

Heart Failure Readmissions

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Abstract

Background: Heart failure (HF) is a chronic and debilitating disease affecting nearly 6.6 million people, and it has the highest number of hospitalizations in the United States for individuals over the age of 65 years. Cardiac rehabilitation is a well-documented evidence-based intervention for patients with chronic heart diseases. Enrollment into a cardiac rehabilitation would reinforce teaching about heart failure, inclusive of medication reconciliation, symptom management, and all other components to improve quality of life. The evidence to be duplicated is that enrollment in a cardiac rehabilitation can prevent readmissions by enhancing the patient/family's retention and understanding of heart failure instructions that include symptom management, diet, exercise and medication reconciliation, resulting in fewer hospital readmissions leading to better health outcomes for patients; however, cardiac rehabilitations is grossly underutilized in primary care. Providers face many barriers which cause this gap between the evidence and clinical practice, such as a lack of understanding of the cardiac rehabilitation programs and the process for referral.

Conclusion: This DNP project indicated that there was need for education regarding the importance of CR discussions and referral to improve patient outcomes. Participants' knowledge and understanding of CR was associated with increase in CR discussions and referrals.

Comparison of the pre and post-educational session was done. The pre-intervention questionnaire showed an average mean response of 2.6 and a post-intervention questionnaire showed an average mean response of 4.7.

Keywords: Cardiac rehabilitation, provider education, heart failure and quality improvement.