TRANSFORMING OUR PRACTICE: CARING PRESENCE AND COMPUTERIZED DOCUMENTATION

Mary Mullany, DNP, APRN, BC
Metrowest Medical Center
Natick, MA 01760
Mary.Mullany@mwmc.com

Introduction: The introduction of computerized clinical documentation in the psychiatric service at Metrowest Medical Center has been received by nurses as both a “blessing” and a “curse”. As integration of technology into clinical practice continues to evolve, it is important to understand how this has influenced nursing practice from the nurses lived experience. Understanding the challenges and opportunities of computerized clinical documentation through the nurses’ eyes sets the stage for the professional nurses, with leadership support, to begin steps to transform the environment and provide the authentic caring presence that is the essence of nursing practice.

Significance: With the enhanced focus on computerized documentation, nurses are describing a change in their practice from a patient centered model of caring to one that has shifted to a more task oriented model of care, with focus on computer documentation. Nurses describe spending more time with the computer than with their patients, missing the human contact and face-to-face connection. The use of computerized documentation does not allow the patient’s story to unfold; the story becomes a checklist, missing the meaning behind the words. Having an authentic caring presence cannot be lost due to the computerized documentation system. Sustaining a caring healing environment is imperative for both patients and staff in the psychiatric milieu. This project will focus on improving the staff’s capacity to integrate the core concepts of Caring Science while completing computerized documentation (Watson, 2008).

Purpose: The purpose of this project is to conduct a qualitative survey to better understand the experiences of the nurses and their perception of patient care as they work towards integration of technology in the psychiatric milieu. The goal of the project is to re-establish the core value of psychiatric nursing: interpersonal relationships

Setting and Participants: The setting for this project is within the psychiatric service in a community hospital. A representative sample of nurses from the three inpatient units (child, adult and geriatric) will be interviewed. The sample includes male and female nurses, with varying years of experience in nursing and educational backgrounds. Using a questionnaire, each nurse will be asked to share their experience and perception of clinical computerized documentation and the impact on the way they practice. The questions are:

1. Describe how the introduction of computerized documentation has influenced practice?
2. Has computerized documentation influenced positively or negatively authentic caring presence with your patients? Describe?
3. What changes would you suggest to support a caring healing environment?
**Project Description/Process:** This project lays the foundation for facilitating change within each psychiatric unit to better integrate technology with human caring that is the essence of nursing practice. The interviews will serve several purposes: to understand the experience of the nurses and to engage them in transforming their practice ensuring the integration of Caring Science. The information from the nurses will also provide valuable information for nursing leadership, identifying creative, innovative ideas for seamless integration of computer technology into the patient care environment. This project will provide a venue for nurses, the primary stakeholders, with an opportunity and a voice in defining their own professional practice.

**Projected Project Outcomes** The data from the surveys will be shared with all staff and nursing leadership within the psychiatric service with the intention of using it as a means to understand the practice changes needed to integrate Caring Science and the use of computers to ensure patient centered care as a core value in psychiatric patient care experience (Watson, 2008). Caritas Processes™ for computer documentation were built into the original platform but are currently not utilized as intended (Watson, 2008). Nurses report they mindlessly click boxes without an authentic caring intention as the design was intended. It is intended that the information gathered from this project will serve to guide the next steps to increase caritas literacy (Watson, 2008).

**Project Evaluation:** The themes from the staff nurse interviews will be prioritized by staff, educators and nursing leadership in late September. Each unit will be asked to identify one practice change to implement. A successful practice will be replicated on a larger scale throughout the department. Post implementation staff nurse interviews will be conducted in six months to determine whether the changes implemented had a positive effect.

**Future Directions:** This project will create an environment where bedside nurses have input into their professional practice, providing a venue which is grounded in Caring Science as the moral-ethical foundation for all practice decisions. With leadership support and the creativity and innovation of staff nurses, we will reshape the milieu into a caring healing environment for patients and nurses. We will establish a “Culture of Caring” within a Professional Practice (Watson, 2008).

**Acknowledgements:** I want to thank the dedicated group of caring nurses in the Behavioral Medicine Department at MetroWest Medical Center. Their struggles with the integration of computerized documentation are reflective of their desire to be an authentic caring presence with patients and each other. Their energy and desire to find new ways of maintain a caring presence is impressive. Esther Keown-Frolich, thank you for your patience, wisdom and guidance on this Caritas journey.

**Reference:**