

Implementing a Heart Failure Patient Educational Program to Improve Self-Care

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NR 210.899 Project Evaluation

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Abstract

Background: Heart failure practice guidelines recommend the self-care behaviors of daily weights and symptom monitoring; however, they are inconsistently followed by patients. Inadequate self-care management contributes to preventable hospital readmissions and worsened quality of life.

Purpose: Evaluate the effectiveness of an interactive toolkit to improve patient-reported self-care and confidence and increase engagement in daily weight tracking, symptom monitoring, and timely medical follow-up on an inpatient cardiovascular unit.

Methods: A pretest, posttest study design was used. A purposive sample of ten participants was recruited from a cardiovascular unit at an East Coast hospital. Participants completed the Self-Care of Health Failure Index survey at enrollment, hospital discharge, and the initial outpatient follow-up appointment. Toolkit completion data were collected to address the feasibility and acceptability of the toolkit for patients and staff.

Results: There was a statistically significant increase in self-care scores from enrollment to discharge (maintenance 45 (10.6), $p < 0.005$; symptom perception 6.5 (11.4), $p < 0.030$; management 12.1 (18.9), $p < 0.037$). There was no significant change in confidence. The majority of toolkits were 100% complete.

Implications: Interactive toolkits are promising to engage patients in the self-care process and improve patient-reported self-care. Inpatient staff can feasibly implement this intervention.

Keywords: Heart failure, self-care, self-efficacy, symptoms, patient education, toolkits