Patient Engagement: From awareness to action

Living Well with Chronic Disease
May 12, 2015

Rudy Fedrizzi, MD
Director of Community Health Clinical Integration
Cheshire Medical Center/Dartmouth-Hitchcock Keene
Engaged patients make better choices, are more likely to avoid negative or sub-optimal outcomes, are better able to recognize and stop inappropriate or poor quality care, are more compliant, more cooperative and more committed to their health (RWJF issue brief Improving Quality Health Care: The Role of Consumer Engagement, October 2007).
WHAT is Patient Engagement?

- includes reading, understanding and acting upon health information *(health literacy)*; working together with clinicians to select appropriate treatments or management options *(informed and shared decision making)*; and providing feedback on health care processes and outcomes *(quality improvement of care)* (Coulter A. Patient Engagement – What Works? J of Ambulatory Care Management 2012;35(2)).

- active participation in treatment decision making including accessing appropriate care, attending and preparing for appointments, and making use of additional available resources to maintain a high level of involvement with one’s care *(Johnson, MO. The Shifting Landscape of Health Care: Toward a Model of Health Care Empowerment 2011;101(2)).

- evolving concept that began around 2002 as a “therapeutic alliance with provider for better disease self-management” and since 2008 as a multidisciplinary concept to optimize and rationalize health service delivery through *engagees* (patients & caregivers), *engagers* (health professionals, organizations, communities), and *engaging elements* (relationships, tools, interventions, technology/devices) *(Barello S. et al. The Challenges of Conceptualizing Patient Engagement in Health Care: A Lexicographic Literature Review. J Participat Med 2014;6(e9))."
“Patient Empowerment”
– being engaged, collaborative, committed, and tolerant of uncertainty regarding one’s health care (Johnson, MO. The Shifting Landscape of Health Care: Toward a Model of Health Care Empowerment 2011;101(2)).

- having the **knowledge, ability, resources, and motivation** to identify and make healthy choices (National Prevention Strategy, Office of the Surgeon General, 2011)

“Patient Activation”
having the knowledge, skills, and confidence for **taking an active role** in health and the self-management of illness (Hibbard JH et al. Development and Testing of a Short Form of the Patient Activation Measure Health Research and Educational Trust, 2005)

“Patient Effectiveness”
the degree to which one uses health information, clarifies priorities, communicates with care givers, works with the health team, and decides and acts to manage disease (Effective Consumers Scale EC-17 University of Ottawa, 2007).
Patients

Empowered Patients

Engaged Patients

Activated Patients
"Participatory Medicine "
- a model of cooperative health care that seeks to achieve active involvement by patients, professionals, caregivers, and others across the continuum of care on all issues related to an individual’s health (Society for Participatory Medicine).
Patient Engagement Design Team—Charter

Project Description / Opportunity Statement
There is an opportunity to improve how Cheshire Medical Center/Dartmouth-Hitchcock Keene (CMC/DHK) empowers, engages and activates patients in their health care, disease self-management and wellness. Currently we offer a variety of “patient facing” activities and programs in many formats. These efforts are uncoordinated, not necessarily based on evidence, and targeted to patients based on individual need or readiness to change. They are not offered based on a unifying model or framework and are not necessarily aligned with our healthcare delivery system.

Project Scope
This Team will focus on patients of CMC/DHK and residents of the CMC/DHK catchment area. The Team will develop a campus-wide framework for patient empowerment, engagement and activation, and will inventory existing efforts, and identify a process for aligning current and future programs with the model. The Team will develop a process for implementing the framework.

Goal Statement
Develop a campus-wide framework and implementation plan for patient empowerment, engagement, and activation.

Measures
Developed framework and implementation plan with suggested measurement options.

Timeline
Project Start – July 2, 2014
Project Finish – Review after five meetings

Resource Plan
Project Lead(s): VP Population Health
Project Sponsor(s): Les Pitts
Team Members
Jennifer Begley
Susan Berlinger
Rudy Fedrizzi
Eric Goodman
Marika Ostroski
Les Pitts
Patti Schuman
Tom Stearns
Laurie Taylor

Contact Information for Project Lead:
TBD

Updated December 23, 2014
Several Recent Engagement Resources:

**AHRQ Guide to Patient And Family Engagement 2012** – four evidence-based strategies to help hospitals partner with patients and families

1. Working with patients and families as advisors
2. Communicating to Improve Quality
3. Nurse bedside shift report involving patient and family for safe handoffs
4. Ideal discharge planning for transition from hospital to home

**AHA Engaging Health Care Users: A Framework for Healthy Individuals and Communities 2012**

*Individual*: The aim is to increase the skills, knowledge and understanding of patients and families about what to expect when receiving care.

