

Engaging Patient's to Bridge the gap Between Health Literacy and Their Health Education

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SOUTHEAST GEORGIA
HEALTH SYSTEM

GREETINGS FROM SGHS

Southeast Georgia Health System – Brunswick Campus

Southeast Georgia Health System – Camden Campus



OBJECTIVES

- Perform a literacy assessment in order to engage the patient in their care at their level of understanding.
- Demonstrate use of the Teach-Back or Show-Me methods during patient education.
- Facilitate educational scenarios to align with patient's preferred teaching method and evaluate learning through repeat back and/or return demonstrations





SOUTHEAST GEORGIA
HEALTH SYSTEM

ON A JOURNEY TO PATIENT ENGAGEMENT

- **Goal - improve the education process for medication education**
- **The Change Team - Multidisciplinary**
 - Patient Safety Champions (Frontline Nurses)
 - Education
 - Pharmacy
 - Marketing
- **Opportunities Identified**
 - Simplify the process
 - Utilize key words for consistency
 - Reference a pocket guide or cheat sheet
 - Reinforce through teach back
 - Support patient engagement



RESOURCES FOR EVERYONE

Tools for the Patient

- Medication Use & Side Effects Tool
- Teach Back Pocket Card
- Patient Specific Education

Tools for the Team

- Medication Use & Side Effects Tool
- Specific Training Sessions
- Competencies



HEALTH LITERACY, A NATIONAL CONCERN

- Health Literacy Skills

 - 65% of adults intermediate or proficient level

 - 14% (30 million) *BELOW* the basic level

 - 22% (47 million) *AT* basic level

 - 36% had *SERIOUS* limitations in health literacy skills

- What does this data really mean?

(U.S. DoE, 2006)



patients with low
HEALTH LITERACY...



