

# Patient and Family Engagement

*Aline M. Holmes, DNP, RN*  
*Sr. Vice President, Clinical Affairs*



# The Patient's Hospital Experience

Clinicians and Hospital Staff	Patients
 <p>Know how the hospital works and how to achieve results</p>	<ul style="list-style-type: none"><li>• Are strangers in the hospital environment</li><li>• Don't understand the system or culture</li></ul>
<p>Know who hospital staff are and what they do</p>	<ul style="list-style-type: none"><li>• Don't know who different staff are and what they do</li></ul>
<p>Are busy and under a lot of stress</p>	<ul style="list-style-type: none"><li>• Are often in pain or uncomfortable, vulnerable, or afraid</li><li>• Are aware that hospital staff are busy and may not want to bother them</li></ul> 

# What is Patient/Family Engagement?

- Involves “...collaborating with patients and families of all ages, at all levels of care and in all health care settings...acknowledges that families, however they are defined, are essential to patients’ health and well-being...”





# How to Engage Patients and Families

- When you enter the room:
  - Read chart before stepping in
  - Make eye contact with the patient
  - Introduce yourself by name and role
  - Introduce new people in room by name, role, and what they will do



# How to Engage Patients & Families cont'd

- When you first assess the patient:
  - Ask how the patient prefers to be addressed
  - Identify family that should be partners in their care
  - Highlight main points of communication tools
  - Invite the patient and family to use the white board to “talk” with clinicians



# How to Engage Patients and Families (cont'd)

- Ask about and listen to the patient and family's needs and concerns:
  - Use open-ended questions
  - Listen to, respect, and act on what the patient and family say
  - Help patients articulate their concerns when needed
  - Obtain communication resources if the adviser or family member cannot understand you (i.e., translator)



# How to Engage Patients and Families<sup>1</sup> (cont'd)

- Help the patient and family understand the diagnosis, condition, and next steps in their care:
  - Give timely and complete information—take every opportunity to educate patient and family
  - Use plain language
  - Invite the patient or family to take notes



# Areas of Focus

## 1. Patient and family engagement:

Ensuring processes are in place to:

- Engage patients/family
- Elevate the status of family caregivers as essential members of the team
- Prepare the patient and family to manage care at home.

Interventions may include:

- Teach back
- Collaborative conversations and communication
- Simulations with the patient and family member

