Purpose

There is an immediate need to establish a comprehensive continuum of care to address the various needs of stroke survivors, caregivers and society in secondary prevention.

Introduction

Stroke is a major global health concern with 77 million deaths estimated to occur by 2030. The aim of this project is to enhance patient communication at discharge, supporting care transitions into the community and providing secondary stroke prevention intervention.

Objectives

1. Enhance patient communication and education for stroke survivors and family members
2. Empower patients and caregivers to manage stroke recovery after hospital discharge
3. Improve care plan compliance and patient accountability
4. Reduce readmissions

Method

In April 2018, the hospital implemented Vocera Care Inform technology to audio record care plans for patients with acute ischemic stroke. Prior to discharge, these patients met with nurse practitioners, who audio recorded personalized instructions and education. Using teach-back, nurse practitioners educated patients and family members about the discharge care plan. Nurse practitioners also created an electronic library with specific stroke care resources for each patient and their caregivers about the discharge care plan. Nurse practitioners also created an electronic library with specific stroke care resources for each patient and their caregivers. These educational resources, as well as the audio recorded discharge instructions, were securely and easily accessible to hear, read, or watch via telephone or computer at any time after discharge.

Impact

Before

During our 7-day post discharge follow-up calls in 2017, we discovered:
- Follow up with Primary Care Physician rates were low
- Prescriptions were not filled
- Patients were unable to recite signs and symptoms of stroke
- Denial was high

After

After implementing the Vocera Care Inform solution, using teach back and recorded instructions:
- 7% more patients were compliant with medication
- 6% more patient could recite signs and symptoms of stroke
- 3% more patient with PMD made follow up appointments
- 2% more patients could recite personal risk factors

Results

Between April 2018 and Dec. 2018, 116 discharge plans were prepared and audio recorded by nurse practitioners at the bedside with patients and families using teach-back.

- 25% of the patients who received the information accessed it
- 60% of accessed instructions were accessed more than once
- 50% decrease in readmissions

12-Month Trend: Decreasing Readmissions

Conclusion

Poor patient communication can negatively impact transitions into community-based care environments, resulting in poor compliance, limited recovery, and potential re-admission. Access to recorded discharge instruction, educational resources, and continued support at home can positively impact recovery and reduce risk for re-admission.

*There are no relevant conflicts of interests to disclose.

References