# Skilled Nursing Facilities and Inpatient Surgery Analysis

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## Introduction

The history of human care dates back to ancient times when people used self-treatment by herbs to heal wounds and treat diseases. However, the developed methods of human care started in the mid-19th century when Florence Nightingale redefined the concept of nursing care and provided scientific definitions and ways to provide necessary nursing care. The surgical practice was initially meant to cure amputations, lacerations, and draining of rotten wounds. This paper will describe the history of skilled nursing facilities and inpatient surgery and provide modern methods of practice (Egenes, 2017; Spaner & Warnock, 1997).

## Skilled Nursing Facility

### Outcomes

The skilled nursing practice is aimed to achieve the following outcomes:

1. Provision of evidence-based nursing care and comfortable and familiar conditions in hospitals or other healthcare facilities
2. Provision of holistic care, i.e., complete care for the physical, psychological, social, and spiritual self of the person, while ensuring that the patient gets complete prevention and cure of disease.
3. To perform methods of collective care, which involves team effort of nurses while considering standards of care.
4. Effective record and measurement of care.
5. Effective methods of delegation and palliative care.

Modern skilled nursing facilities also increasingly use technologies such as telemedicine to improve access to physicians and specialists, although administrators report implementation barriers related to staffing, workflow, technology, and reimbursement (Driessen et al., 2018).

### Ownership And Governance

The healthcare facilities and nursing service providers are governed by hospitals and healthcare associations.

## Regulatory Bodies

The following agencies are the regulatory bodies of the skilled nursing facility in various countries:

- International Council Of Nurses (ICN)
- American Nurses Association (America)
- Canadian Nurses Association (Canada)
- Australian Nurses and Midwives Association (Australia)
- British Nurses Association (United Kingdom)

## Reimbursement Schemes

The hospital conducts the reimbursement process in the skilled nursing facility.

- The reimbursement scheme is valid if the person stays in the hospital for three or more days.
- The amount is calculated by the number of days and the type of service provided to the patient.
- The patient's resource utilization is measured by calculating the daily amount of service, which includes five levels of rehabilitation depending on the service hours.
- The patient, at the end of his discharge, is asked to clear his reimbursement amount from the hospital authorities before his discharge.

The amount patients ultimately pay can vary substantially according to Medicare coverage, Medicare Advantage plan design, length of stay, and the transition from inpatient hospital services to skilled nursing care (Keohane et al., 2015).

## Finance Mechanism

Before the application of the Medicare Act in 1965, nurses were funded by the variable standards of their pay scale. There were no criteria on how a nurse would be paid and no standards of nurse pay calculation. After the Medicare Act, the nurses are provided their pay by the specified payroll of nurses depending on the type of Medicare, which can be the hospital or hospice, outpatient service, self-administered prescription, and alternative experimentation if none of the other three are applicable.

## Economic And Social Forces

The skilled nursing facility was funded by various social groups when proper benefactors of the field were not defined. After the application of the Medicare Act, the future benefactors of nursing facilities were defined by PPACA, which is responsible for funding the nursing facilities.

## Inpatient Surgery

Inpatient care is defined as the care provided to patients who undergo surgery at the hospital and stay at the hospital for one night or more.

## Outcomes

1. Effective surgery of patients
2. Collaboration with physicians in performing surgery and post-surgery operations
3. Provision of complete nursing care to the inpatients.
4. Care of patients till they are discharged from the hospital

## Ownership And Governance

The inpatient surgery healthcare service was monitored by healthcare providers in the past, and after the advancement of medical healthcare, this ownership has been given solely to the hospital.

## Regulatory Bodies

The inpatient surgery service is regulated by the Ambulatory Surgery Center Association (ASCA), which governs the rules and regulations applied to surgeons and other inpatient care staff.

## Reimbursement Schemes

The reimbursement in surgical practice is done by a single payment that includes the amount. The total amount of service is calculated by the type and amount of surgical services provided, and the Medicare Payment Advisory Commission (MedPAC) is consulted to calculate the payment for surgical services. Hospital cost profiles for inpatient surgery can vary according to procedure mix, patient complexity, institutional accounting, and the reliability of cost measurement, which makes careful comparison important when evaluating surgical efficiency (Grenda et al., 2016).

## Finance Mechanism

Inpatient surgery financing is different in government and private hospitals. Private hospitals are mostly funded by social workers and philanthropy programs, in which they collect funds from the people to run hospital operations. The government hospitals' surgical departments are financed by the government, and they provide free care or ask for very little charge for inpatient surgical care.

## Economic And Social Forces

Inpatient surgery is funded by social services that fight for a cause in most hospitals. Various trusts provide finance for specific types of surgeries, like breast cancer surgery trusts. These trusts fund both government and private hospitals for surgeries that are common. However, not all inpatient surgeries are funded by social services, and patients have to pay the cost before being admitted to the hospital.

# Conclusion

The skilled nursing practice and inpatient surgery have developed their methods as the field of medical science has improved, and research has been done in this field. Both skilled nursing practice and inpatient nursing have improved after the application of the Medicare Act. This Medicare Act has also defined the finance methods and pay scale of nurses and other healthcare providers and defined the reimbursement schemes for the payments. However, there is a need for more research in refining the nursing practice to ensure better health facilities for patients.

# References

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