## 2. Comprehensive discharge planning

## 3. Medication management

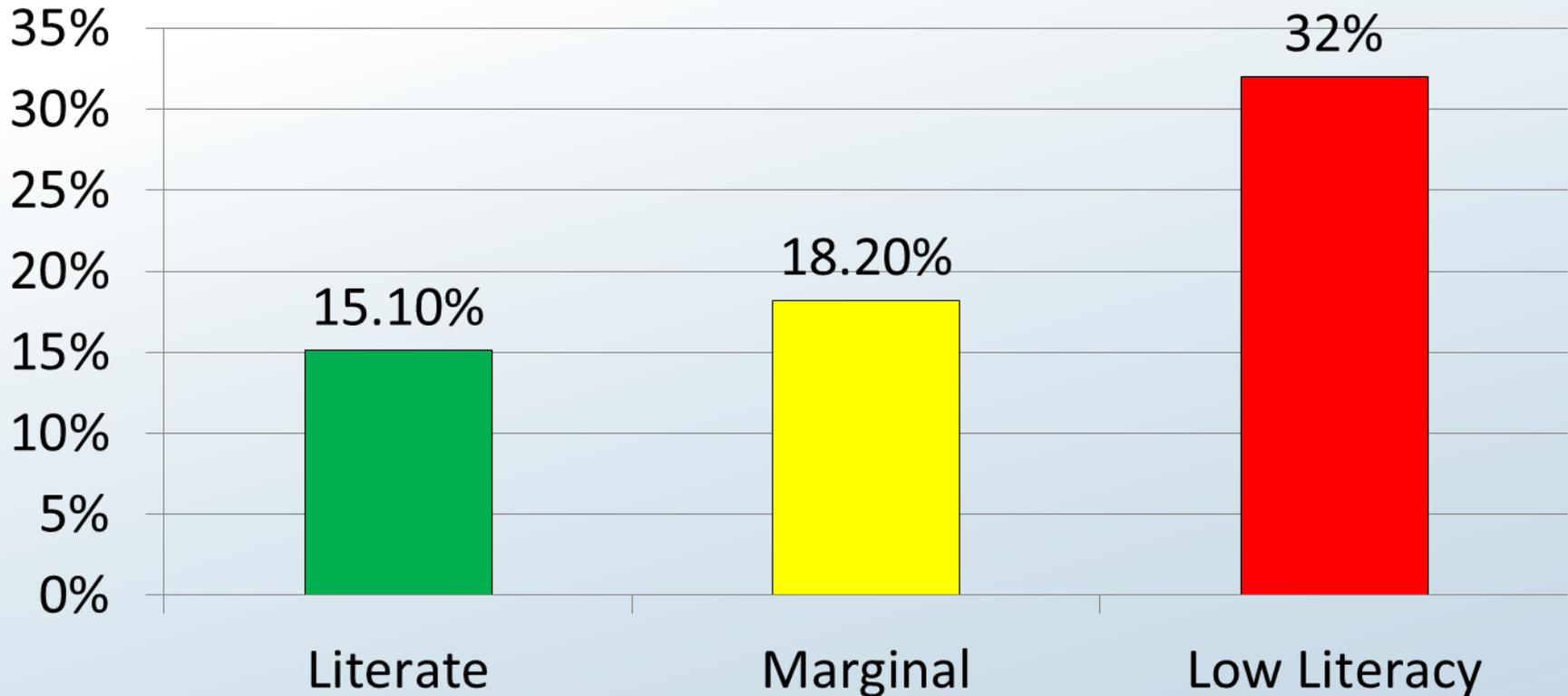
## 4. Transition care support

## 5. Transition communications

# Defining Health Literacy

- Health Literacy is the ability to:
  - obtain,
  - understand, and
  - act on health information
  
- Dependent on clear communication between patient and the medical team

# Patients With Low Literacy are First to be hospitalized



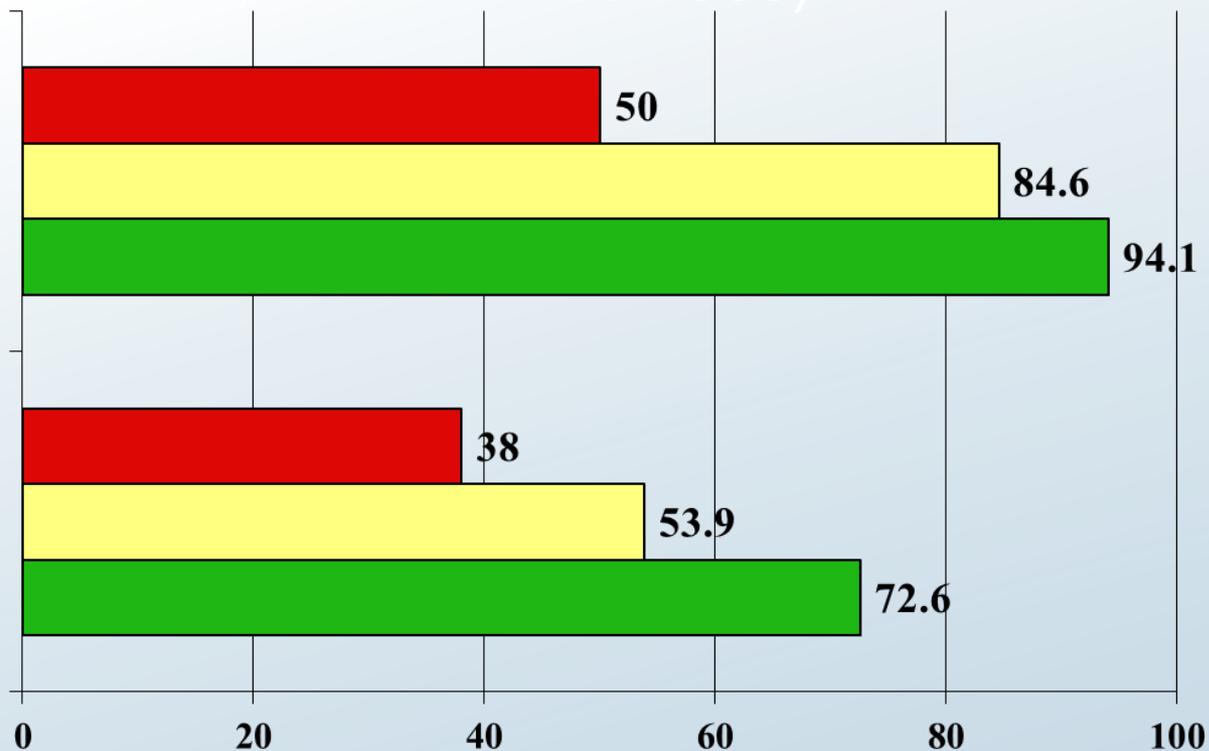
Baker, Parker, Williams, et al. *JGIM* 1999

