

Improving Transitions of Care Through Teach Back Utilization and Readmission Risk Assessment

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INTRODUCTION

The University of California San Diego Health System implemented a transitions of care program aimed to decrease hospital readmissions through a readmission risk assessment and increased patient education.

40-80% of information provided to patients is forgotten immediately. The Teach back method is a technique used to help patients remember important information.

TOOLS

Type of AU	Tally	Day of Discharge Teaching (circle as many that apply)	Inpatient Teaching (circle as many that apply)
Request for Teachback: eg. "Could you please share with me the main points you got from our discussion?"		Reason for hospitalization Self Care (wounds, monitoring) Follow up care/appts. When to call care provider Discharge Medications Other	Diagnosis/Condition Procedure Self Care Inpatient Care Plan Inpatient Medications Other
Open Ended AU: eg. "What questions do you have?"		Reason for hospitalization Self Care (wounds, monitoring) Follow up care/appts. When to call care provider Medications Other	Diagnosis/Condition Procedure Self Care Inpatient Care Plan Inpatient Medications Other
Close Ended AU: answer is a yes or no eg. "Do you have any question?"		Reason for hospitalization Self Care (wounds, monitoring) Follow up care/appts. When to call care provider Medications Other	Diagnosis/Condition Procedure Self Care Inpatient Care Plan Inpatient Medications Other
OK? Question (ambiguous). Must include a rising voice pitch signifying an interrogative.		Reason for hospitalization Self Care (wounds, monitoring) Follow up care/appts. When to call care provider Medications Other	Diagnosis/Condition Procedure Self Care Inpatient Care Plan Inpatient Medications Other
No Assessment of Understanding		Reason for hospitalization Self Care (wounds, monitoring) Follow up care/appts. When to call care provider Medications Other	Diagnosis/Condition Procedure Self Care Inpatient Care Plan Inpatient Medications Other

Utilizing the 8 Ps (Risk Factors)

Prior hospitalization?	Refer to Case Management for planning
Poor health literacy?	Home health consult, post d/c appt. Individualize education.
Patient Support?	Patient meeting (MD/interdisciplinary).
High Risk diagnosis?	Diagnosis education with TEACH BACK.
Psych complications?	Assess psych meds continued inpatient. Psych consult. Plan for psych f/u.
Polypharmacy?	Assess pt knowledge, create education plan. Pharmacy consult for med action plan.
Problem meds?	Coumadin teaching by pharm. Lovenox teaching. DM/insulin ed. Pain consult.
Palliative Care?	Howell service consult.

TEACHBACK GUIDES

EMMI Teach Back Guide: Chronic Obstructive Pulmonary Disease (COPD)

