

CentraCare Health DigitalCommons@CentraCare Health

Articles

Posters and Scholarly Works

5-22-2017

COPD Management and Role of the Nurse Coach: Increasing Referrals and Participation in Pulmonary Rehabilitation

Carol Upcraft

St. Cloud Hospital, CentraCare Health, upcraftc@centracare.com

C. Hoover

College of Saint Benedict and Saint John's University, choover@csbsju.edu

Joy Plamann

St. Cloud Hospital, CentraCare Health, PlamannJ@centracare.com

Jessica Oman

St. Cloud Hospital, CentraCare Health, omanj@centracare.com

Follow this and additional works at: <https://digitalcommons.centracare.com/articles>

 Part of the [Critical Care Nursing Commons](#), and the [Other Nursing Commons](#)

Recommended Citation

Upcraft, Carol; Hoover, C.; Plamann, Joy; and Oman, Jessica, "COPD Management and Role of the Nurse Coach: Increasing Referrals and Participation in Pulmonary Rehabilitation" (2017). *Articles*. 44.

<https://digitalcommons.centracare.com/articles/44>

This Poster is brought to you for free and open access by the Posters and Scholarly Works at DigitalCommons@CentraCare Health. It has been accepted for inclusion in Articles by an authorized administrator of DigitalCommons@CentraCare Health. For more information, please contact schlepers@centracare.com.

COPD Management And Role Of The Nurse Coach: Increasing Referrals And Participation In Pulmonary Rehabilitation

C. Hoover¹, C. Upcraft², J. Plamann², J. Oman²

¹College of St. Benedict/St. John's University, St. Joseph, MN, ²St. Cloud Hospital, St. Cloud, MN

Corresponding author's email: choover@csbsju.edu

Chronic obstructive pulmonary disease (COPD) remains a significant cause for hospitalization and with complex management issues upon discharge a significant portion are being re-admitted within 30-days of first hospitalization. The beneficial effects of pulmonary rehabilitation (PR) in the management of COPD is well documented but continues to be underutilized as an important management strategy to reduce hospital readmissions. Transitional care programs which include nurse coaches, have emerged to empower patients to manage their disease and facilitate transitions through multiple care environments. Little is known about the efficacy of such programs on referral and participation in PR and subsequent reductions in readmissions. The aim of this study was to compare receipt of referral and participation in PR and 30-day readmission rates in patients with COPD who received a transitional care program (CTI) with those who received a routine hospital discharge plan. The CTI included medication reconciliation and nurse coach visits in-hospital and in the home. Data was collected retrospectively from electronic health records and included 215 subjects (Mean age 71, 45% female), with 54 enrolled in the intervention group. Results indicate subjects who received a CTI demonstrated higher rates of PR participation (22%; 4%; p=0.001) and received a greater number of referrals (57%; 14%, p=.007). There were no significant differences related to 30-day hospital readmissions (24%; 14%, p=.089) however subjects who participated in PR were less likely to experience an early readmission. Coordinated, interdisciplinary hospital initiated transitional care programs, which include a nurse coach, may facilitate PR referral and empower patients to attend PR.

Table 1: Comparison of CTI Intervention and PR Receipt, Referral, and Participation

CTI Intervention	REFERRALS		
	NO	YES	Total
NO	108	20	128 (59%)
YES	11	6	17 (39%)*
Total	119	26	145
CTI Intervention	PARTICIPATION		
	NO	YES	Total
NO	118	8	126 (74%)
YES	42	12	54 (22%)*
Total	160	20	180

This abstract is funded by: None

Am J Respir Crit Care Med 2017;195:A4265

Internet address: www.atsjournals.org

Online Abstracts Issue