Are more likely to visit an
EMERGENCY ROOM



Have more
HOSPITAL STAYS



Are less likely to follow
TREATMENT PLANS

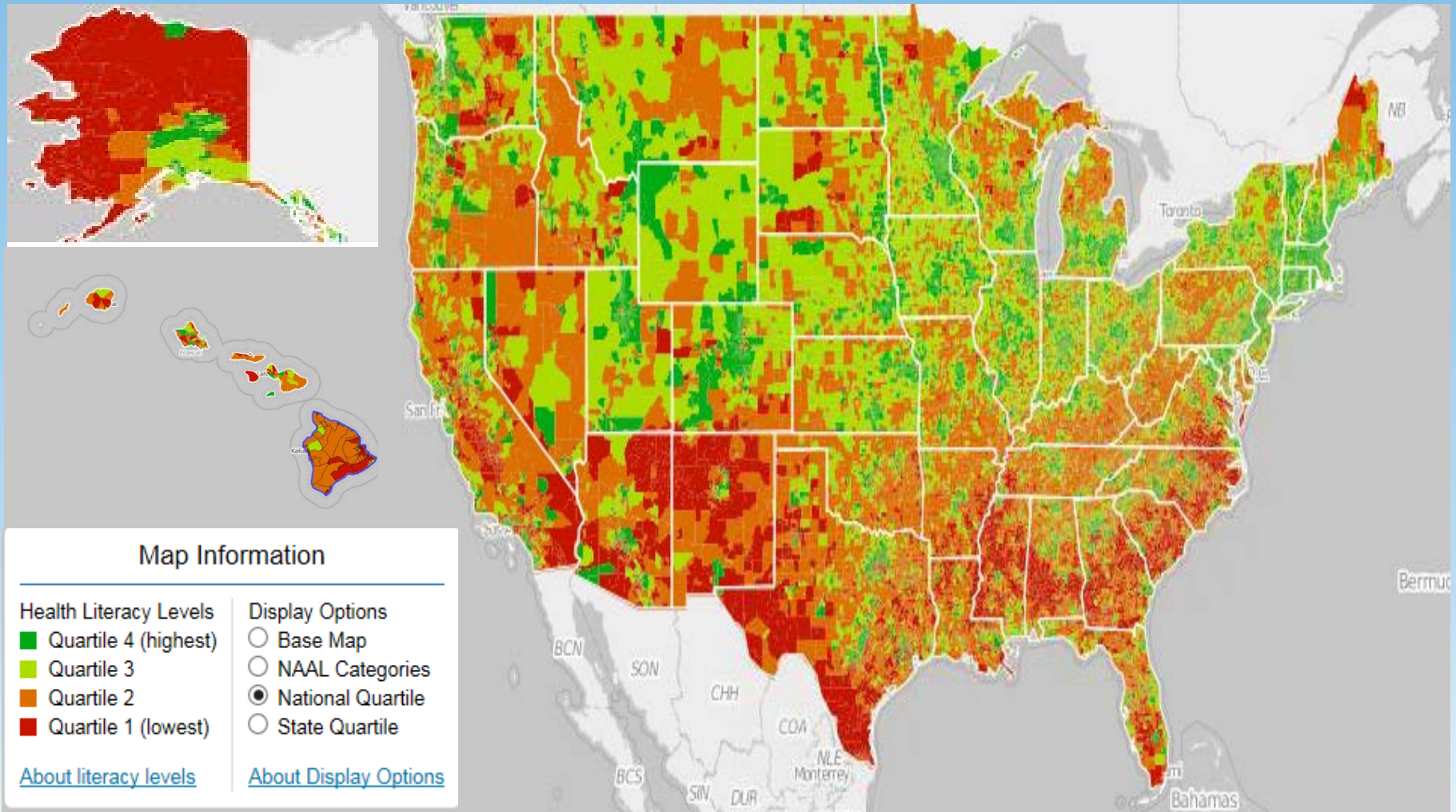


Have higher
MORTALITY RATES

www.cdc.gov/phpr



Health Literacy Data Map



(The University of North Carolina at Chapel Hill, 2014)





RED FLAGS FOR LOW LITERACY

- ✓ Frequently missed appointments
- ✓ Incomplete registration forms
- ✓ Non-compliance with medications
- ✓ Unable to name medications, explain purpose or dosing
- ✓ Identifies pills by looking at them, not reading labels
- ✓ Unable to give coherent, sequential history
- ✓ Ask fewer questions
- ✓ Lack of follow-through on test or referrals



Medication Use and Side Effects

What is the medication for?	Name of Medication: Generic (Brand)	Side Effects
<p>Pain Relief</p> 	<ul style="list-style-type: none">• Acetaminophen (Tylenol)• Butalbital/APAP/Caf (Fioricet)• Hydrocodone & Acetaminophen (Lortab, Norco)• Hydromorphone (Dilaudid)• Meperidine (Demerol)• Morphine (Oramorph)• Oxycodone & Acetaminophen (Percocet)• Oxycodone (Roxicodone)• Tramadol (Ultram)	<ul style="list-style-type: none">• Constipation• Dizziness• Drowsiness• Itching• Queasiness• Rash
<p>Muscle Pain or Spasm</p> 	<ul style="list-style-type: none">• Baclofen (Lioresal)• Carisoprodol (Soma)• Cyclobenzaprine (Flexeril)• Methocarbamol (Robaxin)• Tizanidine (Zanaflex)	<ul style="list-style-type: none">• Dizziness• Drowsiness• Dry mouth



WHAT IS TEACH-BACK?

- A way to make sure – 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 research-based health literacy intervention that improves patient-provider communication and patient health outcomes.



10 ELEMENTS OF COMPETENCE

1. Use a caring tone of voice and attitude.
2. Display comfortable body language and make eye contact.
3. 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.
9. Use reader-friendly print materials to support learning.
10. Document use of and patient response to teach-back.



VERBIAGE IS KEY

HCAHPS SURVEY QUESTIONS

YOUR CARE FROM NURSES

1. During this hospital stay, how often did nurses treat you with courtesy and respect?
2. During this hospital stay, how often did nurses listen carefully to you?
3. During this hospital stay, how often did nurses explain things in a way you could understand?
4. During this hospital stay, after you pressed the call button, how often did you get help as soon as you wanted it?

YOUR EXPERIENCES IN THIS HOSPITAL

1. How often did you get help in getting to the bathroom or in using a bedpan as soon as you wanted?
2. During this hospital stay, how often was your pain well controlled?
3. During this hospital stay, how often did the hospital staff do everything they could to help you with your pain?
4. Before giving you any new medicine, how often did hospital staff tell you what the medicine was for?
5. Before giving you any new medicine, how often did hospital staff describe possible side effects in a way you could understand?

