

Medication Education on a Primary Stroke Unit

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Purpose of Project

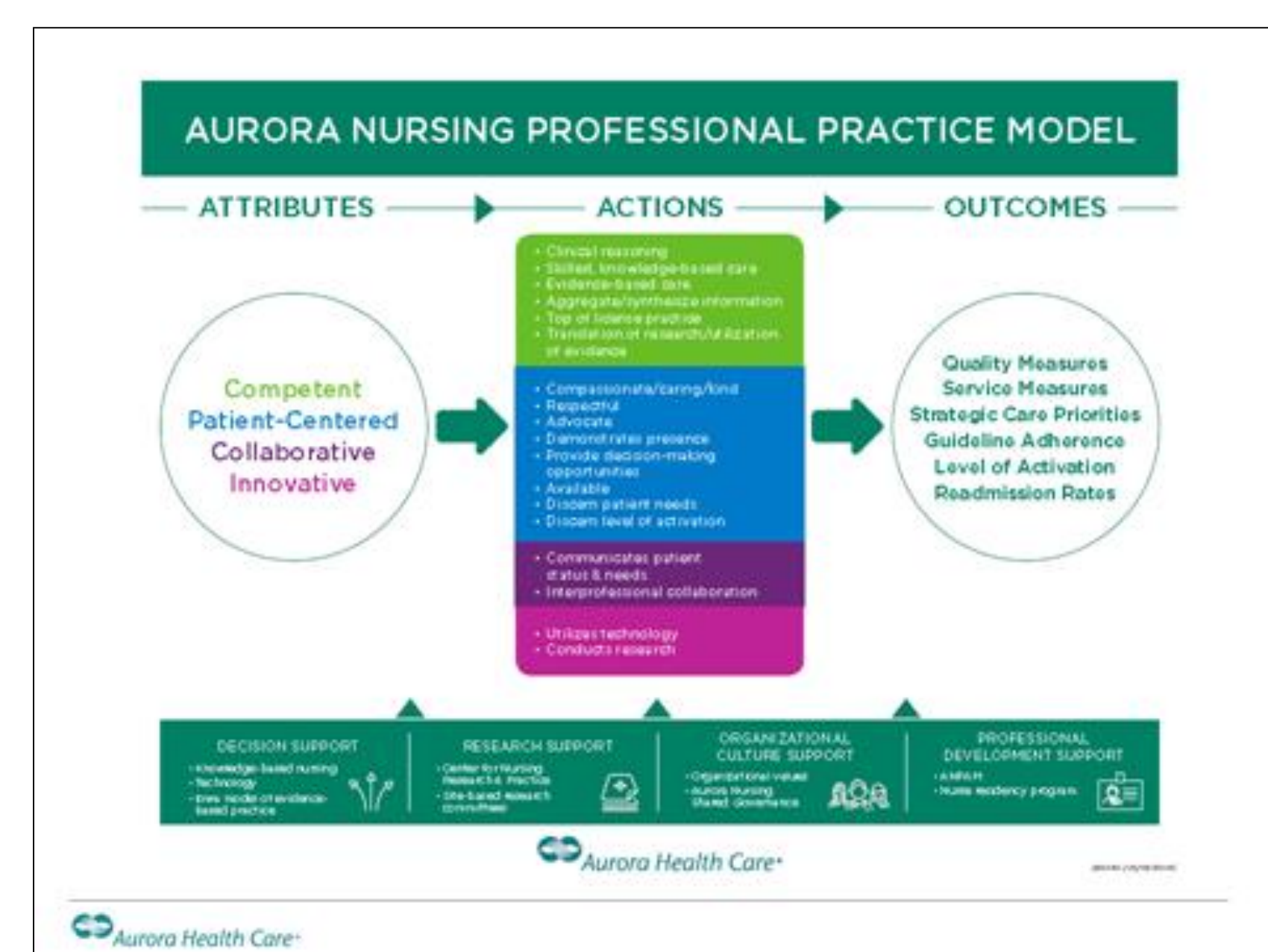
Develop a medication teaching handout tailored to the specific needs of stroke patients with low health literacy to

- Improve HCAHPS scores for medication communication
- Facilitating a smoother transition to home.

Background/Significance

- Low HCAHPS scores for medication communication identified as a chronic concern
- High proportion of patients from vulnerable populations that have low health literacy¹
- Current teaching tool used with stroke patients with newly prescribed medications was potentially confusing 2-3
- High probability that unit population misunderstands the directions at discharge 1

Conceptual Model



Sample and setting

- 14-bed primary stroke unit at a 228-bed critical access community hospital in the Midwestern United States
- 15 staff registered nurses participated via online surveys assessing perceptions of stroke medication education.

