Statement of the Problem

A nurse driven heart failure (HF) program was successful in decreasing hospital readmissions within 30 days. Identified opportunities for further reductions included an individualized approach with medication management.

Purpose

Evaluate the effectiveness of a multidisciplinary team with a primary focus by a specialized HF pharmacist in reducing hospital readmissions within 30 days.

Significance

Adverse outcomes of HF includes a 20% readmission rate within 30 days and a 50% readmission rate within six months, with higher rates in older adults and minorities. A significant cause of HF readmission is use and misuse of HF medication, with 46% to 64% readmission rates.

Methods

Design
Observational Study
Sample and Setting
Patients admitted to an acute care hospital with a diagnosis of HF.

Intervention
HF pharmacist will deliver specialized counseling and intervention on HF medications, reconciled medications, drug-drug interactions, and dietary management related to fluids and medications. Follow up phone call to review medication adherence, side effects, confirm follow-up cardiology appointment, and answer any questions.

Tools

- Simplified Daily Symptom Log
- HF Medication Information
- Stop Light Tool
- Coupon for Cardiac Rehab
- Daily Teaching Algorithm
- HF Teaching Booklet
- Med Management Guide
- Dietary Guides

Results

In a six month time period, pharmacist intervention group 30 day all cause readmission rates were 7.58% lower than hospital 30 day all cause readmission rates. Three of the six months studied, resulted in zero percent.

Conclusion

A collaborative approach with nursing and a HF pharmacist can significantly reduce readmission rates, provide patient specific counseling, and promote patient independence in their disease management.

References


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