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Objective:	Upon completion of the lecture, attendees should be better prepared to: <ul style="list-style-type: none">▪ Demonstrate awareness and understanding of Flesch-Kincaid reading scale and its applications towards decreasing readmission rates▪ Describe ways to improve patient/provider relationships
Abstract:	<p>Introduction: Often times, providers' unknowingly present health information at a literacy level above their patients. Discharge instructions are written for patients in a generic fashion, which is not at a level to serve our diverse patient population. While reviewing patients' records with readmissions as well as during follow up interviews, we found that an area which we can improve upon was our discharge instructions from inpatient and outpatient settings. The most common reason for readmissions were wound infections due to improper cleansing technique, improper materials being used for wound care (Saran wrap vs. non-adherent permeable dressing, as well as improper medication administration (oral and topical). Some patients also seem to lack the understanding of the importance of post-discharge follow up. We recognized that poor wound care and medication compliance were secondary to the lack of comprehension of wound care instructions. This led to the exploration and streamlining of our current instructions.</p> <p>Upon review, per the Flesch-Kincaid Reading Scale, our current discharge instruction were too lengthy and written at a ninth grade level. Previous studies has shown that medical literature written at a sixth grade level or lower increases patient compliance with wound care protocols.</p> <p>Our goal is to increase comprehension and thus improve compliance to wound care as well as strengthen the patient and provider relationship. This encourages healthier outcomes for the patient, decrease readmission rate, earlier time to wound closure, as well as increases participation in vocational rehabilitation.</p> <p>Methods: This is an ongoing performance improvement project initiated in April 2018 in our Burn Unit to decrease readmission rates. By using the Flesch-Kincaid Reading Scale, we improved readability level by changing our choice of words, formatting, as well as style of writing in order to achieve a fourth grade reading level in our discharge instructions. We implemented our new and improved discharge instructions to all our inpatient discharges. We review our readmission rates as well as observed and interview during follow up visits regarding their understanding and satisfaction of</p>

wound care instructions.

Results: Since April 2018, we observed a decrease in readmissions as compared to the previous months. We also noted healthier wounds in clinic which resulted in shorter wound healing time. Patient are better able to demonstrate and verbalize proper wound care technique. We also noted an increase in competence, confidence, and compliance with our burn patients and their family.

Conclusions: By using the Flesch-Kincaid Grade Level Scale to adjust our patient discharge instructions from a ninth grade to fourth grade reading level, we were able to increase patient satisfaction, patient compliance as well as foster stronger patient-provider relationships. This has resulted in a decrease readmission rates. Our results will be measured using the CAHPS survey.

Future direction would be a prospective analysis of patient comprehension of discharge instructions after inpatient nursing discharge instructions to pinpoint specific areas of communications for improvement.

References and Resources:

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Disclosure:

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