Education Interventions to Prevent Readmission of Heart Failure Patients

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Recommended Citation
Reed, Emily and Schnepp, Rebecca, "Education Interventions to Prevent Readmission of Heart Failure Patients" (2012). Pharmacy and Nursing Student Research and Evidence-Based Medicine Poster Session. 32.
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Education interventions to prevent readmission of heart failure patients

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PATIENT CARE ISSUE

• More than 5.7 billion people in the United States have been diagnosed with heart failure (HF)
• Non-adherence to self-care measures necessary to manage HF is associated with exacerbation and readmission
• A 27% 30-day readmission rate for Medicare patients with HF can lead to reduced Medicare payments and penalties
• HF hospitalizations contribute to over half of the $39 million annual HF cost
• Reduced Medicare payments and penalties
• A 27% 30-day readmission rate for Medicare patients with HF can lead to failure
• Non-adherence to self-care measures necessary to manage HF is associated with exacerbation and readmission

SYNTHESIS OF EVIDENCE

Content
• Daily weights
• HF knowledge
• Fluid management
• Medication knowledge
• Social interaction and support
• Identifying signs and symptoms
• Diet and activity recommendations

Method
• Individualized
• One-on-one
• Blend of media
• Teach-back session
• Use of questionnaire
• More than one session
• Counseling and peer support

EVIDENCE-BASED PRACTICE RECOMMENDATIONS

Content
• Continue use of teach-back session
• Continue current practice of included content specifics

Method
• Consider a more individualized approach
• Consider making available a blend of media in addition to booklet
• Continue set-up with Specialist Clinical Nurse Practitioner on discharge

RESULTS

34 relevant sources narrowed to nine based on inclusion and exclusion criteria
• Two systematic reviews
• One randomized control trial
• Two cohort studies
• Two integrative reviews
• Two guidelines

METHODS

• Search of PubMed, MEDLINE, CINAHL, and guideline.gov
• Combination of six key terms

Inclusion criteria
• Published in English
• Published after 2006
• Participants admitted and diagnosed with HF
• Study used education intervention
• Focus on patient adherence and reduced readmission outcomes

Exclusion criteria
• Not published in English
• Published before 2007
• Clinical articles
• Pilot studies
• Focus on healthcare professional knowledge rather than patient knowledge

ACKNOWLEDGEMENTS

A special thanks to Miami Valley Hospital and David Miller, RN.

REFERENCES


LIMITATIONS

Use of a combination of education interventions making it difficult to determine best intervention
Specifics of education interventions were sometimes not included
Some studies incorporate non-English studies and studies completed outside of the United States