# Low Health Literacy Affects Chronic Disease Management

(Fernald et al, Arch Int Med 1998)

**% Know symptoms of low blood sugar (hypoglycemia)**

**% Know correct action for hypoglycemic symptoms**



- Low Literate
- Marginally Literate
- Literate

# ALL SENTINEL EVENTS 2010-12

## Most Frequent Root Causes

([www.jointcommission.org/Sentinel\\_Event\\_Statistics](http://www.jointcommission.org/Sentinel_Event_Statistics), released 2/7/13)

2010 N=802		2011 N=1243		2012 N=901	
Leadership	710	Human Factors	899	Human Factors	614
Human Factors	699	Leadership	815	Leadership	557
Communication	661 (82%)	Communication	760 (61%)	Communication	532 (59%)
Assessment	555	Assessment	689	Assessment	482
Physical Environment	284	Physical Environment	309	Information Mgmt	203

# Barriers to Health Literacy

- Barriers to health literacy are multifactorial:
  - Complex healthcare system
  - Patient factors (reading ability, age, emotions)
  - Physician attitudes/communication skills
  - Nursing issues (culture, time)

# System Barriers to Health Literacy: Increasingly Complex Health System

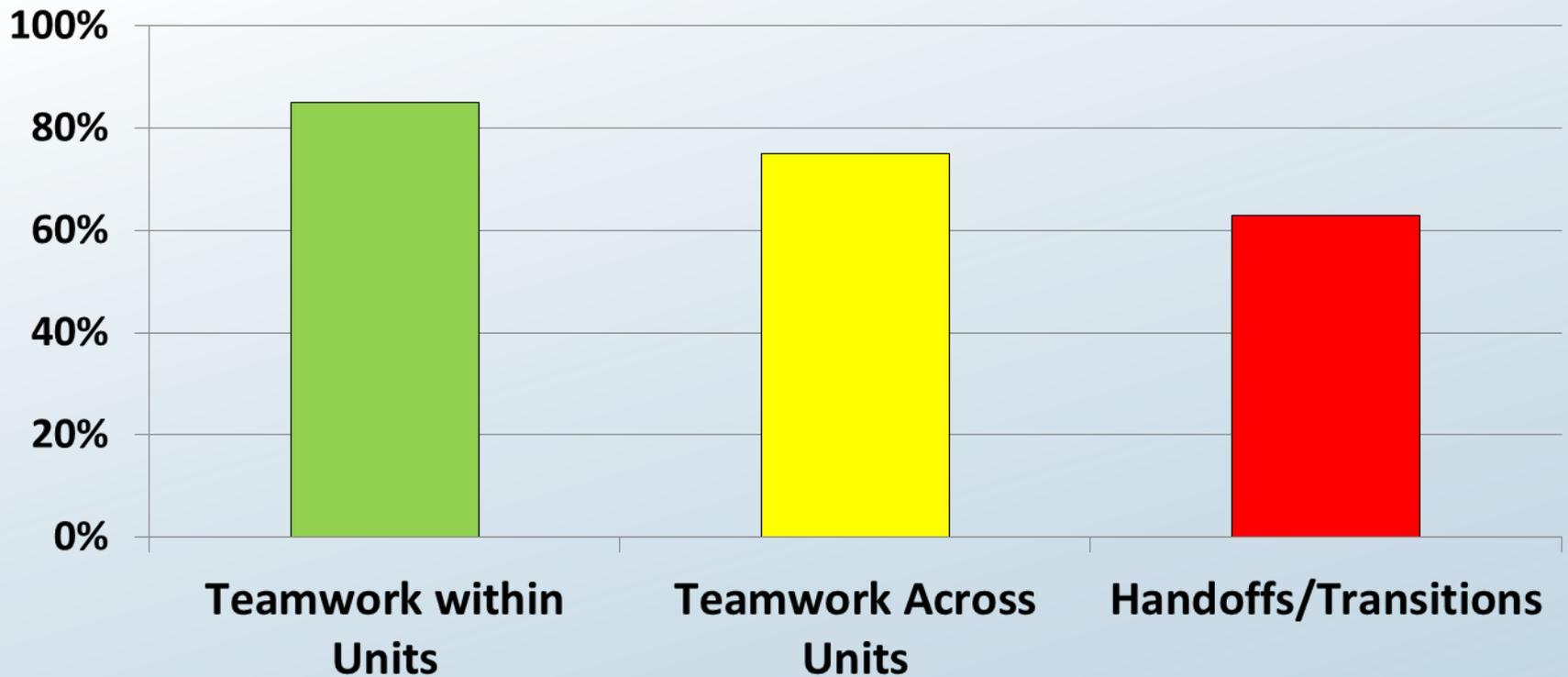
	<b>35 Years Ago</b>	<b>Today</b>
<b>Treatment of Acute Myocardial Infarction</b>	<b>4-6 weeks bed rest in hospital</b>	<b>2-4 day LOS</b>
<b>Available Prescription Drugs</b>	<b>800+</b>	<b>10,000 +</b>
<b>Treatment of Newly Diagnosed Diabetes</b>	<b>3 weeks in hospital 2 hrs/day diabetic education</b>	<b>Outpatient mgmt 0-3 hrs classes Handouts Internet Telemedicine</b>

# System Barriers to Health Literacy

- Increasingly Complex Healthcare System
  - Hospitalists, not your family physician
  - More self-care and self-education expected
  - Multiple handoffs / patient care unit
- cultural issues

# System Barriers to Health Literacy

**EXAMPLE: HSOPS Dimensions of Safety Culture:  
% of respondents giving favorable ratings for their unit**



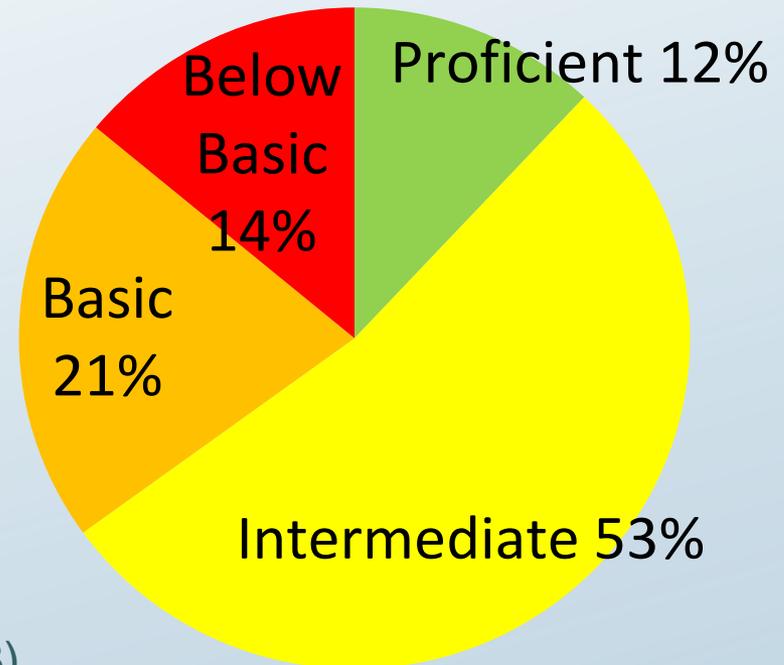
# Patient Related Barriers

## How Well Do Patients Read?

Scored on 4 Levels:

