

Individualized Teaching Needs Assessment Leads to Positive Outcomes

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Background

Thomas Jefferson University Hospitals is located in Center City Philadelphia. The Maternal Infant Unit is an 18-bed postpartum unit with a central nursery area for newborn admissions. The nurses provide care for the mother-infant dyad. Our patients come from diverse ethnic, racial, cultural, and socio-economic backgrounds. The typical length of stay for mothers and their babies is determined by the type of delivery the mother has had: a vaginal delivery is given a 48-hour hospital stay and an uncomplicated cesarean section delivery is permitted up to a 4-day hospitalization.

Everyday we face the challenge of preparing our patients for discharge. With decreasing length of stay for postpartum patients and increasing regulatory requirements for newborn discharge, a redesign of our teaching methods became our focus.

A committee of staff nurses explored strategies to meet the expectations of our patients and the organization. The group reviewed present practice, regulatory requirements, data from the NDNQI specific to patient teaching, and standards of care.



What We Found

- Present practice: patients are taught everything listed on the patient discharge sheet including postpartum care and baby care. Nurses teach patients using the guidelines found in the TJUH Maternal Infant Unit Teaching Record Manual (Hedges, Mac Millan, Puleo, & Watt-Cyrus, 2006).
- Regulatory requirements: Shaken Baby Education and Car Seat Safety
- The amount of instruction required by the nurses is tremendous, sometimes repetitive, and not tailored to the patient's learning needs.
- NDNQI: results showed that nurses felt that they did not have enough time to teach everything and there was inadequate time for discharge teaching and time for documentation.

2008 NDNQI Nursing Satisfaction Data

	12 Pavilion	OB NDNQI	TJUH	NDNQI
Enough time with patient	66%	70%	63%	64%
Enough time to document	52%	73%	68%	70%
Adequate discharge preparation	100%	92%	83%	88%

2008 Patient Satisfaction (Press Ganey)

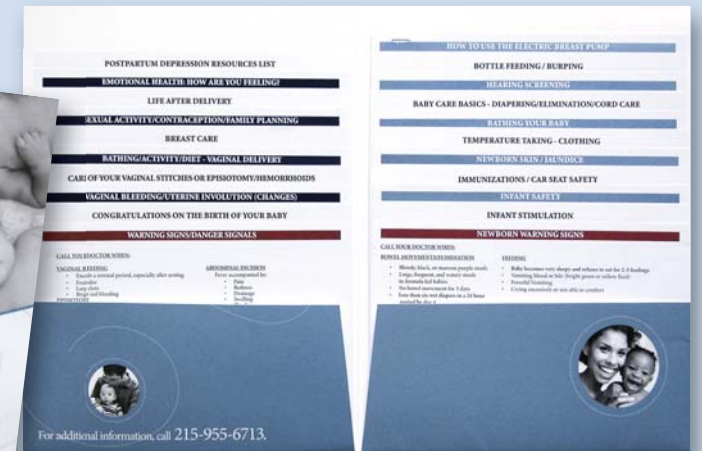
	12 Pavilion
Extent to which you felt ready to be discharged	90%
Instructions given about how to care for yourself at home	87.5%
Staff effort to include you in decisions about your treatment	90%
Instructions you received regarding caring for your baby	87.5%

Our Goals

- Streamline documentation
- Improve the quality of our education
- Decrease the time to discharge a patient
- Individualize teaching for the patient

What We Did

- A patient learning needs assessment was developed to include postpartum and newborn care teaching.
- On admission the patient is given a self-directed needs assessment to identify what they already know and what additional teaching they may need.
- The assessment is formatted as a teaching record for both the patient and nursing staff to document items to teach.
- An educational packet for the patient was created and organized to correspond with the line items on the teaching record.
- The educational packet is designed so that only the topics indicated are taught by the nurse.
- The packet is taken home by the patient to serve as a resource on all of the topics traditionally taught in the postpartum setting.
- To implement the new plan, all staff received education on the teaching tool and documentation.



What We Learned

- Change based on evidence takes time.
- New information generated by the staff who care for patients on a daily basis promotes ownership. The process makes it easier for the entire staff to embrace change.
- Research can be generated by staff nurses at the bedside.

Ongoing Research

- Outcomes from our new teaching method will be evaluated using questions from Press Ganey and from the 2009 NDNQI Survey.
- Prior to inservicing our staff on the new patient teaching method, we surveyed our patients about their satisfaction with patient teaching. The survey consisted of questions from Press Ganey that are specific to patient teaching and discharge teaching.
- After our new teaching method has been in place for two months and the new practice is routine, the patients will be surveyed again.
- We will compare the level of patient satisfaction between the two groups.
- The NDNQI results for nursing satisfaction from 2008 will be compared to the results from 2009 for teaching time, preparation for discharge and time for documentation.

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