Hardwiring Heart Failure Patient Self-Care Discharge Preparation to Positively Impact 30-Day Readmission Rates

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Practice Problem

- One in four heart failure (HF) patient readmissions within 30 days (Ziaeiana & Fonarow, 2016).

- Existing relationship between nurses knowledge of HF self-care concepts and the degree of patient preparation (Albert et al., 2002; Washburn, Hornberger, Klutman & Skinner, 2005).

- Time and timing for discharge preparation

Clinical Question

- For acute care registered nurses, does improved nurses knowledge and self-efficacy of evidence-based patient teaching methods for patient transition to home impact HF readmission rates and patient perception of discharge care understanding in eight weeks?

Project Description

Multimodal intervention: education and clinical practice

- Education: Survey
  - Nurses' Knowledge of Heart Failure Education Principles Survey
    (NKHFEPS) (Albert et al., 2002)
  - Always Use Teach-Back! Conviction and Confidence Scale (TB)
    (IHI, 2016)
- Education: Presentation
  - HF self-care concepts
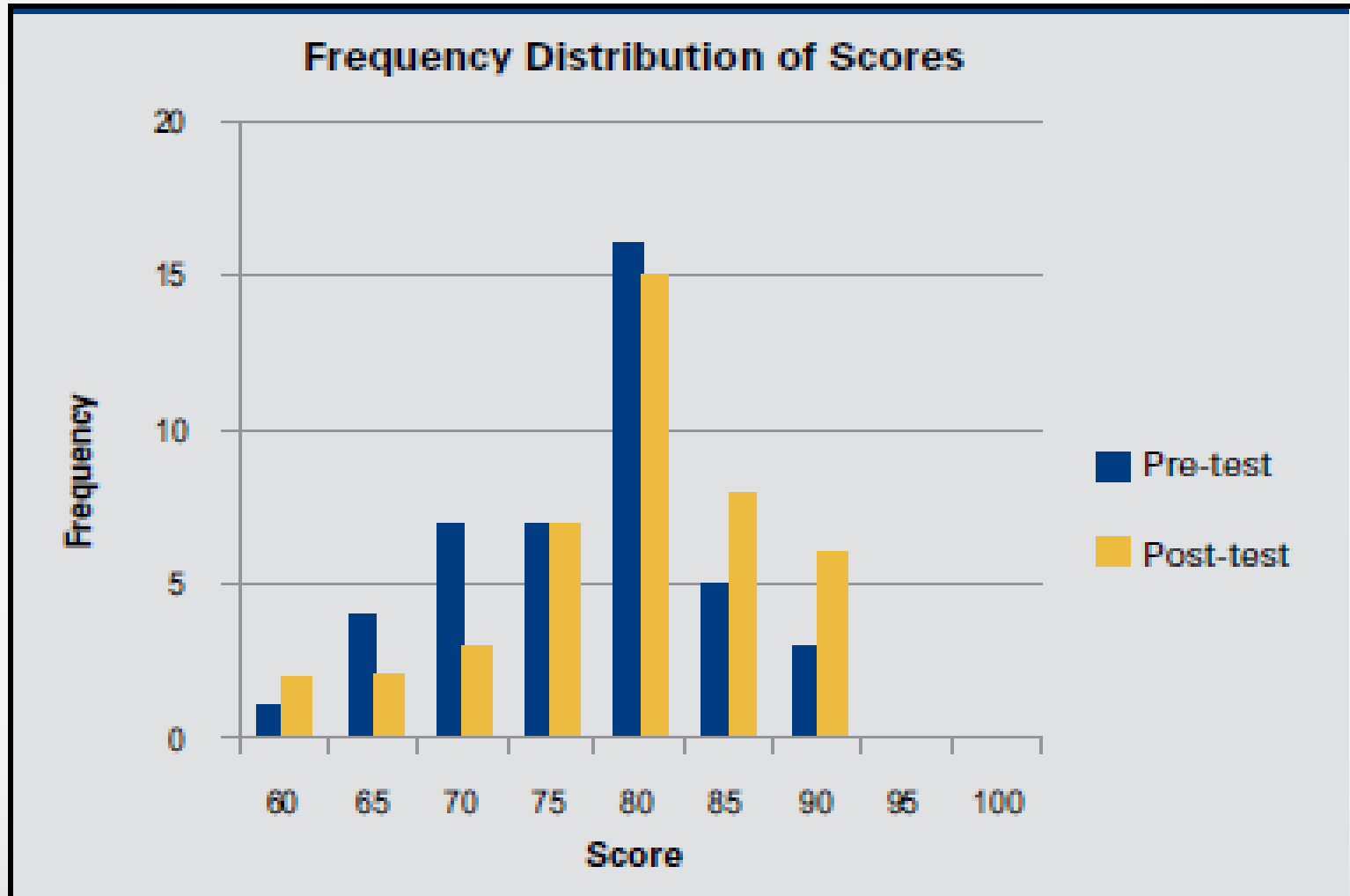 - Revised patient education resources
  - Teach-back

