11-2012

Education Interventions to Prevent Readmission of Heart Failure Patients

Emily Reed  
*Cedarville University*, creed@cedarville.edu

Rebecca Schnepp  
*Cedarville University*, rmschnepp@cedarville.edu

Follow this and additional works at: http://digitalcommons.cedarville.edu/pharmacy_nursing_poster_session

Part of the Cardiology Commons

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*. Paper 32.  
http://digitalcommons.cedarville.edu/pharmacy_nursing_poster_session/32

This Poster Session is brought to you for free and open access by DigitalCommons@Cedarville, a service of the Centennial Library. It has been accepted for inclusion in Pharmacy and Nursing Student Research and Evidence-Based Medicine Poster Session by an authorized administrator of DigitalCommons@Cedarville. For more information, please contact digitalcommons@cedarville.edu.
Education interventions to prevent readmission of heart failure patients

Emily Reed and Rebecca Schneppe
Cedarville University School of Nursing

**PATIENT CARE ISSUE**

- More than 5.7 billion people in 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
- Almost half of HF admits will be readmitted within six months of discharge

**EVIDENCE-BASED PRACTICE QUESTION**

Question: What is the best heart failure discharge education content and method of delivery in order to promote patient self-care and prevent readmission?

**P** - Patients diagnosed with HF

**I** - Best discharge education content and method of delivery

**C** - Compared to other methods of education delivery

**O** - Increase patience adherence to self-care measures to reduce readmission

**METHODS**

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

<table>
<thead>
<tr>
<th>Inclusion criteria</th>
<th>Exclusion criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Published in English</td>
<td>Not published in English</td>
</tr>
<tr>
<td>Published after 2006</td>
<td>Published before 2007</td>
</tr>
<tr>
<td>Participants admitted and diagnosed with HF</td>
<td>Clinical articles</td>
</tr>
<tr>
<td>Study used education intervention</td>
<td>Pilot studies</td>
</tr>
<tr>
<td>Focus on patient adherence and reduced readmission outcomes</td>
<td>Focus on healthcare professional knowledge rather than patient knowledge</td>
</tr>
</tbody>
</table>

**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

**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

**REGISTERED NURSE INTERVIEW**

Nurse stated patients are taught specifics about daily weights, low sodium diet, when to call physician, and no more than two liters of fluid per day.

**METHOD**

- HF booklet
- Explanation
- Teach-back session
- Set-up with Specialist Clinical Nurse Practitioner on discharge

**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
- Specifics of education interventions were sometimes not included
- Use of questionnaire
- Consider making available a blend of media in addition to booklet
- Consider a more individualized approach
- Continue use of teach-back session

**ACKNOWLEDGEMENTS**

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