DISCHARGE PROGRAMS TO DECREASE REHOSPITALIZATION

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INTRODUCTION

- ❖Rehospitalizations have an incredibly high cost
- ❖76% of readmissions are avoidable
- ❖Affordable Care Act and the Hospital Readmissions Reduction Program
- ❖Nurses can be leaders

PURPOSE OF STUDY

- 1/5 of hospitalizations are complicated by a post-discharge event
- Reengineered Discharge program (RED) intervention
- Randomized controlled study

HYPOTHESIS

Objective of Study – "To test the effects of an intervention designed to minimize hospital utilization after discharge" (Jack et al., 2009, pg. 178)

SAMPLING METHOD

- 749 members in a two group, randomized controlled trial
- Random placement into either usual care group and intervention group
  - Usual care group: 368 participants
  - Intervention group: 370 participants
- Basis of elimination
- Limitations

STATISTICAL ANALYSIS

- Data collection from Boston Medical Center in Boston, Massachusetts
- 750 participants for incidence rate reduction of 0.25 visit per patient per month
- Power of 80% with alpha level=0.05
- Participants followed for 30 days

STATISTICAL ANALYSIS CONTINUED

- Poisson test and proportions test
- Excluded outliers
- Event occurrences included Emergency Department visits and readmissions
- Independent variable: RED intervention
- Dependent variable: Utilization of hospital services

INTERVENTIONS

Intervention group discharged with up to four possible interventions: primary care appointment, after-hospital care plan (AHCP), medication reconciliation, and discharge summary

- 94% had a primary care appointment set up
- 83% given AHCP
- 53% had medication reconciliation
- 91% were given a discharge summary

RESULTS

Intervention Group

56 participants (15.1%) utilized hospital services once

24 participants (6.5%) used hospital services multiple times

Control Group

69 participants (18.8%) used hospital services once

30 participants (8.1%) used services multiple times

NURSING IMPACT

- Nurses were the leaders and became a discharge advocate
- Teamwork
- Current research
- Education is key component

CONCLUSION

Hypothesis: The number of participants discharged from the hospital who received education and follow-up through the RED program utilized hospital services that led to a readmission will have less readmissions than those participants who received the usual care

Ho-The intervention group had the same or a greater number of readmissions as the participants in the usual group

Ha-The intervention group had less readmissions than those in the usual group

Reject Ho

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