Project Description

- Clinical practice change
  - Knowledge translation and resource utilization
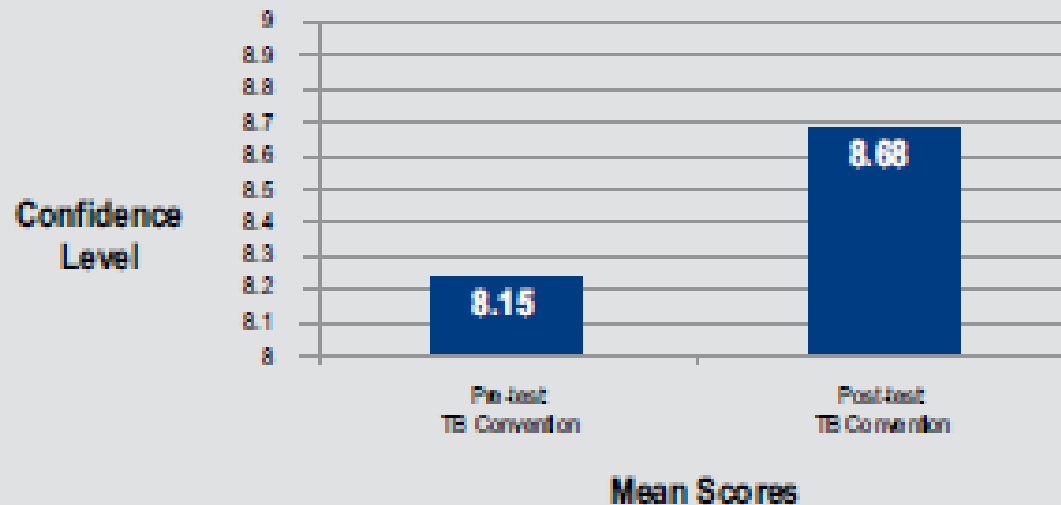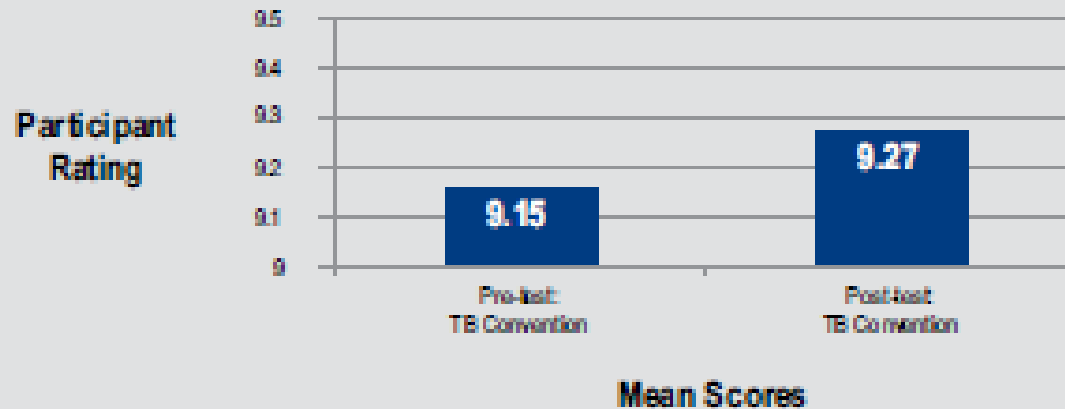 - One-to-one and small group huddles

Data comparison:

- HF readmission rates

- Patient satisfaction scores (CMS, 2016)

Project Evaluation

Project Evaluation

Conclusion

- Formative evaluation:
  - Statistically significant differences in nurses' knowledge
- Practice application:
  - Translation of knowledge into patient preparation processes
- Secondary data:
  - Increase in patient understanding of receipt of instructions
  - Could not support a direct relationship to patient perception of self-care readiness
  - Did not immediately affect patient readmission rates within a 30-day period

Nursing and Healthcare Implications

- Transform patient preparation for self-care
- Supports research findings on nurses knowledge of HF self-care concepts
- Supports nurses confidence with teach-back
- Supports the use of evidence-based practice (EBP) for quality patient outcomes (Carpenter & Bell, 2002).
- Decreasing patient readmissions within 30-days of discharge:
  - Benefit healthcare systems financial reimbursement
  - Increase patient satisfaction

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