



Kathleen J. White, MSN, RN Patient & Family Education Coordinator 843-792-0301 whitekj@musc.edu

### **Outcome:**

Participants will consider the use of self reflection as an effective means of validating competency.

### **Objectives:**

At the conclusion of this session, participants will be able to

- 1. Describe one hospital's use of the "Always Use Teach-back" toolkit for staff education.
- 2. Differentiate between **peer evaluation** and **self reflection** as means for validating competency.
- Recall 3 benefits of self reflection.



# It All Began With A Brown-bag Lunch







You check with the Check with tou

Patients and Providers
Check with each other for understanding

# Always Use Teach-back Training Toolkit

## teachbacktraining.org



Welcome to the Always Use Teach-back! training toolkit



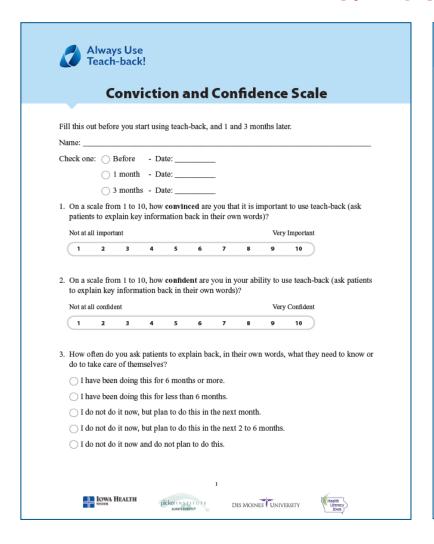
### What is Teach-back?

- A research-based health literacy intervention that promotes adherence, quality, and patient safety
- A way to make sure you explained information clearly;
   <u>not</u> a quiz of the patient
- Asking a patient (or family member) to explain in their own words what they need to know or do, in a caring way
- A way to check for understanding and, if needed, re-explain and check again





## Pre/Post -Test



	Conviction and Confidence Scale continued					
4. Check all the past work we	elements of effective teach-back you have used more than half the time in the ek.					
Use a carir	ng tone of voice and attitude.					
Oisplay co	omfortable body language, make eye contact, and sit down.					
Use plain l	language.					
Ask the pa	tient to explain, in their own words, what they were told.					
Use non-sl	haming, open-ended questions.					
O Avoid aski	ing questions that can be answered with a yes or no.					
<ul> <li>Take respo</li> </ul>	onsibility for making sure you were clear.					
<ul><li>Explain an</li></ul>	nd check again if the patient is unable to teach back.					
Use reader	r-friendly print materials to support learning.					
	6-1-6-1					
O Include far	use of and patient's response to teach-back. mily members/caregivers if they were present.					
O Include far						
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					
O Include far	mily members/caregivers if they were present.					







#### 10 Elements of Competence for Using Teach-back Effectively

- 1. Use a caring tone of voice and attitude.
- 2. Display comfortable body language and make eye contact.
- Use plain language.
- 4. Ask the patient to explain back, using their own words.
- 5. Use non-shaming, open-ended questions.
- 6. Avoid asking questions that can be answered with a simple yes or no.
- 7. Emphasize that the responsibility to explain clearly is on you, the provider.
- 8. If the patient is not able to teach back correctly, explain again and re-check.
- Use reader-friendly print materials to support learning.
- 10. Document use of and patient response to teach-back.

#### What is Teach-back?

- A way to make sure you—the health care provider—explained information clearly. It is not a
  test or quiz of patients.
- Asking a patient (or family member) to explain in their own words what they need to know or do, in a caring way.
- A way to check for understanding and, if needed, re-explain and check again.
- A research-based health literacy intervention that improves patient-provider communication and patient health outcomes<sup>1</sup>.

1 Schillinger, 2003













Home

Using the Teach-back Toolkit

Interactive Learning Module

Coaching to Always Use Teach-back

To Learn More

Acknowledgements

#### Interactive Teach-back Learning Module

Print This Page

#### Overview

The Interactive Teach-back Learning Module has two parts:

- It describes teach-back and demonstrates its effectiveness as a health literacy intervention to improve
  patient-provider communication.
- Video and interactive self-assessment questions enhance, confirm, and reinforce your ability to use teach-back and integrate it into your clinical practice.

The Module takes about 45 minutes, and enables you to identify and practice key aspects of teach-back. You will follow a patient's experience from hospital discharge through the home health and primary care follow-up settings:

- Introduction, description, and demonstration of ideal use of teach-back.
- Teach-back during hospital discharge.
- Teach-back during a home health visit.
- Teach-back at primary care physician follow-up.
- . Tying it all together to Always Use Teach-back!

