

Reducing Hospital Readmission in a Skilled Nursing Facility: Utilizing the INTERACT Quality

Improvement Program Tools

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Abstract

Background: Intervention to Reduce Acute Care Transfers (INTERACT) quality improvement program (QIP) tools are recommended evidence-based practice (EBP) in Skilled Nursing Facility (SNF) to reduce unnecessary hospital readmission.

Objective: To reduce the rate of preventable hospital readmissions within 30 days after hospital discharge in SNF through implementation of INTERACT QIP

Methodology: Nursing staff (RNs, LPNs, and CNAs) were trained on application of core INTERACT QIP tools (advance care planning, communication, acute transfer review). These tools were applied mostly during admission, management of change of conditions and transfer of residents integrating into the day-to-day nursing practice. A retrospective chart review on three core tools (n=47) were performed to evaluate the rate of staff compliance with implementation of INTERACT QIP tools. Finally, a two tailed Fisher exact test of independence were used to compare the pre & post intervention rates.

Results: The mean for fully compliant charts were only 17(29.8 %); 95% CI [0.1953-0.4266]. However, a two tailed Fisher exact test of independence showed a difference between the pre and postintervention hospital readmission rates, P=0.003: 95% CI.

Conclusion: Despite the relationship between pre and post intervention rates, no evidence showed effective utilization of INTERACT QIP tools and its subsequent effect on readmission rates. Identifying and controlling situational factors that potentially affect staff engagement and leadership support is a key measure to succeed in quality improvement efforts in SNF.