

In September 2005 the surgical liaison nurse (SLN) role was introduced at Trillium Health Centre (THC) in an effort to improve the process of communication and the level of patient and family satisfaction as well as to reduce the feelings of anxiety felt by many patients and their family members, throughout the peri-operative phase of hospitalization. THC is a large community hospital located in Mississauga, ON, that

provides surgical services to approximately 30,000 patients per year.

The SLN is dedicated to ensuring patients and families are kept informed throughout the surgical care process. Patients and family members are greeted by the SLN after the registration process is complete. During this initial introduction, the SLN explains the sequence of events that are likely to occur during the perioperative period. If it is known that the patient will be admitted to the hospital for an overnight stay the SLN provides information about room numbers, visiting hours and other hospital information. The SLN answers any questions or concerns that are raised by the patients and their family members. The SLN does not provide medical information or medical care to the patient or family. The SLN will, however, seek out the physician or primary nurse if this type of information or care is required. While the patient is in the operating room, a connection is maintained between the SLN and the waiting family members through the sharing of information about the progress of the procedure, the location of the patient and when they will be able to have contact with their loved ones. Once the patient has arrived in the recovery room, the SLN makes contact with the nurse who is providing medical care and determines an appropriate time for a family member to visit with the patient. They may, if required, accompany the physician when he/she speaks with the family member about the procedure, diagnosis or outcome of the surgery. When possible, the SLN will visit with admitted patients on the following day.

MacDonald and Latimer, note that there have been limited studies in relationship to the SLN however, literature is very supportive of the face to face communication facilitated by this role and the resulting reduction in the level of anxiety when the communication is enhanced.<sup>6</sup>

The introduction of the SLN role at THC was based on a current literature review with a focus on increasing patient and family satisfaction, communication and the ability to reduce the feelings of anxiety felt by patients and their families throughout the perioperative period.

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## IMPACT OF THE SURGICAL LIAISON NURSE (cont.)

This review was conducted by the Surgical Health System nursing administration and educators. Research into the impact of these elements on patient satisfaction in the perioperative setting has been carried out, albeit on a much smaller scale than the studies relating to inpatient satisfaction. As noted by Gardner, Nnadozie, Davis and Kirk,

*"Although considerable research has been conducted in regard to patients' assessments of services rendered in the inpatient setting, minimal research has been conducted in the outpatient setting."*<sup>7</sup>

A current review of the literature specifically related to the peri-operative area, has outlined 97 research reports dealing with issues in the peri-operative care area.<sup>8</sup> Much of this research focused on the process of communication, improvements to overall patient satisfaction & quality of care, and the reduction of anxiety.

The relationship between patient satisfaction and improvements in the process of communication is of considerable importance within the perioperative setting. It is noted that communication in the perioperative setting tends to be fragmented due to the very nature of the area.<sup>9</sup> Improvements in the area of communication have been shown to have a positive impact on the level of patient and family satisfaction in the perioperative setting. This improvement also results in a reduction in the level of anxiety and fear that patients experience as they wait for their surgical procedure. A reduction in this level of anxiety has been shown to have a positive influence on medical outcomes.<sup>10</sup>

An improvement in patient satisfaction scores will result from a focus on improvements to the process of communication along with the development of a true therapeutic relationship with the patients and families.<sup>11</sup> Mahon notes,

*"Apart from producing emotional upset ranging from discomfort to debilitating panic and avoidance, anxiety may also adversely affect such patient outcomes as recovery/recuperation and understanding of postdischarge care."*<sup>12</sup>

The measurement of patient satisfaction is not a new phenomenon. Most health care organizations have, historically, measured and monitored patient satisfaction on a regular basis. Current literature, however, supports a belief in the resurgence and mounting interest in the area of patient satisfaction. It is important to understand and monitor the patients' perspective, as it relates to the provision of quality care, as well as to document required improvements in specific areas.<sup>13</sup>

Of note, the World Health Organization (WHO), as cited in De Silva<sup>14</sup>, speaks to a new framework for measuring overall health system performance. This framework consists of the following: health, responsiveness, and fairness of financing. More importantly, there is significant attention paid to focusing on the:

*"...responsiveness to individuals' legitimate expectations regarding the non-health enhancing aspects of the health system..."*<sup>15</sup>

This responsiveness can be linked to patient and family satisfaction as well as to effective communication. The involvement of WHO, and other international agencies, leverages the significance of measuring the expectations of the patients through patient satisfaction indicators.

It has been noted that technical care versus holistic care is emerging as a central theme in today's health care society. This is of significant importance for the perioperative area. Typically, patients are satisfied with the technical quality and outcomes of the care they receive, however, growing concern and emphasis is being placed on the ability of the system to meet the emotional and other psychosocial needs of the patients and their families.<sup>16</sup> These may be described as communication enhancements as well as improving the relationship between the provider and the patient.

It is this change in the landscape of health care, along with the thousands of surgical procedures that are being performed across the country on a daily basis, which provides the reasoning associated with improving the process of communication in order to enhance patient

## IMPACT OF THE SURGICAL LIAISON NURSE (cont.)

satisfaction and reduce anxiety in the perioperative setting.

Since the introduction at THC of the SLN role, there has been an increase in overall patient and family satisfaction within the perioperative setting. Much of the information around satisfaction rates is anecdotal. Family members often call with compliments about the SLN and the service that is provided. Letters have also been received about the impact of this role. Surgeons and nursing staff have embraced the role and now depend upon the services of the SLN to enhance the experience of the patients and families within the perioperative area.

Several other hospitals (Halifax, Hamilton, and Kingston) have since implemented a comparable role within their perioperative areas. There is however some controversy over who should be hired to perform this role. Many of the organizations surveyed have operating room nurses in this role. At THC, however, the position is held by a recovery room nurse. Several applicants were interviewed for this role and the decision was difficult however, communication skill and the ability to liaise with all team members was evident in the person chosen. There is no minimum level of experience or educational preparation required for the SLN role. A good understanding and knowledge of the surgical procedures as well as the ability to communicate are, however, paramount for success. With an emphasis on communication as well as an increase in patient and family satisfaction, the ideal SLN is capable of, and proficient in, building relationships in addition to being very knowledgeable about the perioperative area. An understanding of the roles of the professionals that work in this area is also an asset.

From an in-patient perspective there is strong support for the benefits of enhanced patient and family satisfaction, improved communication, and a reduction in the perception of anxiety. There appears, however, to be limited research around, or appreciation for, the magnitude of these benefits in the perioperative setting.

Further research in this area is warranted. Thousands of surgical patients and families throughout the world wait anxiously, on a daily basis, in perioperative settings. If we are able to improve communication and, ultimately, patient and family satisfaction the potential benefits are endless.

The ORNAC Position Statement entitled The Perioperative Nurses' Role in Primary Health Care speaks to this important subject. Refer to Module 1 of the Operating Room Nurses Association of Canada (ORNAC) (2007). *ORNAC Recommended Standards, Guidelines and Position Statements for Perioperative Registered Nursing Practice* (8th ed).

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