

# Standardization of Documentation System Resources to Decrease Clinician Anxiety

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## Published In/Presented At

Farthing, L. (2016, April 2). *Standardization of Documentation System Resources to Decrease Clinician Anxiety*. Poster presented at: AORN Congress, Anaheim, CA.

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## Preparation Planning and Team

Hospitals across the nation are challenged to increase quality care to improve surgical outcomes while decreasing operational costs. Our 972 bed academic community magnet hospital had over two dozen electronic medical record (EMR) documentation systems, which at times were isolated from each other. Surgical team members often accessed multiple data systems to extrapolate important information needed to prepare for the surgical procedure, causing delays while obtaining necessary information. It was an organizational decision to implement a new clinical documentation system (CDS) in 2015, causing anxiety amongst clinicians and determining a need for educational resources.

## Implications for Perioperative Nursing

- Staff no longer have to access multiple EMR documentation systems to obtain patient information
- Staff are able to circulate at alternate campuses which helps with single campus staffing issues
- Staff are becoming more comfortable with technology
- Standardized workflow processes at all campuses are constantly reviewed and revised
- Weekly super-user meetings occur discussing outstanding workflow issues and resolutions

## Assessment

- With the implementation of the new CDS, clinicians were challenged to maintain patient safety while documenting patient care in an unfamiliar documentation system
- Clinicians with limited technology intelligence were apprehensive to go from paper documentation to computerized documentation
- Each campus had different processes and workflows needing to be standardized
- Many staff were not competent to circulate at alternate campuses due to their knowledge deficit regarding the EMR documentation systems
- Perioperative services, at each campus operate solely from each other, including a campus that historically documented on paper
- Structural differences at each campus made standardization of processes and workflow difficult

## Electronic Medical Record



Personal Information  
Social Information  
Insurance  
Diagnosis  
Treatment  
Medical History  
Healthcare Calendar  
Schedule  
Appointment



## Outcome

- Educational schedule was created allowing staff to attend required CDS education
- Multiple educational in-services were provided
- One on one personalized education occurred
- Staff were provided ample time to practice in the CDS playground under guidance post-classroom instruction
- Standardized clinical documentation resource books were created for each operating room at each campus
- Increased efficiency and workflow which enhanced process improvement throughout the network
- Decreased staff anxiety knowing resources are readily available
- Clinician resistance to learning a new documentation system was evident and now has subsided

## Implementation



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