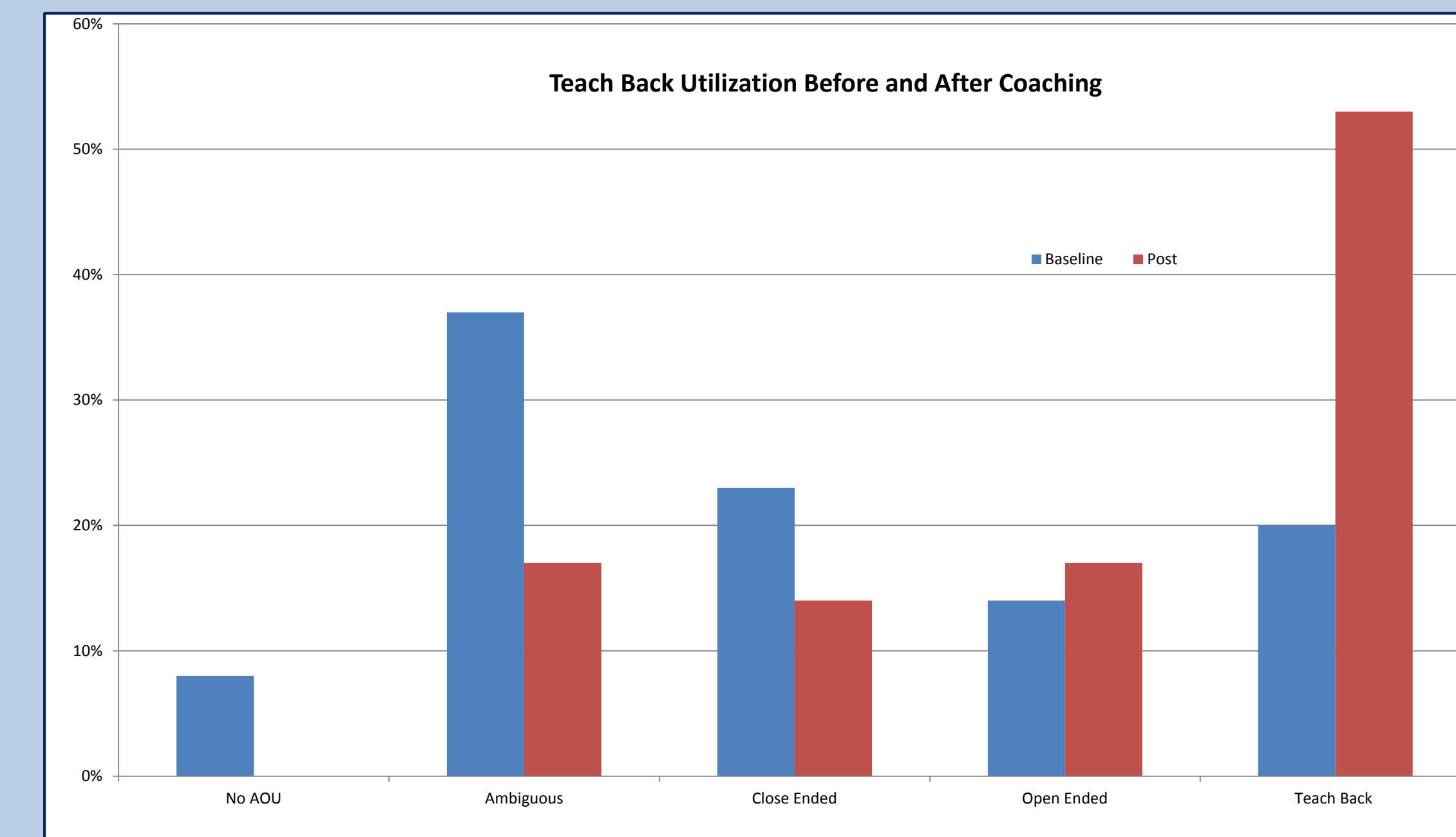
Notes: These teach back questions are guides to assess your patient's learning. This information is not intended to be used as the definitive source for COPD. This tool is a patient handbook.

Teach Back Question	Answer Guide
1. What is COPD?	COPD stands for chronic obstructive pulmonary disease. This includes chronic bronchitis and emphysema. The lungs become blocked or damaged and it's hard to breathe.
2. What are the symptoms and why are they important?	Common symptoms: "coughing, wheezing, and shortness of breath." This could be the warning sign for COPD. Long-term use of inhalers may lead to lung damage and worsen symptoms.
3. What causes COPD?	Smoking is the number one cause of COPD. Some people can get COPD from breathing a lot of secondhand smoke or polluted air.
4. Why is it important to quit smoking?	Smoking increases your risk for cancer, stroke, and heart disease. Quitting now really can slow COPD down and keep it from getting worse.
5. What can you do to stay healthy?	Get a yearly flu shot. Also, check if you need a pneumonia vaccine. Stay regular on your inhalers. Stay away from dust and fumes, don't use aerosols and sprays and stay away from heavy lifting.
6. What is the most important thing you should know about COPD?	Medications can help keep your symptoms under control. You will have to use inhalers, nebulizers, and oral meds, and you will feel better day to day if you take them as directed. It's important to keep taking your medications even if you feel better.
7. What types of medications may you be taking?	Bronchodilators: help the muscles around your airways relax. (Albuterol, Combivent) Inhaled Steroids: reduce the swelling in your airways and prevent attacks. (Fluticasone, Budesonide) Combination medications: inhaled steroids + bronchodilators.

