

Background

- Heart failure patient's health outcomes are highly correlated with patient understanding of their disease process and management
- Effective communication promotes greater satisfaction and helps ensure better adherence to treatment plans
- Teach back is one of the top 50 essential "safe practices" to improve health care outcomes appointed by the National Quality Forum
- With teach back health care providers are able to identify patient-specific barriers to learning, which in turn can assist the provider in choosing the most effective route of education for optimal patient understanding.

Practice Change

Increase registered nurse's (RN's) knowledge of the usefulness of teach back along with increasing this practice in RN's daily clinical practice.

Methods

- Administered anonymous paper presurveys to RN's
- Presented educational content to RN's during July staff meeting
- Anonymous post-surveys were administered directly post educational session



Information

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Teach-Back: Will Education of a Teach-Back Tool to Registered Nurses Increase Their Willingness to Implement the Tool?

Eastern Maine Medical Center

Results Pre-Survey				
	Disagree	Neutra I	Agree	Strongly Agree
on provided with the teach-back tool is important tient to learn before discharge.	0%	0%	28%	72%
teach-back tool will lower CHF readmissions.	14%	14%	0%	72%
-back method is something you believe could be discussion would recommend to another RN.	14%	0%	14%	72%
vill be able to learn and retain information easily nethod.	14%	0%	14%	72%
back method is easy to understand and will be teach new RNs about as well as patients.	0%	0%	14%	86%

Post-Survey

	Strongly Agree
on provided with the teach-back tool is important for the patient to learn before	100%
e teach-back tool will lower CHF readmissions.	100%
h-back method is something you believe could be useful and would recommend or RN.	100%
will be able to learn and retain information easily with this method.	100%
h-back method is easy to understand and will be simple to teach new RNs about s patients.	100%



Summary/Discussion

- Our work was but the first step, in order to help have this teach-back tool be successfully implemented we need to next:
- Implement the tool with CHF patients.
- Follow and track these patients that had 30 day readmissions vs the patients who didn't receive education with the tool.
- Evaluate providers likelihood of implementing and being an integral part of using the tool
- Some feedback we heard during our education for the staff was:
 - "I really like how it shows every staff member, especially ones who are just meeting the patient, where the patient is in his/her education."
 - "I think it's a great tool for the doctors to use so that they can focus on what the patient is having difficulty learning."

Conclusion

- CHF readmission rates at EMMC can be lowered with more adequate education that targets areas of the disease patients don't understand.
- Every nurse surveyed on PP6 strongly supports the new teach-back tool and would be willing to assist in it's implementation.

References

Piette, J., Schillinger, D., Grumbach, K., Wang, F., Wilson, C., Daher, C.,...Castro, C. (n.d.). Closing the loop: physician communication with diabetic patients who have low health literacy [Abstract]. Arch.Intern.Med, 83-90. Retrieved January 13, 2013 National Quality Forum. (2009, March). Health literacy: A linchpin in achieving national goals for health and healthcare (Issue Brief No. 13). Washington, DC: National Quality Forum