If you do not finish, you can save your place and return to complete the module.

get started









#### **Tools and Videos**

Physician Experience about Learning Teachback (VIDEO)



# Kirkpatrick's Levels of Evaluation

Reaction

Learning

Behavior

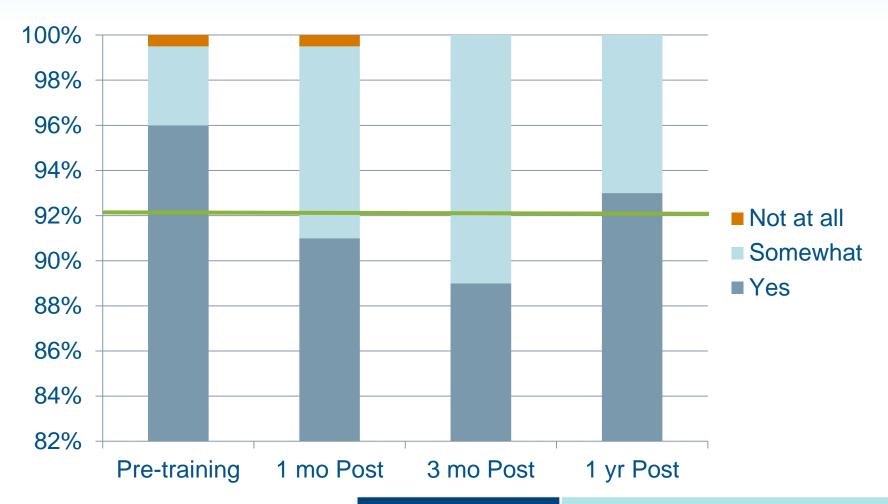
Results

Kirkpatrickpartners.com

# Levels 1 & 2 (Reactions, Learning)

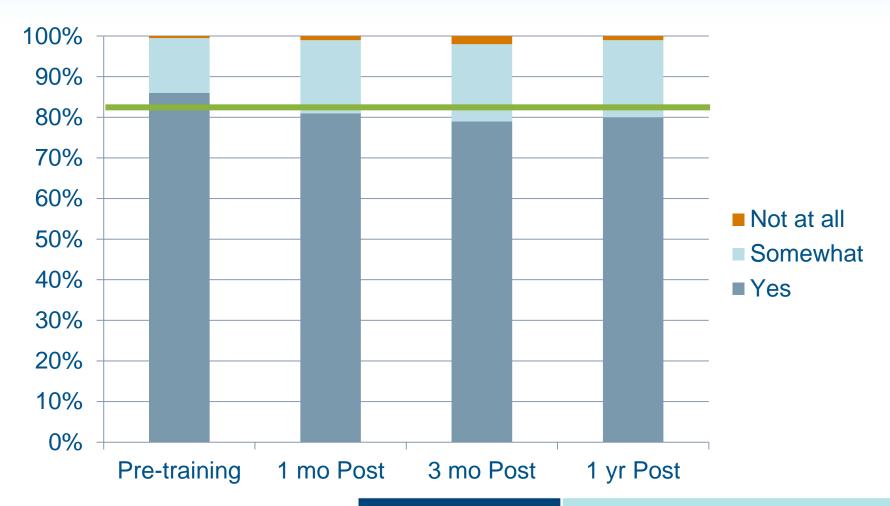


# Teach-back: Conviction of Importance



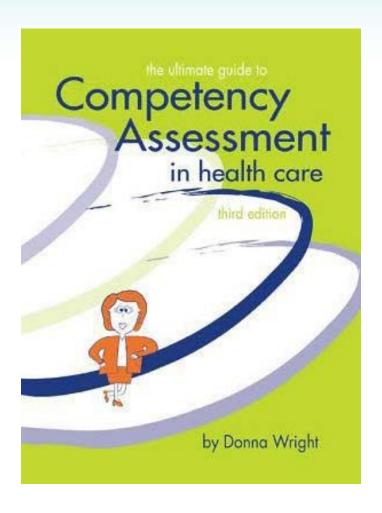


# Teach-back: Confidence in Ability





# Level 3 (Behavior)





Outcome focused



Accountability-based

- Competencies that matter
- Appropriate verification methods
- Accountability
- **Employee-centered process**
- Address competency deficits

# **Competency Verification**



#### **Teach-back Observation Tool**

Care Team Member:							
Observer:	Time:						
Did the care team member	Yes	No	N/A	Comments			
Use a caring tone of voice and attitude?							
Display comfortable body language, make eye contact, and sit down?							
Use plain language?							
Ask the patient to explain in their own words what they were told to do about:  Signs and symptoms they should call the doctor for?  Key medicines?  Critical self-care activities?  Follow-up appointments?							
Use non-shaming, open-ended questions?							
Avoid asking questions that can be answered with a yes or no?							
Take responsibility for making sure they were clear?							
Explain and check again if the patient is unable to use teach-back?							
Use reader-friendly print materials to support learning?							
Document use of and patient's response to teach-back?							
Include family members/caregivers if they were present?							









