IMPLEMENTING SENIOR FRIENDLY STRATEGIES: DEVELOPING PREOPERATIVE EDUCATION AND PRACTICE THAT FOCUSES ON THE NEEDS OF THE ELDER PATIENT AT RISK

Team Leaders: Meredith Muscat, RN (EC), MN, Nancy Rudyk, RN, MN
St. Michaels Hospital, Toronto, Ontario, Canada

BACKGROUND INFORMATION:
In 2012 at St. Michael’s hospital a 3 year strategy plan was launched to foster a hospital environment that respond to seniors’ physical, cognitive, and psychosocial needs to promote health, safety, patient/family engagement and satisfaction. As part of this comprehensive plan, a review of the preoperative assessment and education provided to seniors was implemented.

OBJECTIVES OF PROJECT:
Enhance the pre-operative assessment and focused education for elders at risk prior to surgery

PROCESS OF IMPLEMENTATION:
Stakeholder consultations with inpatient teams were held to determine priority areas of focus for pre-operative documentation that would assist in providing enhanced post-operative care and discharge planning for senior patients. These recommendations would be utilized to optimize the clinical assessment of at risk elders and documentation of key information desired by inpatient teams to optimize care planning. The revision of the current preanesthesia nursing assessment form was deemed necessary and a template was designed as part of the strategy

STATEMENT OF SUCCESSFUL PRACTICE:
The need to increase access to patient education materials related specifically to seniors post-operative requirements along with the development of an education package that focused on elderly patients and their caregivers has been developed to assist in preparation for surgery and at home recovery. In addition, a revised nursing documentation reflects current best practices for assessment of geriatric surgical patients.

IMPLICATIONS FOR ADVANCING THE PRACTICE OF PERIANESTHESIA NURSING:
The recognition of the growing senior population at St. Michael’s hospital has provided an opportunity to engage stakeholders in a comprehensive review of the preoperative nursing process and has enhanced the post-operative care required in discharge planning for elder patients at risk.