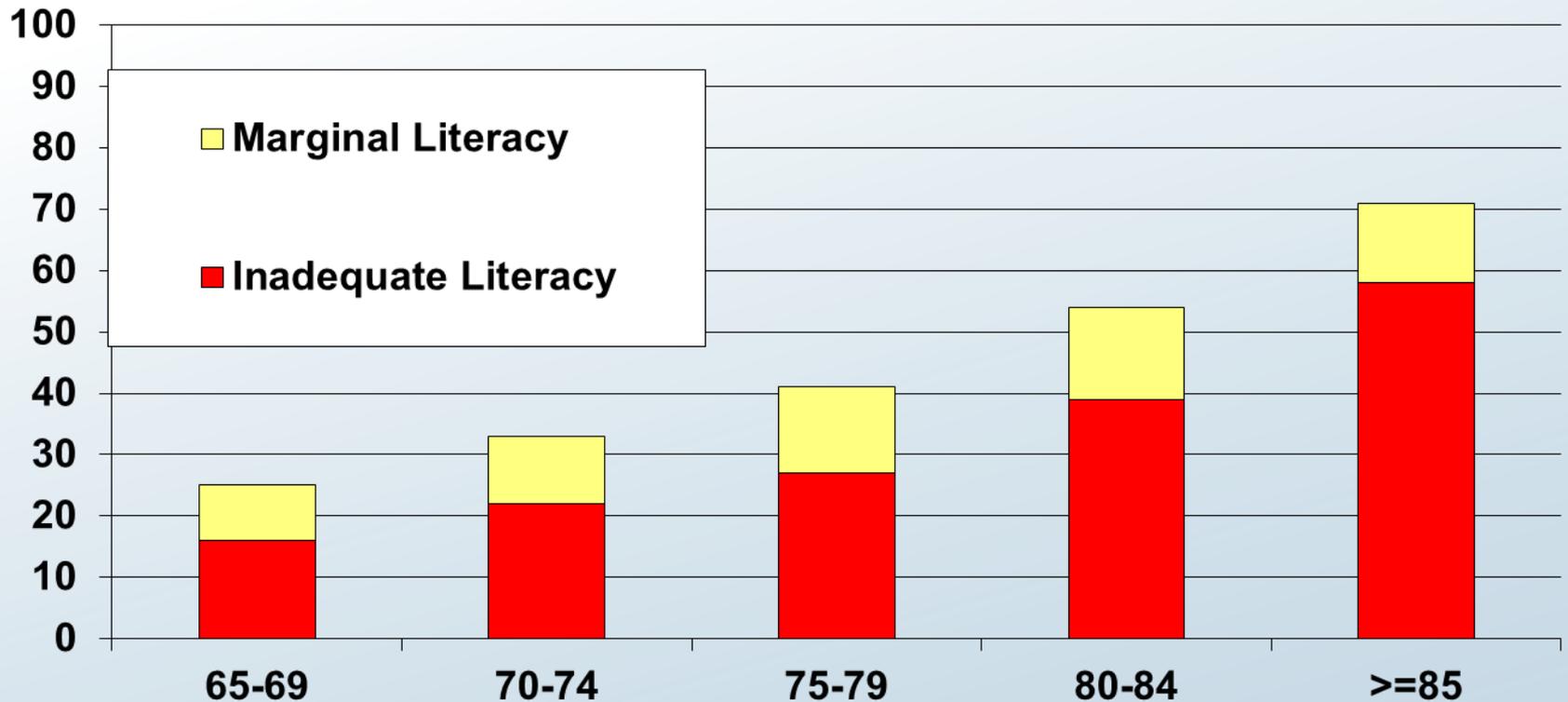
- Proficient 12%
- Intermediate 53%
- Basic 21%
- Below Basic 14%

