### Background Information

- **Patient education:**
  - Is an important nursing responsibility
  - Provides the patient with the understanding of their disease and treatment plan
  - Is a basic right of the patient and their family to receive
  - Promotes the delivery of patient-centered care
  - When adequately delivered, maximizes effectiveness of therapy, increases patient knowledge, engagement, and satisfaction of care
  - Standardization can improve both patient and staff satisfaction
- Without a standardized process, Registered Nurse (RN) staff perceived inconsistent educational content delivery, differing teaching methods, and a lack of patient knowledge and understanding about their treatment plan.

### Review of the Literature

- Without adequate education, patients can experience poor symptom management, anxiety, and lack of ability to cope with their illness or disease.
- Variation in practice can result in waste, inefficiencies, and decreased quality of care.
- Effective teaching during a new diagnosis or treatment has shown to decrease anxiety, improve decision-making, diminish treatment side effects, and improve quality of life.
- Standardizing education processes increases efficiency and quality and contributes to enriched patient understanding and satisfaction, as well as increases patient and staff satisfaction.
- Checklists provide consistency, ensure completeness, and can boost nurse’s confidence in delivering patient education.

### Improvement Team

- A Quality Improvement (QI) team was created within Infusion Services and led by the Clinical Nurse Leader (CNL) student including the Clinical Manager (CM), Professional Development Nurse (PDN), Quality Improvement RN (QIRN), and other department staff.

### Global Aim

- Utilizing the Plan-Do-Study-Act improvement method, the aim was to improve patient education and patient satisfaction to Infusion Services by implementing a standardized process for staff to follow when delivering education to new patients during their initial visits in Infusion Services.

### Specific Aims

- Maintain an average total score for the patient questionnaire of ≥ 90%
- Increase the average score for patient questionnaire item #13 (["I know what to expect if I have an adverse drug reaction."] of ≥ 80% by February 26, 2023
- 

### Baseline Data

#### Patient Questionnaire

- From 1/11-1/29/22, of the 94 new infusion patients, 94% were identified by staff as new and were administered a 13-item Likert scale questionnaire that focused on specific education components a new patient should receive.
- Patients could also provide feedback as desired.
- The average total score for each 13-item questionnaire was 94%.
- Two questions regarding education on Anterior Drug Reactions (ADR) (86%, 80%) and the Late/No show Policy (13%, 70%) scored the lowest of all questions.

#### RN Questionnaire

- RNs were queried using a 5-point scale questionnaire regarding their understanding, confidence, and satisfaction with the process utilized to educate new patients.
- Strongly agree and agree (4-5) were combined as ideal state.

#### Process Findings

- Not all patients completed the Patient Questionnaire.
- Staff had difficulty identifying new patients.
- Noted discrepancy between what the patient reported as "new" (not seen in last 3 years) vs. what staff considered new (no previous visits).
- Report was modified 1/30/23 to exclude patients with any history of ADRs.
- "Pended" notes may not have been seen during chart audit.
- Expectations for patient education should be clearly communicated.

### Study: Patient Questionnaire—Post Intervention

- Average total score: Maintain score of 2-90%
- RN ADR Edu: Maintain score of 2-90% from Feb 26, 2023
- R13 Late/No Show Edu: Increase score to ≥ 80% from Feb 26, 2023

### Act

- Implemented new standard process: 12/12/2022 — 2/26/2023
- Patients were identified as new by all staff (Schedulers, MAs, LPNs, RNs)
- RN reviewed checklist, provided education from identified resources (Lincosys, Champion Patient Education Direct, EPIC, Clinical References)
- As well as a new handout with information specific to Infusion Services ("What to Expect During Your Infusion")

### Do

- Patient Questionnaire
  - What to Expect During Your Infusion
  - We want to make your visits to Infusion Services as seamless as possible. Here’s how to prepare for your upcoming visits:**
  - **What is to expect during your infusion:**
  - **Expectations for patient education:**
  - **Communication about patient education:**
  - **Post-Infusion patient education:**
  - **What to expect during your infusion:**
  - **What is the patient education process:**
  - **What is the patient education process:**

### Learning & Limitations

- Creating and using standard resources improves both patient knowledge and staff satisfaction.
- Positive feedback from patients after receiving standardized education:
  - "All went well. Good job to all the staff."
  - "Now I know what to expect.
- Positive feedback from staff regarding new standard process:
  - "It is straightforward and smooth, no concerns."  - "I appreciate having a clear process to follow for all of our new patients."

### Acknowledgements

- Special thanks to: Heather Arms, Jillian Bell, Johnene Demers, Andrea Pulham, Jennifer Grasse BSN, RN, MSN-CNL Student; Dana Check MSN, RN, CNL; Courtney Elliott BSN, RN, QIRN; Dawn Steffes AAS;Serina Johnson DNP, RN, PHN.

### References

- Share "What is your patient education process." patient education handout:
  - Include dönemde to patients referred to Infusion Services
  - Collaborate with Infusion Schedulers: Create key points to incorporate into scripting when scheduling patients.

### Table

<table>
<thead>
<tr>
<th>Question</th>
<th>RN</th>
<th>Patient Satisfaction</th>
<th>Goal</th>
<th>Total Score</th>
<th>ADR Edu</th>
<th>R13 Edu</th>
</tr>
</thead>
<tbody>
<tr>
<td>#6 ADR Edu</td>
<td>95%</td>
<td>80%</td>
<td>80%</td>
<td>80%</td>
<td>80%</td>
<td>80%</td>
</tr>
<tr>
<td>#13 Late/No Show Edu</td>
<td>90%</td>
<td>85%</td>
<td>85%</td>
<td>85%</td>
<td>85%</td>
<td>85%</td>
</tr>
</tbody>
</table>