

Abstract

Background: Developing patient self-efficacy is an essential element of caring for patients with chronic conditions. Adult patients admitted to the hospital with a diagnosis of heart failure often have low levels of health literacy, which makes it difficult to effectively manage their diagnosis upon discharge. Poor understanding and management of heart failure can lead to disease progression, rehospitalization, and death, all of which have significant impacts at both the individual and system level.

Methods: A pre/post interventional design was used to conduct this quality improvement project. In order to improve patient self-efficacy and decrease 30-day readmission rates of adults who were hospitalized with heart failure, a Heart Failure Survival Skills Tracking Folder with tailored patient education was implemented in an outpatient clinic, where patients are seen once weekly for four weeks following discharge. Three outcomes were measured: (1) folder use, (2) change in self-confidence in ability to care for themselves, and (3) 30-day readmission rates before and after the intervention.

Results: A total of 6 adults, discharged from the hospital with a diagnosis of HF, were enrolled. Low folder use was observed. However, there was a mean 5-point improvement in self-confidence scores from pre-test to post-test. Post-intervention readmission data showed that one participant (16.7%) was readmitted within 30 days, lower than the hospital-wide pre-intervention rate of 20.8%.

Conclusions: Despite the small sample size, this project demonstrated a positive impact on patient self-efficacy in heart failure and serves as good groundwork for future iterations and expansion of this intervention across the health system. Through standardization of the educational messaging, with education sessions tailored to the needs of the individual, patients with HF can be better equipped to care for themselves and prevent adverse outcomes associated with this diagnosis.