Purpose
The purpose of this evidence-based project is to determine if using the “teach-back” method with adults aged 65 years and older during discharge will improve their comprehension of discharge instructions.

Background
• Discharging patients is a “high-risk” process (Brach et al., 2012) that can have a significant impact on the patient’s recovery after hospitalization.
• Health literacy is the degree to which patients are able to comprehend and process basic health information (US Department of Health and Human Services, 2000).
• The geriatric population has the lowest health literacy among any other age group (Kutner et al., 2006).
• Patients with low health literacy are at risk for poor health outcomes, higher rates of hospitalization and readmission, less frequent use of preventive services, and higher healthcare costs (Peter et al., 2015; Sudore & Schillinger, 2009).
• The teach-back method is an interactive process in which patients demonstrate or restate what they were taught by their providers (White et al., 2013).

The Teach-Back Method

Compared to those who received standard teaching, patients who engaged in teach-back...
- Experienced improved health outcomes (Machtinger et al., 2007)
- Demonstrated greater understanding of their medical condition (Griffey et al., 2015; White et al., 2013)
- Showed an improved understanding of how to properly use medical equipment (Dantic, 2014)
- Had lower readmission rates and those who were readmitted had decreased length of stay (Peter et al., 2015)
- Were more likely to adhere to their medication regimen (Negarandeh et al., 2013)

Implementation
Short training sessions on the implementation of the teach-back method have been used at other hospitals (Kornburger et al., 2013) and could be reproduced at MedStar Georgetown University Hospital. In order to evaluate the effectiveness of teach-back, nurses can assess the patient’s ability to convey accurate information at the time of discharge and in follow-up phone calls.

Some challenges to implementing the teach-back method with older adults include:
- Time restrictions - Nurses may find it difficult to allocate time during their busy shifts to implement teach-back
- Patient readiness and motivation to learn
- Patients with dementia or cognitive impairments

Conclusion
Teach-back is an effective and cost-efficient practice that has been shown to improve patients’ overall health outcomes. Implementing teach-back would likely improve geriatric patients’ understanding of their discharge instructions and their adherence to the teaching once they leave the hospital.
References