National Adult Literacy Survey\*



\*(JAMA Feb 15, 2012, V.307, no. 7, p. 653)

# Patient-related Barriers: Aging (Gazmarian, et al. *JAMA* 1999)



# Patient-Related Barriers to Health Literacy: A Teachable Moment?

TAKE CHARGE OF YOUR CARE.

**MEDICAL STUDIES INDICATE**

**MOST PEOPLE SUFFER**

**A 68% HEARING LOSS WHEN NAKED.**

# Physician Barriers



- Physician Attitudes
- Communication Skills
- Time

# Strategies for Improving Medical Communication

## System Level:

- Create a “Patient-Centered” Environment on Your Unit
- Assess all Patients for Literacy

## As Individuals:

- Commit to Improving Your Communication Skills

# System Approaches: Fostering a Patient-Centered Unit

## *Key Strategies:*

1. Adopt an attitude of helpfulness
  2. Respect patients' privacy and dignity
  3. Convey a safe, non-judgmental attitude
- ✓ *Treat all patients as if they were your family!*

# System Approaches: Assess All Patients for Literacy

## *Key Strategies:*

- Initial Patient Assessment
  - how far did they go in school?
  - how do they best learn?
  - social history/support system
  - watch for subtle clues that they don't read well

# System Approaches: Assess All Patients for Literacy

 Red Flags: Patients with literacy issues may:

- Have trouble completing forms
- Be unable to list their medications
- Be labeled “non-compliant” (missing appointments, tests, and referral visits)
- Seem angry or demanding
- Have difficulty explaining concerns or have no questions

# For All Health Team Members: 4 Key Steps to Improve YOUR Skills

## 1. Remember this is a dialogue

- Sit at patient's eye level
- Listen more than you speak!
- Allow time for questions

## 2. Explain things clearly in plain language

- Speak slowly
- Avoid jargon

# For All Health Team Members: 4 Key Steps to Improve YOUR Skills

## 3. Focus on key messages and repeat

*Patients should leave you knowing 3 things:*

- What is wrong?
- What do I need to do about it?
- Why is it important that I follow this plan?

# For All Health Team Members:

## 4 Key Steps to Improve YOUR Skills

4. Use a “teach back” or “show me” technique to check for understanding.

“Can you show me how you will manage your drainage bag when you go for a walk in the hall?”

OR

“I want to be sure I explained everything clearly about your medications, so can you please explain it back to me, so I can be sure I did a good job?”

Try not to ask, “*Do you understand?*”

# For Written Educational Materials: Patient-Friendly Guidelines

## ■ For handouts

- Simple words (1-2 syllables)
- Short sentences (4-6 words)
- Short paragraphs (2-3 sentences)
- No medical jargon
- Headings and bullets
- Lots of white space.

# Summary: Health Literacy

- As many as 35% of your patients may have health literacy issues
- Limits ability to obtain, understand, and act on health information

# Summary: Health Literacy

- Impact of limited health literacy:
  - poor compliance with medical management
  - increased risk of:
    - poor outcomes/adverse events
    - infections/prolonged hospital stays
    - patient/family anxiety

