

### Abstract

**Background:** Readmission after an initial hospital discharge has become one of the significant threats to our country's healthcare system. Each year more than 1.7 million adults develop sepsis in the united states, more than 1.4 million survive sepsis, and more than a third of the survivors require 30- day readmission. Despite sepsis readmissions being potentially preventable, and survivorship education having an impact on reducing readmissions, no standardized educational intervention on sepsis survivorship currently exists in the institution. The purpose of this quality improvement project was to decrease the 30-day sepsis readmission rate of a single adult inpatient acute care medical surgical unit by increasing nurses' knowledge on the challenges of sepsis survivorship. **Methods:** The project utilized a pre-posttest design comparing 30-day sepsis readmission rate of the unit and nurses' knowledge on sepsis survivorship at baseline and immediately after the educational intervention was given. The intervention was an evidence based online educational module with a prerecorded power point presentation on sepsis survivorship lasting for 50 minutes. **Results:** Results of the final sample (n=21) showed a statistically significant improvement in nurses' knowledge on sepsis survivorship (p=0.000). The effect of the educational intervention on 30- day sepsis readmission rate of the unit is inconclusive given the effect of the pandemic on readmission rate. **Implications:** The study results demonstrated the effectiveness of the educational intervention in improving nurses' knowledge on the challenges of sepsis survivorship. Even-though the effect of the intervention on 30- day sepsis readmission rate is inconclusive, nurses being the primary health care members who educate sepsis survivors prior to discharge, improvement in their knowledge on sepsis survivorship has clinical significance in reducing readmission. Additional studies are needed

over a prolonged time span to determine statistical significance of the project's effect on 30-day sepsis readmission rate.