Health Literacy and Medication Adherence: A Quality Improvement Project for Heart Failure Patients

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INTRODUCTION: Low health literacy results in worse outcomes and underutilization of preventative health care. In the United States 5,800,000 people have been diagnosed with heart failure (HF), with $20.9 billion spent in 2012, and 80% on hospitalizations. Studies show that low health literacy in HF resulted in a 34% greater risk of death, and addressing health literacy as important.

PURPOSE: The purpose of the project was to identify HF patients with low health literacy, and to evaluate the effectiveness of printed educational materials and a short educational session tailored to the patient’s specific medication regimen to increase medication knowledge.

METHODS: A descriptive, pre- post-test design was used with HF patients referred to a Transitional Care Clinic. At baseline, health literacy and HF knowledge were assessed, followed by tailored HF medication education, using teach-back to clarify misunderstandings and reinforce education, and printed materials. Those with low health literacy received a pictorial pill card. A 2-week, post-intervention follow-up evaluated medication adherence and HF knowledge.

RESULTS: Two of 17 participants had low health literacy. Knowledge significantly improved post-intervention, although it was unclear if education affected medication adherence. Significant barriers to medication adherence were: remembering to take medications (n=5), forgetting medications when traveling (n=2), inconvenience (n=3), and cut back/stopped due to feeling worse (n=1).

CONCLUSION: Face-to-face education and teach back increased knowledge, although the impact on adherence was unclear. Literacy assessment, face-to-face education with teach-back, and interventions to decrease barriers to medication taking are clearly important for nurses to address with HF patients.