

Caring Presence

The key to improving the patient experience

By Veda Andrus, EdD, MSN, RN, HN-BC

Nursing is an art: and if it is to be made an art, it requires an exclusive devotion as hard a preparation, as any painter's or sculptor's work; for what is the having to do with dead canvas or dead marble, compared with having to do with the living body, the temple of God's spirit? It is one of the Fine Arts: I had almost said, the finest of Fine Arts. — Florence Nightingale¹

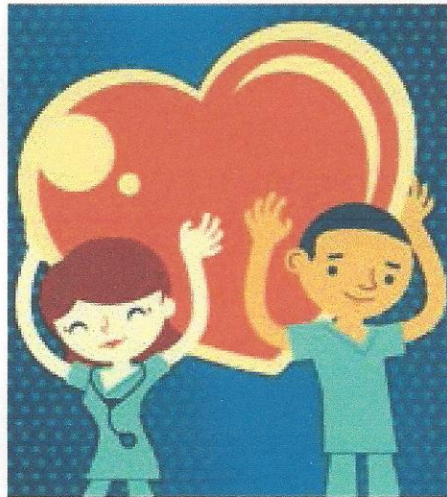
The words that jump out for me from Nightingale's reflection on nursing are exclusive devotion. Every nurse reading this article knows that nursing involves far more than is ever portrayed in the media about nursing practice. As noted in "Holistic Nursing: Dispelling the Myths," nurses are scientific artists.² It takes an exclusive devotion to learn, practice and become experts at the science (technology, interventions, pharmaceuticals) and artistry (therapeutic presence, compassionate care) of our practice.

Today, with the implementation of the Affordable Care Act (ACA), value-based purchasing, the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS), and a focus on the patient experience, the stakes are even higher for nurses to provide sustainable quality outcomes for their patients. With a new focus on reimbursement from CMS, nurses are now called upon to have an understanding of and direct relationship with the business side of healthcare.

What you may understand by the conclusion of this article is that the "caring case" of holistic nursing practice has a direct relationship with the "business case" of healthcare by improving the patient experience through enhanced nurse engagement and caring presence. First, let's develop a working relationship with the concepts and language foundational to the current healthcare climate.

Understanding Value-Based Purchasing
ACA of 2013 mandates value-based purchasing implementation within healthcare organizations, tying quality and outcomes to reimbursement from CMS.

The concept of value-based purchasing may be complex to understand, however the essence is that CMS will reimburse a healthcare organization based upon the quality of care provided: the better the care (value), the greater the reimburse-



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ment (purchase) from CMS. This is a shift from payment for outcomes to payment for quality. "Effective this year, all hospitals are facing up to a 1% reward or penalty of their total Medicare reimbursement based on the results of 20 clinical process and patient experience measures."³

Each fiscal year (FY), CMS increases the measures upon which reimbursement is based. For example, for FY 2014, reimbursement was based on clinical processes, patient experience and outcomes. For FY 2015, reimbursement will be based on these same measures plus a new measure, efficiency. Also for FY 2015, there are two new outcome measures, one of which has become common vernacular for nurses: patient safety indicators.

There are penalties for higher than expected 30-day readmission rates (and for FY 2014, mortality rates) for acute myocardial infarction, heart

failure and pneumonia, along with penalties for hospital-acquired conditions, such as pressure ulcers, surgical site infections and falls with injury.

Nurses have a vital role in impacting the amount of reimbursement their healthcare organization receives. As first-line bedside care providers, nurses must strive for clinical excellence in partnership with the quality of the care a patient receives.

HCAHPS and Nursing Practice

One of the primary measures for quality of care that relates directly to nurses is patient survey results known as HCAHPS. It is likely that every nurse has heard about the importance of HCAHPS scores but may not understand that approximately 30% of the HCAHPS survey questions are related to nursing care.⁴

Here is a list of topics related to nursing that are questioned on the HCAHPS.⁵

- Courtesy and respect
- Listen carefully
- Explain in a manner that is understood (including medications)
- Response time: Call button, bed pan use assistance
- Pain control
- Clean room
- Quiet at night
- Discharge information – verbal and written

Although it is true that ancillary staff may also be responsible for fulfilling the needs of patients, the overarching responsibility falls under the auspices of nursing. In many ways, HCAHPS results remind nurses that patients come looking for both excellent clinical care (science) and excellent quality care (art). Nurses are already experts in clinical care: they read evidence-based research in professional journals and are well-versed in the application of technology, interventions and pharmaceuticals. Nurse engagement, therapeutic presence and compassionate care are foundational for the quality of care patients expect and deserve. The key words, patient experience, hold nurses accountable for creating an environment where patients truly feel cared for, listened to and included in their plan of care. This is not new to nursing, rather a return to the roots of our practice.

Holistic Nursing to the Rescue!

"Cultural transformation is needed to succeed; traditional linear performance improvement projects will no longer suffice."³

The tenets of holistic nursing include therapeutic

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presence, centering/grounding prior to engagement, compassionate care and personal self-care practices.

It will take a cultural transformation in nursing and healthcare to value and create a supportive environment to uphold these core tenets.

The nurse's presence is key to the patient experience: if the nurse shows up in a patient's room and is still mentally or emotionally engaged with her last patient or lost in thought about what she needs to do for the next several patients, how present is she with this one patient? If not truly present, a nurse may miss a pressure ulcer or a surgical site infection.

It takes practice to be a therapeutic presence. Taking a deep breath before engaging with a patient can provide a moment to center and ground which enhances nurse engagement and an ability to offer compassionate care while being a therapeutic presence.

Consider sitting at the head of the bed rather than standing. Based on results of a recent study, doctors who sat during their visit were perceived by patients as spending 40% more time in the room.⁶ This simple shift in caregiver behavior enhances the patient experience and provides an opportunity to listen carefully to the patient's story and explain information in a relaxed manner.

Nurse engagement also requires that a nurse is not suffering from exhaustion, compassion fatigue and burnout. Nurse self-reflection and self-care are core values for holistic nursing and this includes caring for self both at home and at work by creating some semblance of work-life balance.

Taking breaks and eating a healthy meal at work will provide the necessary renewal to be therapeutically present throughout the course of a 12 hour shift. Getting restful sleep along with healthy eating and adequate exercise is

important while at home. Consider what self-care practices will best sustain you at work and at home.

Nurse engagement with the intention of being a caring presence takes an exclusive devotion to ourselves in order to enhance the quality of the patient experience. The paradox? Being a caring presence with patients will improve the quality of the nurse's experience as well. ■

References

1. Florence Nightingale Exhibit. <http://www.florenceightingaleexhibit.com/>
2. Anrus V. Holistic nursing. <http://nursing.advanceweb.com/Features/Articles/Holistic-Nursing.aspx>
3. Raso R. Value-based purchasing: What's the score. *Nursing Management*, 2013; 44(5), 29-34.
4. CMS. Hospital value-based purchasing. <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/hospital-value-based-purchasing/index.html?redirect=/hospital-value-based-purchasing/>
5. HHS. HCAHPS survey questions. http://www.wahospitalquality.org/HCAHPS_survey_questions.pdf
6. KU study shows doctors who sit during visits perceived better by patients. <http://www.oread.ku.edu/~oread/2010/april/19/stories/sit.shtml>

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Holistic Nursing: Part 1

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