UC San Diego Health System EMMI Teach Back Questions: Stroke

Notes: These teach back questions are guides to assess your patient's learning. It is important to individualize responses and have a meaningful interaction with the patient during this process. (This is not a patient handbook)

Teach Back Question	Answer Guide
1. What are the warning signs for stroke?	Stroke symptoms: "Face drooping, Arm weakness, Sudden changes in speech." Sudden changes in speech include slurred speech.
2. What warning signs did you experience?	Individualized response: "I had a sudden change in my speech when I was talking to my family." (If patient reports no symptoms, ask if they know/remember stroke symptoms.)
3. What risk factors apply to you? What makes it more likely that you will have a stroke?	Individualized response: "High BP, Cholesterol, Diabetes, Smoking, Excessive Alcohol." (If patient reports no risk factors, ask if they know/remember stroke risk factors.)
4. What can you do to prevent having a stroke?	There are many different ways to prevent stroke including: Medication, Lifestyle changes, Blood sugar control, Smoking cessation, Diet, Exercise, Alcohol intake.
5. Why is it important to call 911 if you think you are having a stroke?	"Time is Brain!" The faster you call, the faster you can get treatment. It's important to call 911 as soon as you have a stroke.
6. Why is it important to take your medications the way the doctor has told you?	Individualized response: "Depending on your risk factors, various medications aid in keeping your blood pressure, cholesterol, and blood sugar under control. It's important to take your medications as directed to keep your stroke risk as low as possible." (If patient reports no medications, ask if they know/remember stroke medications.)
7. How does your medication affect your risk of having a stroke?	Individualized response: "Your medication helps keep your blood pressure, cholesterol, and blood sugar under control. It's important to take your medications as directed to keep your stroke risk as low as possible." (If patient reports no medications, ask if they know/remember stroke medications.)



METHODS

- Transition Coaches were utilized as nurse educators and unit resources for process implementation while working to improve patient education delivery and resources.
- Observed discharge teaching and provided coaching to nurses on using teach-back method.
- Developed patient education tools including teach back guides for high risk diseases and medications.
- Implemented a daily interdisciplinary rounding process which included discussion of patient education needs and health literacy status.
- Risk for Readmission assessment tool was adapted from Project BOOST and integrated into daily rounds, including a health literacy screener question.

CONCLUSION

- Utilization of teach back during discharge increased significantly.
 - Gaps in the discharge process were identified and are continually being addressed.
 - The health literacy screening tool was incorporated into the Patient Admission Database in Epic EMR, which has increased awareness of the need for providing better health literacy resources.
 - Despite implementation of readmission risk assessment and interventions, there was no change in readmission rate on pilot units
- IMPLICATIONS FOR PRACTICE:** Every nurse should adopt Teach Back as standard practice for assessing patient learning. Nurses need to understand low health literacy in order to effectively educate their patients.

REFERENCES

- Project Boost, Society of Hospital Medicine, 2014. <http://www.hospitalmedicine.org/BOOST>
- Dedhia P., Kravat S. & Bulger J. et al. A Quality Improvement Intervention to Facilitate the Transition of Older Adults from Three Hospitals Back to Their Homes *Journal of the American Geriatrics Society.* 2009; 57 (9): 1540-6.
- Farrell, MH., Kuruvilla P. & Eskra, KL. et al. A method to quantify and compare clinician assessment of patient understanding. *Patient Education and Counseling.* 2009; 77: 128-135.
- Kessels RP. Patients' memory for medical information. *J R Soc Med.* May 2003; 96(5):219-22.