

# Enhanced Recovery After Surgery Pathway – Can be improved!

Author Amos Sutcliffe

## Introduction:

Whilst on a surgical ward placement it became obvious that patients knowledge of postoperative care was variable because many of them did not know;

- what was required of them to speed their recovery
- how to acquire and use the resources that were available to them.
- Who they needed to talk with to make sure they get the best care possible.

These obstacles led to the formation of a research question:

“ Does a higher level of health literacy determine quantifiably better outcomes for surgical patients who have passed through an ERAS pathway”

## Discussion/ Recommendations:

Patient feedback identifies a lack of support and information once they return home with resultant frustration and disconnection.

At the point of discharge a single point of contact should be identified who will support and assist in managing care provided for the patient.

A written discharge summary in a format that the patient can understand must be provided which clearly identifies any follow up, referrals or steps to be followed such as GP/Outpatient appointments.

The person appointed as the point of contact will stay in contact with the patient over the weeks following the operation to confirm with that follow up actions have been completed, or if there is a need for further services.

## Conclusions:

Patient perceptions of the ERAS pathway are positive when hospital care is occurring. Once discharged over 50% feel either isolated or unable to pursue their rehabilitation or recovery.

Personalised contacts ensue that post operative cares do occur with a subsequent improvement in patient satisfaction of the ERAS pathway. These contacts also promote higher levels of health literacy that lead to faster recovery times and with fewer readmissions.

## Literature Review:

The ERAS pathway identifies what will happen before, during and after surgery occurs. Post surgery care is also part of the pathway. (Ministry of Health (2017)).

Favourable ERAS pathway patient experience occurred in the hospital experience but during the rehabilitative phase patient experience was unfavourable, (Bernard, H., & Foss, M. 2014 & Renholm, M., Suominen, T. A., et al. 2009).

50% of patients were unable to demonstrate sufficient health literacy to manage their recovery and rehabilitation (Shah, L. C., West, P., Bremmeyr, K., Savoy-Moore, R., 2009).

Socio-demographic factors including race, age, and education contributed to this deficiency. (Osborn, C. Y., Paasche-Orlow, M. K., Bailey, S. C., & Wolf, M. S. 2011)

Patient's report frustration from conflicting instructions of different providers, & poor understanding of what they need to do on discharge, causing patients to seek alternatives in the face of this frustration. ( Bernard, H., & Foss, M. 2014).

## References

- Bernard, H., & Foss, M. (2014). Patient experiences of enhanced recovery after surgery (ERAS). *British Journal Of Nursing*, 23(2), 100-106.
- Ministry of Health (2017)(1) Enhanced recovery after surgery. Retrieved from <http://www.health.govt.nz/our-work/hospitals-and-specialist-care/enhanced-recovery-after-surgery> on 14.03.2017
- Osborn, C. Y., Paasche-Orlow, M. K., Bailey, S. C., & Wolf, M. S. (2011). The Mechanisms Linking Health Literacy to Behavior and Health Status. *American Journal Of Health Behavior*, 35(1), 118-12
- Shah, L., West, W., Bremmeyr, K., Savoy-Moore, R.T., (2010). Health literacy in family medicine: The "newest vital sign" ease of use and correlates. *The Journal of the American Board of Family Medicine*, 23, no.2, 195-203. doi 10.3122/jabfm.2010.02.070278..



## Pecot Model

On reflection PECOT Category*.	Information relating to question	Explanation
Population	Post-operative surgical patients whose surgical experience is managed through an Enhanced Recovery after surgery pathway.	Post op surgery through a pathway is supposed to provide a seamless transition from preadmission to support/rehabilitation once the pt. returns home.
Exposure (Intervention)	We are looking for <ul style="list-style-type: none"> <li>• Adult patients who have recent surgical procedures which have required convalescence.</li> <li>• Where health literacy has/has not been present</li> <li>• Where there has been an identified rehabilitation outcome</li> </ul>	We want to identify the effectiveness of ERAS pathways in the delivery of post op care and rehabilitation; And to what degree this recovery is or is not enhanced by a quantifiably identified level of health literacy; To establish whether health literacy is seen to influence rehabilitation.
Comparison / Control	Those patients who have not been managed on an ERAS pathway and whose levels of Health literacy are similar to those in reported articles.	We want to know if health literacy affects patient outcomes with in an ERAS Pathway.
Outcome	Quantifiable changes in wellness have occurred with appropriate measured, identified, outcomes such as mobilisation time. Return to full Activities of Daily Living, lack of infection or re-hospitalisation.	We want to know if the provision of health literacy contributes to be positive/negative outcomes in this population and to what degree.
Time	N/A	N/A

### RATIONALE

The choice of a poster to identify shortcomings in the health literacy of those that pass through the Enhanced Recovery After Surgery was determined by the static and ongoing ability of the poster to present the message.

The poster is a passive communication mode which offered a snapshot of information, to be presented without further resource being allocated. For those that require further information this can be obtained by reviewing the identified references. It was stressed that the information provided in a poster had to be simply presented, concise, readily understood and have a visual element that was engaging (Moore, L., Augspurger, P., King, M., & Proffitt, C. (2001).

Wider dissemination of the message is enabled by distributing copies to other stakeholders, interested parties such as GP surgeries, Public Health professionals and providers, Rest Home proprietors and Health Care providers.