# Summary:

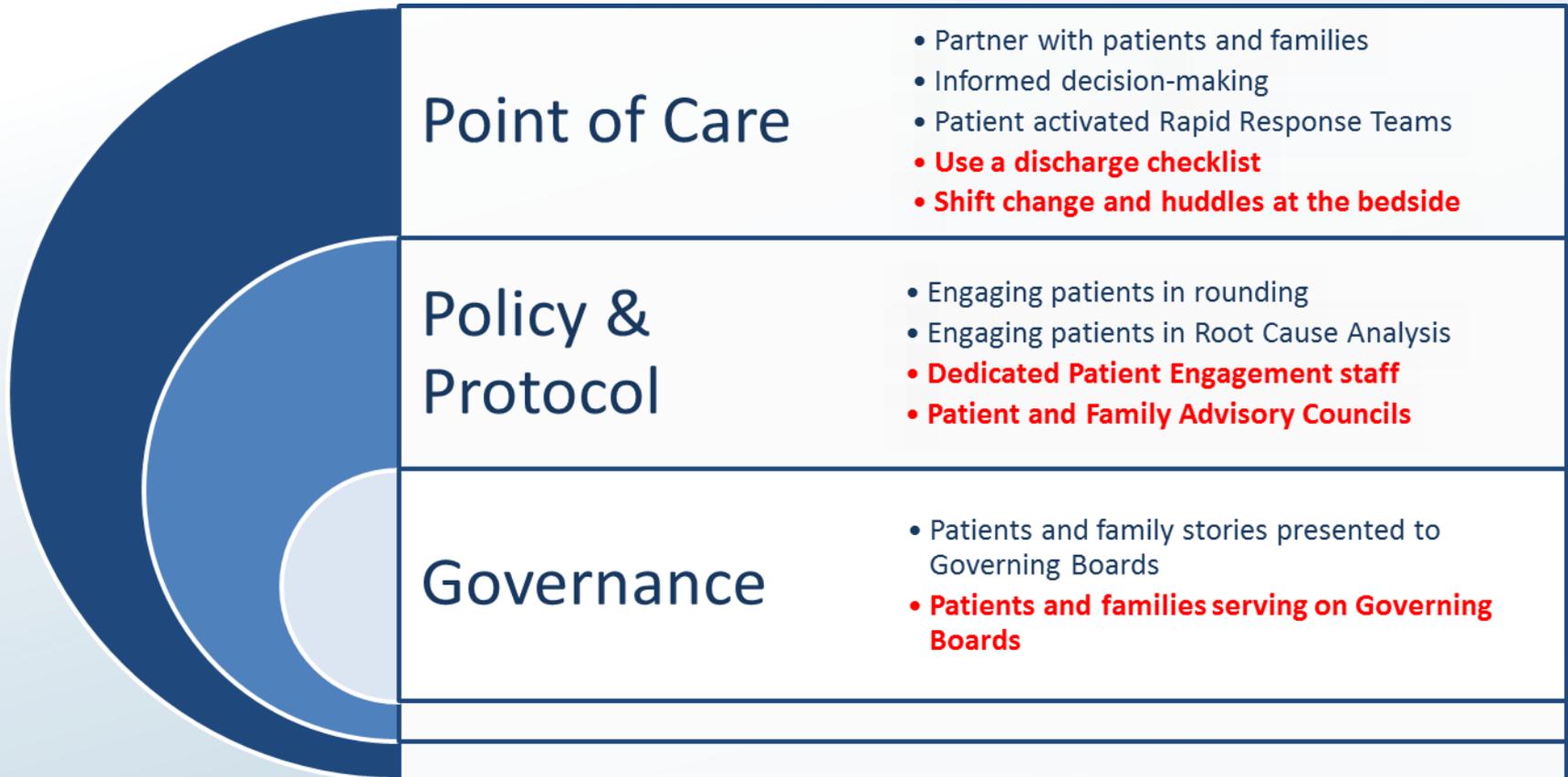
## Health Literacy and Patient Safety

- Barriers to health literacy are multifactorial:
  - Complex healthcare system
  - Patient factors (reading ability, age, emotional overlay)
  - Physician attitudes/communication skills
  - Nursing issues (culture, time)

# Summary: Health Literacy

- Improving patient understanding depends on:
  - a “systems” approach to
    - creating a “patient-centered” unit
    - screening for literacy issues
  - individual staff commitment to improving their communication skills in
    - face to face interaction
    - written educational materials

# Patient & Family Engagement Metrics



# Questions?

Aline M. Holmes, DNP. RN

Senior Vice President, Clinical Affairs

[aholmes@njha.com](mailto:aholmes@njha.com)

609-275-4157

