



Nurses' Attitudes and Education Surrounding Patient Education

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Introduction

Centers for Medicare and Medicaid Services (CMS) developed a tool, the Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS), which measures the patient's perception of their hospital care including their readiness to be discharged from the hospital. Patient readiness to be discharged from the hospital requires that the patient be well informed and educated about how to care for themselves after leaving the hospital and that requires the nurse to be engaged in patient education patients.

Objective

The purpose of this study was to examine nurses' attitudes toward patient education and describe the educational preparation of nurses in communicating and educating patients.

Methods

- Descriptive survey via Survey Monkey open for two-weeks
- Used a pre-established 87-item instrument (Jones, 2010).
 - (1) demographics,
 - (2) attitudes toward patient education,
 - (3) completion of certain aspects of patient education, and
 - (4) nurses' comfort level with teaching certain subject matter .
- Five-point Likert scale ranging from strongly agree to strongly disagree or always to N/A (an option for non-direct care nurses)

Participants

- Nurses at Schneck Medical Center
- RN-BSN Students at IUPUC
- Traditional BSN Senior Nursing Students at IUPUC

Results

Registered Nurses who completed survey (N=96)

Results presented are **only** for direct care RNs (N = 85).

All data analyzed using SPSS 20.0

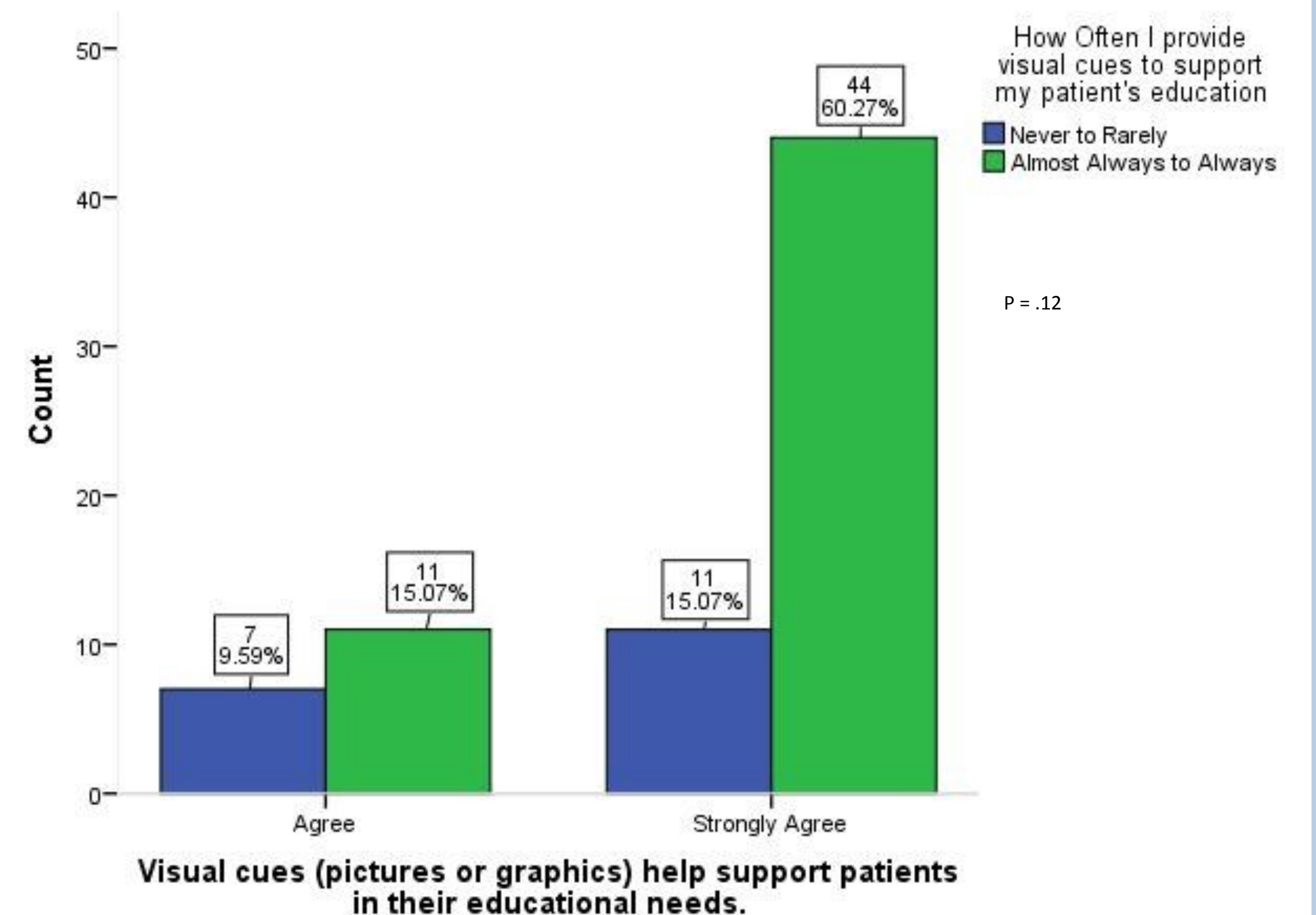
Characteristics of Direct Care Providers

	Experience as RN (mean years, SD)	Education (%)
Staff Nurses (n=65)	14.8 ± 12.6	ASN 48.5 BSN 45.5
Educators (N = 4)	24.2 ± 12.8	ASN 33.3 BSN 50
Clinical Case managers (n = 3)	11 ± 7.2	ASN 33.3 BSN 66.7
Nurse Practitioners (n = 4)	31.2 ± 11.7	
Charge Nurse/Patient Care Coordinator (n = 9)	16.1 ± 14.9	ASN 11.1 BSN 77.8

Select Responses to Survey

- **Patient education was stressed in my basic nursing program - 68.6% agreed**
- **I am comfortable in a teaching role with patients - 93.7% agreed**
- **I am responsible for a patient being able to care for himself when he returns home, if I care for him on a regular basis—65.7% agreed**
- **Patient education should be coordinated with other members of the health care team—97.9% agreed**

Nurses Who Believe Visual Cues Support Patient Education and Frequency of Visual Cue Use



Conclusions

Overall, there was a strong sense that patient education is an important role for the staff nurse and lies within the autonomous scope of practice of the nurse.

Comfort in providing patient education does not vary based on educational preparation and does not differ in those with and without specialty certifications.

Implications for practice:

Patient Education should be coordinated with other healthcare providers. There is an opportunity for nurse educators to focus more on the role of the nurse educator .