WHEN YOU LEFT THE HOSPITAL

1. During this hospital stay, did doctors, nurses, or other hospital staff talk with you about whether you would have the help you needed when you left the hospital?
2. During this hospital stay, did you get information in writing about what symptoms or health problems to look out for after you left the hospital?

UNDERSTANDING YOUR CARE WHEN YOU LEFT THE HOSPITAL

1. During this hospital stay, staff took my preferences and those of my family or caregiver into account in deciding what my health care needs would be when I left.
2. When I left the hospital, I had a good understanding of the things I was responsible for in managing my health.
3. When I left the hospital, I clearly understood the purpose of taking each of my medications.

THE HOSPITAL ENVIRONMENT

1. During this hospital stay, how often were your room and bathroom kept clean?
2. During this hospital stay, how often was the area around your room quiet at night?





Validation Method
 O = Observation
 I = Interactive Class/Simulation
 V = Verbal
 D = Return Demonstration
 W = Written Test

Validation Rating
 5 = Highly Competent, no prompting needed, could instruct someone
 4 = Competent to perform independently, may use resources to complete
 3 = Fair performance, may need prompting/assistance to complete
 2 = Still requires prompting/assistance
 1 = *Unacceptable performance/needs intervention from preceptor
 *Requires remediation, coordinate with clinical education

EMPLOYEE NAME _____ **EMPLOYEE ID** _____ **Campus:** _____

Competence for Using Teach-back Effectively				
Skill Checklist	Competency Validation			
	Method	Rating	Validators Initials/Date	Employee Initials/Date
1. Assesses the patient’s preferences for learning (demos, handouts, verbal instructions, etc.)				
2. Uses a caring tone of voice				
3. Displays comfortable body language and makes eye contact while educating patient				
4. Uses plain language and asks the patient to explain back, using their own words				
5. If the “show-me” method is appropriate, ask the patient to show the information taught (self injection, wound care, immobilizer application, etc.)				
6. Uses non-shaming, open ended questions				
7. Avoids asking questions that can be answered with a simple yes or no				
8. Assesses the patient’s ability to teach back the material correctly. If unsuccessful, explains the material again and repeats the teach back process				
9. Uses reader-friendly print materials to support patient’s learning				
10. Documents the use of and patient response to teach-back				

 EMPLOYEE’S NAME/INITIALS/SIGNATURE & DATE

 VALIDATOR’S NAME/INITIALS/SIGNATURE & DATE

 VALIDATOR’S NAME/INITIALS/SIGNATURE & DATE

 VALIDATOR’S NAME/INITIALS/SIGNATURE & DATE

STRATEGIES TO ENHANCE PATIENT UNDERSTANDING

- Focus on “Need to Know” and “Need to Do”
- Use TEACH BACK METHOD
- Demonstrate and or draw pictures
- Use clearly written and easy to understand education material

