Impact of Discharge Teaching on the Readmission Rates of Pediatric Patients With Asthma
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Introduction

- There is a lack of education amongst healthcare professionals about asthma, which facilitates a lack of understanding amongst the family patient population upon discharge
- A need for increased discharge teaching for pediatric asthma patients that focuses primarily on risk factors, causes of asthma exacerbation, and common triggers to prevent readmission to the hospital

PICO: In nurses preparing to discharge pediatric asthmatic patients, does providing additional education about common asthma triggers and readmission factors increase the nurses' knowledge about these triggers and factors?

Appendix A:

The trifold utilized in the presentation

Lessons Learned

Results:

<table>
<thead>
<tr>
<th>Pre-test</th>
<th>Post-test</th>
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<td>Out of 15 nurses, the median score was 66% prior to education.</td>
<td>Out of 15 nurses, the median score was 100% post education.</td>
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Average Recall Testing Percentage for Pediatric Nurses

Recommendations

- Nurses should be provided frequent education and routine evaluations on their understanding of the common readmission causes to prevent misinformation/miscommunication during discharge.
- Additional studies should be conducted
  - Although we addressed a small pool of nurses, there should be a study that focuses on majority of nurses at the facility.
  - There should be a study that evaluates the effectiveness during discharge and the readmission rates

Education Plan

Facility: Cincinnati Children's Hospital Medical Center- Liberty Campus
Presented to: Registered Nurses on LA4-2
Purpose: To educate the nurses on common asthma triggers, risk factors for readmission, and how to avoid triggers. Giving the nurses this education allows them to have the knowledge to help reinforce patient/parent teaching for new onset asthma patients.

Learning Objectives:
1. Attendees will be able to list 5 common asthma triggers.
2. Attendees will be able to identify 3 most common reasons for readmission of asthma patients.
3. Attendees will be able to write the steps in treating an acute asthma attack.

Implementation

Target audience: Location:
- 3/25/2021 at 0900
- Registered Pediatric Nurses
- LA4-2 Nurses Station

Preparation:
- Fifteen-minute presentation using a trifold with the evidence-based asthma facts
- Questions utilized during teaching are as follows:
  1. List 5 common asthma triggers.
  2. Fill in the blank with the three most common reasons for readmission among asthmatic patients.
  3. List the steps that a parent should take if their child has an acute asthma attack.
- 15 registered nurses in a 30-minute time period

References

Current Evidence

We included 16 references in our research.

- The hospital-wide standardization of a pediatric asthma CPG across hospital units can safely reduce overall hospital resource intensity by reducing LOS, admissions, ICU services, and charges” (Johnson et al., 2017)
- “Asthma-related emergency revisit is common after hospitalization, with more than 40% of children returning within 12 months.” (Johnson et al., 2017)
- “The only single-component significantly associated with a lower rate of readmission at 3 months was having comprehensive content of education.” (Parik et al., 2018)

Databases: CINAHL, PubMed, and UC Libraries
Keywords: Pediatric, Readmissions, asthma, Discharge, Exacerbation
Article year range: 2014-2020

References