EFFECTIVENESS OF COMPREHENSIVE DISCHARGE PLANNING IN REDUCING CONGESTIVE HEART FAILURE READMISSIONS

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There are no companies, etc. in a relation of conflict of interest requiring disclosure by the presenter(s) in relation to the contents of the presentation.
OBJECTIVES

At the completion of this presentation, the participate will:

1. To discuss the prevalence of elderly adults with Congestive Heart Failure hospital readmissions.
2. To discuss effective EBP strategies that could potentially reduce or break the readmission cycle.
PICOT QUESTION

• In elderly patients age 65 or older with Congestive Heart Failure (P) How effective is the use of a comprehensive discharge plan and medication education (I) Compared to usual care (C) In reducing readmissions for exacerbation of symptoms (O) Within 30 days of discharge (T)?
INTRODUCTION

- Heart failure happens when the heart cannot pump enough blood and oxygen to support other organs in your body.
INTRODUCTION

• The CDC has reported that there are 5.7 million adults in the United States that have a diagnosis of Congestive Heart Failure.
• The overall 30-day readmission rate after a congestive heart failure hospitalization is 24.8 percent.
INTRODUCTION

• Sixty-one percent of congestive heart failure readmissions occur within 15 days of discharge.
• Congestive heart failure diagnoses accounted for 55.9 percent for readmissions.
INTRODUCTION

• To encourage hospitals to reduce readmissions, Congress created in the Affordable Care Act (ACA) the Hospital Readmissions Reduction Program (HRRP), and this allows CMS to penalize hospitals with higher-than-expected 30 day readmissions.
INTRODUCTION
PROBLEM

• Congestive Heart Failure readmissions is the problem, because the more readmissions the lower the patients quality of life.
• A solution to the problem is the use of a comprehensive discharge plan to prevent the readmissions.
Implementation of heart failure readmission reduction: A role for medical residents

The purpose of the study was to describe the integration of residents into the implementation of a CHF readmission program.
REVIEW OF LITERATURE

• Hospital Strategies Associated with 30-day Readmission Rates for Patients with Heart Failure, the purpose of the study was to gain evidence of the effectiveness of strategies that would help to lower readmission rates.
Evidence Based Strategies to Reduce Readmissions in Patients with Heart Failure, the purpose of the study was to find strategies that would reduce heart failure readmissions that were cost efficient, and that would improve the patient’s quality of life.
• Achieve Reduced Heart Failure Readmission Rates: One Healthcare Organization’s Care Coordination, the purpose of the study is to fix problems with care coordination in the HF care management process within this healthcare system, and provide a consistent plan with all the clinics and hospitals.
REVIEW OF LITERATURE

• How to Reduce Heart Failure Readmission Rates: One Hospital’s Story, the purpose of the study was to improve the quality management to track patients with CHF and are at greatest risk for readmission through information technology.
REVIEW OF LITERATURE

• The effect of Heart Failure Education on Reducing Admissions, the purpose of this study was to reduce readmission rates by implementing educational interventions in an outpatient setting post discharge.
INTERVENTIONS/MEASURES

• Follow up appointments with primary care and cardiologist.
• Provide primary care physician with a discharge summary.
• Educate the patient about the disease process and importance of the medication regimen.
• Provide the patient with a self-care plan.
• Refer to a HF clinic if one is available.
THE ULTIMATE GOAL
Q & A