Methods/application to practice

- Assessed current stroke education documents, staff nurse perceptions of medication education, and HCAHPS scores for medication communication
- Collaborated with site stroke coordinator, pharmacist, shared governance council, and nurse educator to create handout
- Implemented tool from April through September 2018
- Surveyed of staff nurses in June
- Reinforced use of tool with staff nurses, collaborated with nurse educator and health unit coordinators to ensure availability of tool
- Re-evaluated staff perceptions of and implementation of teaching tool and assessed HCAHPS scores post-implementation

Findings/Results/Outcomes

Nursing Perceptions

Pre-implementation: N=12/15 nurses responded, with most (76.9%) reporting inadequate time to teach stroke patients about medications

Midpoint: 100% of nurses responding (N = 5/15) reported no use of educational tool

Final: N = 7/14 nurses completed the survey, and 100% of respondents reported using the teaching tool for at least some admissions

HCAHPS scores- Medication Communication

January-March 2018 rank = 55

January through August 2018 rank = 68

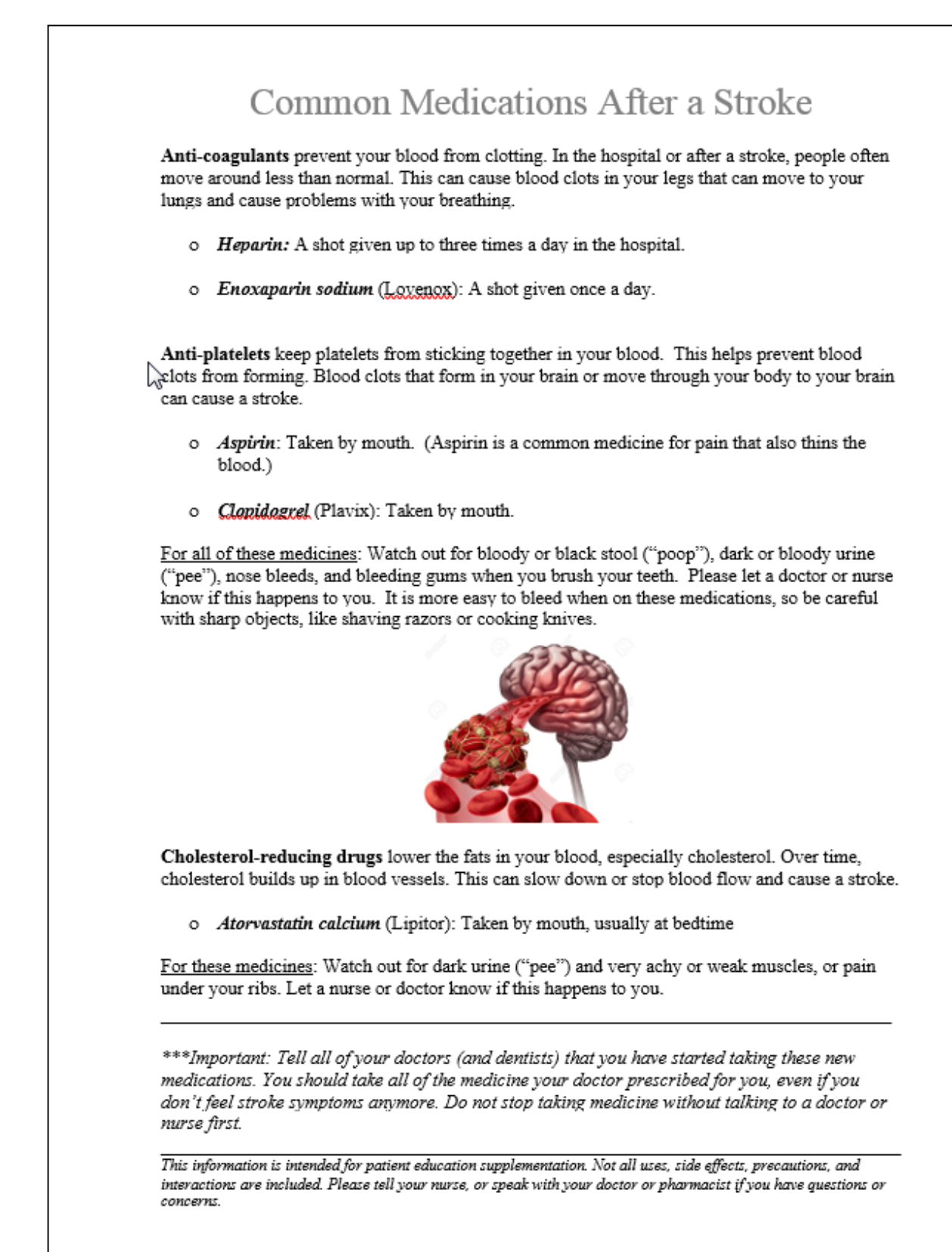
2018 year-end rank = 80

Implications

- Implementation of teaching tool tailored to vulnerable populations potentially resulted in greater patient satisfaction regarding medication communication.
- Challenges with patient teaching due to nursing work load and time constraints.
- Lack of complete staff engagement in responding to surveys and implementing new teaching tool
- Intermittent clerical staffing decreased the consistent availability of teaching tool

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References

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2. Ross, S. Y., Roberts, S., Taggart, H., Patronas, C. (2017). Stroke transitions of care. *MEDSURG Nursing*, 26(2), 119-123.
3. Tamura-Lis, W. Teach-back for quality education and patient safety. *Urologic Nursing*, 33(6), 267-271.