Decreasing 30 day Hospital Readmissions for CHF Patients Using Teach Back

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Background and Needs Assessment

- CHF incidence > 26 million worldwide[1]
- 47% of the world will develop CHF by 2030[2,3]
- 6.2 million adults are diagnosed with CHF in the U.S.[4]
- 25% of hospitalized pts will be readmitted in 30 days[5,6,7]
- 1/3 to 1/2 readmissions are preventable[2,8]
- Direct costs >$33 billion/yr[5]
- CMS decreases payments to hospitals with excessive 30 day readmissions[1,5,9]
- Difficult and complex disease to manage[1]
- Effective self management can improve outcomes including decreasing readmission rates[11]
- Effective education can improve self-care of patients with CHF as they transition home[3,10]

PICOT

In hospitalized adult congestive heart failure patients, how does teach back method (TBM) for discharge teaching, compared to routine discharge teaching, affect hospital readmission rates for acute exacerbation in 30 days?

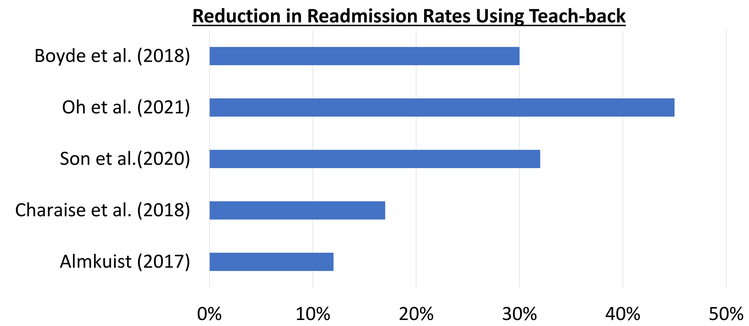
Literature Search

- **Data bases**: CINAHL, PubMed, Cochrane Library and Ovid
- **Keywords:** Congestive heart failure, teach back, self-management, education, discharge, and readmission rates
- **Inclusion Criteria**: PR journals, English, quantitative, within 5 years, and adults ≥18 with CHF admitted to an acute care hospital, studies that used teach-back
- **Exclusion Criteria**: patients with cognitive, speech and auditory impairments, patients going to another facility
- **Articles:** 21 found, 11 used
- **Levels of Evidence**: 4 Level I, 3 Level II, 4 Level III
- **Summary of evidence:** Articles demonstrated a positive impact on education and teach-back method with patient outcomes and a decrease in 30 day hospital readmissions

April 2022

Synthesis of Findings & EBP Guidelines

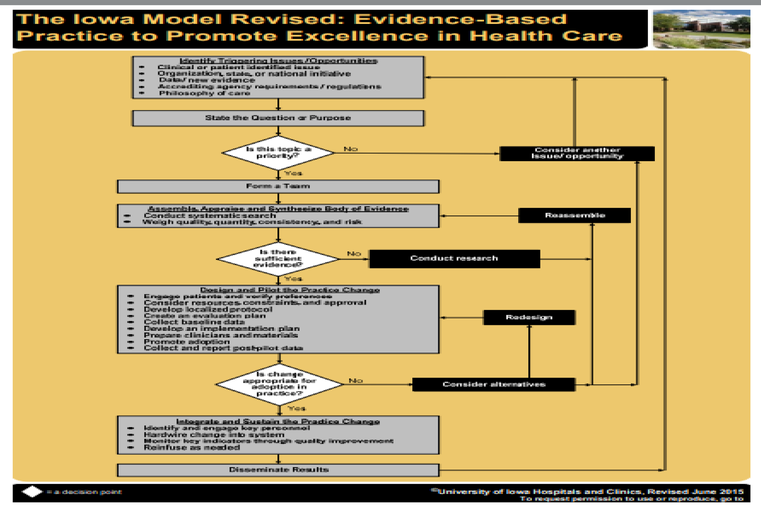
- Knowledge ↓ poor adherence and ↑ recognition of early signs and symptoms[1,5,6,9,10,11]
- Knowledge ↑ self management, quality of life, & ↓ hospitalizations[1,2,3,5,6,7,10,11]
- Considered low literacy levels which ↑ adherence to care[10]
- TBM ↑ comprehension, confidence levels and satisfaction[3,9]
- Significant improvement in readmissions with nurse led education including TBM with a p value <0.05[2,3,6, 7]
- TBM blended with educational interventions ↑ outcomes[3,8,12]
- TBM ↓ hospital readmissions ↓ health care system costs[2,9]



Recommendation to Change

- CHF EBP Guidelines emphasize adherence to self-care life style modifications
- TBM ↓ # of 30-day readmissions by improving understanding and knowledge retention
- TBM is an effective means to educate patients and ↓costs of CHF[1]

Theoretical Framework



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Implementation Plan

- Obtain project approval from administration for this EBP project
- Identify collaborators and form an interprofessional team
- Train RNs on TBM using AHRQ guidelines and tool kit as an online course[13]
- Create an education packet using AHA Get With The Guidelines and use a HF tool to assess knowledge[14]
- Provide 30-60 minutes of education from day of admission to discharge [3,9,14]
- Measure outcomes and celebrate the successes of using TBM

Evaluation Plan

- Follow up phone call in 42-72h to assess knowledge and compliance after discharge
- Ask questions regarding TBM to assess knowledge retention; RN will use a prescribed script
- Obtain data from case management on readmissions

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Acknowledgements

Thank you to the University of Houston College of Nursing faculty Dr. Mary Love and the generous support of HCA Healthcare and Memorial Hermann