

A Quality Improvement Project to Improve Care Coordination and Reduce Hospital Readmission in Patients with Chronic Illnesses

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Introduction: Reducing readmission rate is an important way to improve quality and lower health care cost. In 2015, the Centers for Medicare & Medicaid Services reported a high national hospital all-cause readmission rate at 15.2 %. At Wesley Homes, this rate was reportedly higher at 16% last year (N=1200). Home health care is an essential platform that can be used to further decrease readmission rate and there is a critical need for formal evaluation.

Purpose: To improve care coordination, a patient centered focus, and prevent hospital readmission within 30 days post-discharge in patients with multiple chronic conditions. In addition, to train home health team members on motivational interviewing (MI), which is a type of counseling that helps clients explore and resolve ambivalence.

Approach: Patients were contacted within 24 hours post-hospital discharge and admitted to home health services. An existing hospitalization risk assessment tool was completed on all patients to identify patients at risk for re-hospitalization. The score was used to guide planning care and timely interventions. Nineteen home health team members participated in an evidence-based training module on MI.

Results: The all-cause readmission rate after implementation so far was 9% (N=89). Qualitative observations included a shift in a cultural change to adopting an evidence-based best practice approach that allowed patients to participate in planning their care through MI. Significance and Implications: These results have led to improved process

and outcome of patient care, increased patient satisfaction, and contributed to ongoing culture of staff education and use of current evidence-based practice.