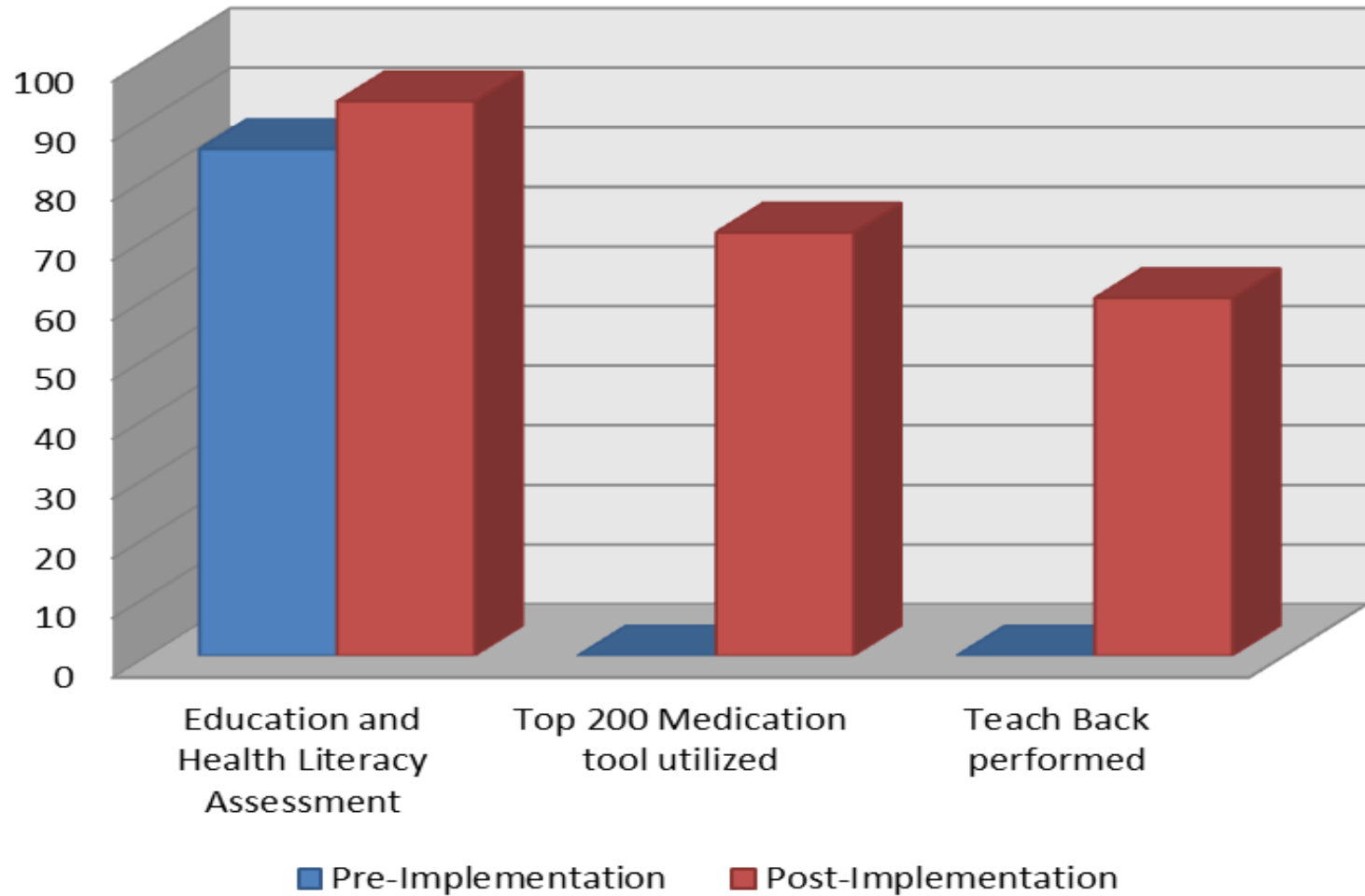


PATIENT EDUCATION AUDIT

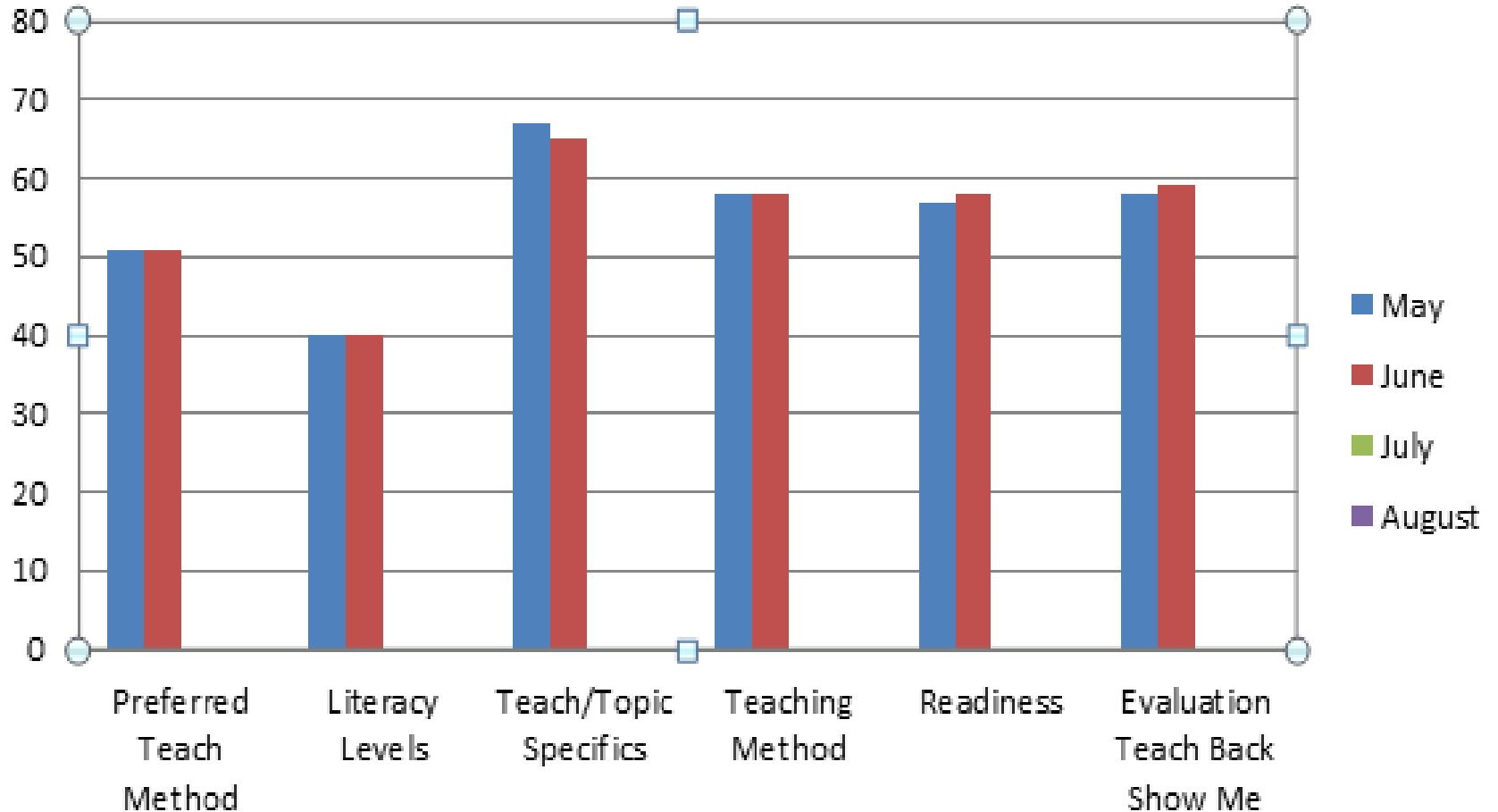
Audit criteria: Select a patient with a LOS of 3-5 days. Audit 4 shifts, starting with 1st day on admission.

DATE	ADMISSION DATE/TIME:			
UNIT	Shift 1:	Nurse:	Shift 2:	Nurse:
PATIENT ID	YES	NO	YES	NO
Education and Health Literacy Assessment				
Preferred Teaching Method				
Literacy Levels				
Patient Education/Evaluation				
Teaching/Topic Specifics				
Teaching Method				
Readiness				
Evaluation (TeachBack/ShowMe)				
	Shift 3:	Nurse:	Shift 4:	Nurse:
	YES	NO	YES	NO
Education and Health Literacy Assessment				
Preferred Teaching Method				
Literacy Levels				
Patient Education/Evaluation				
Teaching/Topic Specifics				
Teaching Method				
Readiness				
Evaluation (TeachBack/ShowMe)				

Patient Education Compliance



2017 Patient Education Engagement Results



MAKING STRIDES

- **Enhancing Patient-centered Care**
- **Engaging Patients at all literacy levels**
- **Individualize Patient Education**
- **Promote Patient Engagement**



Patient Safety Corner

Provided by Leesa Deal, CPHRM, MSPSL, manager, Patient Safety

Educate Before You Medicate!

According to U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion Health Literacy, in 2003, as many as **14 percent of adults** (30 million people) have **below basic health literacy**. Health literacy can affect the ability of patients to fill out complex forms; share health history with providers; be able to manage chronic disease and treatment medications; and understand risk associated with their health (health.gov/communication/literacy/quickguide/factsbasic.htm).

In addition to the low health literacy rate in our country, many adults receive important information about their health in stressful and unfamiliar environments, causing **patients to leave the conversation not understanding or retaining only a portion of what is important**. As a result of misunderstanding medication instruction, for example, a patient could take double the medication the provider prescribed.

Southeast Georgia Health System **Patient Safety Champions (PSCs)** are doing their part to help patients decrease the possibility of error by increasing the communication and education regarding their medications. In conjunction with Pharmacy, Leadership, and their fellow team members, PSCs have evaluated the current process and mapped an improved process. The new process includes educating patients throughout their stay, reiterating side effects and possible interactions by using the "Educate Before You Medicate" technique. This technique engages the patient each time medication is given, which encourages the patient to ask questions regarding their care. The new process also includes a set of laminated sheets for nursing staff to use as a resource when educating patients on the side effects of the top 200 medications given in the Health System. The sheets include simple terms and pictures to help tailor the education to each patient's learning level and preferred learning method.

