

Preoperative Ostomy Teaching in the Pediatric Population with Health Literacy Universal

Precautions

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Abstract

Background and Purpose: Ostomy education has traditionally been performed postoperatively, but common postoperative complications such as pain, slow return of bowel function, and wound infections makes teaching in the postoperative phase suboptimal. Health literacy is the ability of individuals to find, understand, and use information and services to make health decisions for themselves and others, and low health literacy is experienced by 1 in 4 parents. The purpose of this quality improvement project was to implement preoperative ostomy education with health literacy universal precautions in the pediatric population and evaluate the impact on patient outcomes.

Methods: This integrated nursing/public health quality improvement project utilized a preintervention postintervention study design to evaluate the impact of preoperative ostomy teaching with health literacy universal precautions on a) overall length of stay, b) caregiver outpatient calls and messages, and c) provider success in meeting caregiver health literacy levels. Caregivers were administered the Consumer Assessment of Healthcare Providers and Systems Item Set for Addressing Health Literacy for feedback on provider communication and educational materials.

Results: A total of 8 participants who met inclusion criteria were included in the project. Length of stay and outpatient calls and messages were tracked for 30 days post-discharge. There were no statistically significant improvements in length of stay or outpatient calls and messages. Clinical significance was seen in patient ostomy self-management and efficacy. Six caregivers completed the postintervention survey. Results were overwhelmingly positive, but suggest there is improvement to be made in the language and educational materials used in teaching sessions.

Conclusion: Findings suggest that preoperative ostomy teaching with health literacy universal precautions may have a clinically significant impact on ostomy management, but further research is warranted to reduce length of stay and outpatient needs.

Keywords: preoperative ostomy teaching, health literacy, length of stay, patient education, health equity