#### [Space for comments on back]

#### **Option 1**

**Peer observation**; while doing Teach-back as an activity of daily work, a peer rates your performance

### **Option 2**

**Self reflection** on your own Teachback skills in a specific patient/family encounter

### **Option 3**

Watch a YouTube video (2 topic options given) and rate the clinician's use of Teach-back

Each option asked for comments



## What Would You Choose?









# Surprise!

- Excellent
- ☐ Very good
- Oood







## **Qualitative Review**



Peer <1%

Video 6%

Self 6%



#### **Teach-back Observation Tool**

Observer:			Time:				
Did the care team member	Yes	No	N/A	Comments			
Use a caring tone of voice and attitude?							
Display comfortable body language, make eye contact, and sit down?							
Use plain language?	<b>V</b>						
Ask the patient to explain in their own words what they were told to do about:  • Signs and symptoms they should call the doctor for?  • Key medicines?  • Critical self-care activities?  • Follow-up appointments?	<b>✓</b>	,					
Use non-shaming, open-ended questions?	<b>√</b>	,					
Avoid asking questions that can be answered with a yes or no?	<b>√</b>						
Take responsibility for making sure they were clear?	<b>√</b>						
Explain and check again if the patient is unable to use teach-back?	<b>√</b>						
Use reader-friendly print materials to support learning?	<b>✓</b>	,					
Document use of and patient's response to teach-back?	<b>✓</b>	,					
Include family members/caregivers if they were present?	<b>√</b>						











## Peer Evaluators

### Checked "NO" < 1%

- Use print materials to support learning
- Document use of & Patient response to Teach-back
- -Include family/caregivers (if present)

#### **Comments:**

Coaching 3.4%

Congratulatory 25%

## Self Reflectors

### Checked "NO" 6%

- Avoid questions that can be answered with Yes/No
- Document use of & Patient response to Teach-back
- Use print materials to support learning

### **Comments:**

Coaching



Congratulatory

28%



# **Coaching Comments**

I caught myself using medical terms that were confusing

I need to work on not crossing arms

Ways to improve:
avoid yes/no
questions & teach
little bits at a time

I sometimes talk very quickly and end up repeating more than necessary

I could have saved time by asking initially how the patient/family learns best

I tend to pace when talking.
I need to learn to get on eye level

I should remember that families are a good source of reinforcement for patients

I can utilize handouts for patients to refer back to

I need to step away from the computer during education



# **Congratulatory Comments**

- I use print materials with every patient for discharge instruction
- I always include family members, especially if they are care providers
- I include family with patient's permission or by their request
- I say "I want to be sure you get the best care. Please ask questions!"
- I used common, everyday language to explain meds
- I treat patients/family with respect and dignity
- I changed "Do you have any questions for me?" To "What questions do you have for me?" After that, the patient asked multiple questions!
- I always use a calm voice, tone, and simple terms
- I love teaching my patients



### **Commitment Comments**



I have not been using Teach-back effectively



It's MY responsibility to explain clearly



I want to improve my Teach-back by slowing down my speech and verifying that the patient truly understands



I will continue to work on improving my usage...it will go far to improve patient teaching and will impact HCAHPS scores in a great way



Although it took a lot of extra time, maybe I helped prevent a readmission



# Challenges

- Tracheostomy patient
- Transplant patient
- Ninety year old patient with subdural hemorrhage
- Emotionally shut off patient
- Critical care, intubated patient
- Religious patient, disinterested in health information
- Extremely hard of hearing, wanting to go home
- Low literacy patient with laryngectomy
- Constant phone interruptions



# Summary

 Thank you to the developers of <u>Teachbacktraining.org</u> and the Always Use Teach-back® training toolkit

Unity Point Health, Picker Institute, Des Moines University & Health Literacy Iowa

- Lessons Learned
  - Conviction & Confidence Scale, as is, was not effective as a Level 2 Learning Evaluation tool
  - Observation Tool was useful across validation options
  - Peer evaluation was of little value for coaching; behavior change
  - Self reflection was a powerful mechanism for
    - Identifying opportunities for improvement
    - Celebrating a skill well done
    - Commitment





Haley Provosty, MSN, RN
"Self-reflection is actually a powerful tool for learning"

## Comments or Questions?