What is the medication for?	Name of Medication Generic (Brand)	Side Effects
 Pain Relief	<ul style="list-style-type: none">Acetaminophen (Tylenol)Aspirin (Bayer)Ibuprofen (Advil)Hydrocodone/Acetaminophen (Vicodin)Tramadol (Ultram)Codeine/Acetaminophen (Norco)Codeine (Robitussin)Codeine (Kadian)	<ul style="list-style-type: none">ConstipationDizzinessDrowsinessItchingUpset StomachRash
 Muscle Pain or Spasms	<ul style="list-style-type: none">Skeletal Muscle Relaxants (Soma)Carbamazepine (Epival)Valproic Acid (Depakote)Vitamin D (Dorland)	<ul style="list-style-type: none">DizzinessDrowsinessDry mouth
 Inflammation	<ul style="list-style-type: none">Corticosteroids (Prednisone)Aspirin (Bayer)Ibuprofen (Advil)Acetaminophen (Tylenol)	<ul style="list-style-type: none">HeadacheStomach painThrobbing sleeping
 Constipation	<ul style="list-style-type: none">Stool Softeners (Colace)Antibiotics (Ciprofloxacin)Antidepressants (Zoloft)Antipsychotics (Seroquel)Anticholinergics (Benadryl)	<ul style="list-style-type: none">Loose stoolStomach pain
 Lower Blood Pressure or Heart Rate	<ul style="list-style-type: none">Antihypertensives (Lisinopril)Beta Blockers (Metoprolol)Calcium Channel Blockers (Verapamil)Diuretics (Lasix)Antidysrhythmics (Digoxin)Antidysrhythmics (Amiodarone)Antidysrhythmics (Sotalol)Antidysrhythmics (Diltiazem)	<ul style="list-style-type: none">DizzinessDrowsinessHeadacheLow blood pressure

The tools included in the new process have been distributed and are producing early success. Per Pam Nurmi, R.N., assistant nurse manager, 5 Glynn Brunswick Tower (GBT), "Educating with the new Medications Use and Side Effects tool has become a great success with the patient and nurses on 5 GBT. While educating one of our recent patients with numerous medications on the possible side effects, the patient became quite elated. After discussing the side effects of all her medications that had been ordered at the hospital the patient stated 'no one has ever done this for me!' The patient stated she would be taking the list home to place on her refrigerator as a reference she could go back and review. The patient also requested for her daughter to be educated as well on the side effects of the medications."

We look forward to sharing many more successes as we continue on the journey to provide our patients with tools they can use to help keep them safe and healthy! Ω

CONCLUSION

SGHS continues an ongoing process of facilitating knowledge, skill, and ability necessary for self-care of our patients leading to improved health outcomes and quality of life.



REFERENCES

- Agency for Healthcare Research and Quality (2015). Health Literacy: Hidden Barriers and Practical Strategies. Retrieved from <http://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/tool3a/index.html>
- Always Use Teach-back (2017). 10 Elements of Competence for Using Teach-back Effectively. Retrieved from <http://www.teachbacktraining.org/assets/files/PDFS/Teach%20Back%20-%20Observation%20Tool.pdf>
- American Medical Association (2012). AMA Health Literacy Video. Retrieved from <https://www.youtube.com/watch?v=ubPkdGHWaQ>
- Centers for Disease Control and Prevention (2016). Infographic: Health Literacy. Retrieved from <https://www.cdc.gov/phpr/infographics/healthliteracy.htm>
- Kutner, M., Greenberg, E., Jin, Y., Paulsen, C., & White, S. (2006). The Health Literacy of America's Adults: Results From the 2003 National Assessment of Adult Literacy. Retrieved from <https://nces.ed.gov/pubs2006/2006483.pdf>
- The University of North Carolina at Chapel Hill (2014). Health Literacy Data Map. Retrieved from <http://healthliteracymap.unc.edu/#>
- Xu, P. (2012). Using teach-back for patient education and self-management. Retrieved from <https://www.americannursetoday.com/using-teach-back-for-patient-education-and-self-management/>



QUESTIONS?

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