

Nursing Practice and Policy

The Value of Nursing Care Coordination: Executive Summary

Why "care coordination" and why now? Care coordination has been proposed as a solution to many of the seemingly intractable problems of American health care: high costs, uneven quality, and too frequent disappointing patient outcomes. In the United States more resources are devoted to health care per capita than in any other nation, yet our fragmented system is often characterized by communication failures and non-beneficial or redundant healthcare tests and services. This results in an unacceptable risk of error and an increase in cost, both in terms of resources and in human suffering.

While many independent elements of U.S. healthcare are high quality, they need to be better aligned to serve patients and the people and institutions that care for them. Current financial and structural incentives restrict this potential for better patient care outcomes and effective resource allocation. Instead, they intensify the weaknesses inherent in the non-coordinated, independently functioning pieces of our health care system. The development and implementation of effective systems and processes to help cure this current misalignment can benefit tremendously from the experience, professional competencies and long-standing ethos of registered nursing.

Coordination of care is not a new idea and it is certainly not new to registered nurses. In the context of a partnership guided by the patient's and family's needs and preferences, the registered nurse is integral to patient satisfaction and care quality, as well as the efficient use of health care resources. Patient-centered care coordination is a core professional standard and competency for all nursing practice. Registered nurses understand that they are an essential component of the care coordination process to improve patients' care outcomes, facilitate effective inter-professional collaboration, and decrease costs across patient populations and health care settings. What is well known to registered nurses, however, has not often been recognized outside of nursing. This White Paper was initiated to highlight both the qualitative and quantitative accomplishments of registered nurses in care coordination.

Care coordination has been defined by numerous groups, many of which have focused on specific patient populations in specific settings. ANA has adopted the notions from two interweaving strands offered by the National Quality Foundation and the Agency for HealthCare Research and Quality. Care coordination is (a) a function that helps ensure that the patient's needs and preferences are met over time with respect to health services and information sharing across people, functions, and sites; and (b) the deliberate organization of patient care activities between two or more participants (including the patient) involved in a patient's care to facilitate the appropriate delivery of health care services. One also notes that the best coordination model is one in which a patient experiences primary care as delivered by an integrated, multidisciplinary team that explicitly includes at least one care coordinator staff person.

The value of registered nurses in care coordination roles has been demonstrated in numerous health care reform initiatives focused on integrative service delivery. Nurses have designed, implemented and participated in care coordination projects and practices that seek to improve patient outcomes and decrease costs, frequently demonstrating the effectiveness of nurse-led and patient centered care coordination. The focus of the White Paper review is on recent reports and studies that have documented results involving registered nurses in care coordination.

While the results derive from a wide variety of settings and diverse patient populations, the conclusions reached are strikingly similar. Authors observed:

- reductions in emergency department visits,
- noticeable decreases in medication costs,
- reduced inpatient charges,
- reduced overall charges,
- average savings per patient,
- significant increases in survival with fewer readmissions,
- lower total annual Medicare costs for those beneficiaries participating in pilot projects than for the control groups,
- increased patient confidence in the ability to self-manage their care,
- improved quality of care,
- increased safety of older adults during transition from an acute care setting to home,
- improved clinical outcomes and reduced costs, and
- improved patient satisfaction overall.

There is much more to be learned. But the pattern of results to date is very suggestive and demands expanded research. RNs and advanced practice registered nurses (APRNs) in care coordination can play substantial roles in improving the delivery of health care. Nurses are central to coordinating the patient experience, targeting both cost efficiencies and improved care outcomes for diverse patient groups. Different care settings, patients' needs, and resource availabilities may influence the selection of a care coordinator. For many patients, however, the registered nurse is the most appropriate care coordinator.

In order to fully achieve this potential, clear models and outcome measures are needed which specify the context for care coordination, identify nursing competencies, and value the nurse's role within the health care team. To this end, ANA recommends that

- (a) more research be conducted to improve quality measures and the understanding of best practices of effective care coordination:
- (b) registered nurses' education should be enhanced by incorporating care coordination throughout their didactic and clinical learning experiences, including an emphasis on inter-professional, teambased care; and
- (c) nursing organizations and nurse leaders should identify and implement care coordination opportunities and nurse-led care coordination models, and care coordination must be explained to patients (and families) so they will know how it may affect both their treatment and their participation in their treatment.

ANA is deeply committed to improving the quality of outcomes for patients and providing greater health care efficiencies through care coordination centered on the needs and preferences of patients and their families. ANA recognizes and promotes the integral role of registered nurses in the care coordination process to improve patient care quality and outcomes and to decrease costs across patient populations and health care settings.

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