

Rehabilitation Nursing Foundation Abstract Form

INV #1102

Discharge Preparedness Instruments and Post-Discharge Outcomes on Two Inpatient Rehabilitation Units

Inpatient rehabilitation programs (IRPs) provide services to a variety of patient populations. These programs are sandwiched between acute care and home care and they have the potential to be a significant player in the health care continuum. The prospect of bundling of reimbursement dollars puts the IRP in an influential position to maximize healthcare dollars. Nurses, together with other members of the rehabilitation team, have the opportunity to use the increased length of stay to positively impact the patient's recovery and decrease readmissions and emergency room visits. Readiness for discharge has been described as a perception of being prepared or not prepared for discharge from the hospital (Fenwick, 1979). At this time there is no valid and reliable tool to evaluate readiness for discharge from IRPs. This study is a replication of a study done by Weiss and colleagues (2007) which will examine predictors and outcomes of readiness for discharge among patients discharged from inpatient rehabilitation programs. The purpose of this study is to validate the Quality of Discharge Teaching Scale (QDTS) and the Readiness for Hospital Discharge Scale (RHDS) in the inpatient rehabilitation setting, and to examine the relationships between readiness for hospital discharge with post discharge utilization (ED visits and readmissions). Additionally, validation of the RHDS with caregivers, RNs, and therapists will occur.

Data will be collected from the electronic health record, hospital database, responses from Press Ganey Satisfaction Survey, post discharge phone calls, responses on the QDTS and RHDS.

Data analysis will include regression analysis of QDS and RHDS scores on post-discharge utilization rates. T-tests will be used to determine differences between patients with and without post-discharge utilization. Descriptive statistics will be provided. Psychometric analysis of the patient, caregiver, RN, and therapist versions of the RHDS will be conducted.