*Health Care Team*: The focus is to promote shared understanding of expectations among patients and providers when seeking care.

*Organization*: The objective is to encourage partnerships and integrate the patient and family perspective into all aspects of hospital operations.

*Community*: The emphasis is to expand the focus beyond the hospital setting and find opportunities to improve overall community health.

**Partnering with Patients to Drive Shared Decisions, Better Value, and Care Improvement: Workshop Proceedings**. *Institute of Medicine, 2014*

**“A Roadmap for Patient + Family Engagement in Healthcare – Practice and Research”. Prepared by the American Institutes for Research under a grant from Gordon and Betty Moore Foundation. 2014**
AHA Framework

Framework for Engaging Health Care Users

Individual
- Increase the skills, knowledge and understanding of patients and families about what to expect when receiving care
- Demographics
  - Prior Experience
  - Knowledge
  - Skills
  - Attitudes
- Health Care Team
  - Promote shared understanding of expectations among patients and providers when seeking care
  - Bedside Inpatient Unit
  - Emergency Department
  - Clinic
  - Exam Room
  - Home
- Organization
  - Encourage partnerships and integrate the patient and family perspective into all aspects of hospital operations
  - Hospital
    - Patient-Centered Health Home (PCHH)
  - Accountable Care Organization (ACO)
- Community
  - Expand the focus beyond the hospital setting and find opportunities to improve overall community health
  - Schools
  - Neighborhoods
  - Public Health
  - Faith-based Groups
  - Community Groups
  - Coalitions

Information Sharing… Shared Decision Making… Self-Management… Partnerships

Source: AHA COR, 2013.

Campus Inventory (things we are doing) | Promising ideas (ideas of what we could do)

Cheshire Medical Center Dartmouth-Hitchcock Keene

Healthy MONADNOC 2020
## Created Registry of Current and Future Activities

### Registry of Existing Patient Engagement Efforts Updated 11-12-2014

<table>
<thead>
<tr>
<th>Strategy Name</th>
<th>What is the delivery/engagement method for this strategy?</th>
<th>What are our expectations (outcomes) for this strategy?</th>
<th>What is the reach of this strategy?</th>
<th>What is the target group for this strategy?</th>
<th>Who to contact about this strategy</th>
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<tbody>
<tr>
<td><strong>Example</strong></td>
<td>Face to face</td>
<td>Phone, Paper, Digital</td>
<td>Improve Knowledge, Change Health Status, Take Action</td>
<td>Grow Public Will, Build Social Connection</td>
<td>Indirect, Family, Primary Circle of Care, Secondary Circle of Support, City/Town, Region, State, Target Group</td>
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<td>Return Demo (show me what you did)</td>
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<td>AHA Framework</td>
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<td>Increase the skills, knowledge and understanding of patients and families about what to expect when receiving care</td>
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<td>AHA Engagement Strategies</td>
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<td>Promote shared understanding of expectations among patients and providers seeking care</td>
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<td>Examples and Best Practices</td>
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<td>Encourages partnerships and integrate the patients and family perspective into all aspects of hospital operations</td>
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<td>Community</td>
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<td>Expand the Focus beyond the hospital setting and find opportunities to improve overall community health</td>
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<tr>
<th>AHA Engagement Strategies</th>
<th>Community Health Classes</th>
<th>Engaging in wellness activities</th>
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<tbody>
<tr>
<td>MyOH</td>
<td>Blood Pressure Cards</td>
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<td>EMMI</td>
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<thead>
<tr>
<th>CMC/DHK current identified Engagement Strategies</th>
<th>Care Team</th>
<th>Engaging in wellness activities</th>
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<tbody>
<tr>
<td>MyOH</td>
<td>Teach back (tell me what you learned)</td>
<td>Engaging in wellness activities</td>
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<td>Return demo (show me what you do)</td>
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<td>Post procedure follow up and outreach</td>
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<td>Family Centered Rounding</td>
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<td>Collaborative Care Nurses and Care Coordinators</td>
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<th>CMC/DHK Identified gaps</th>
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<td>IDEAL Discharge Planning</td>
<td>Patient Experience Team</td>
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<tr>
<td>Shared Decision Making</td>
<td>AIDET/Quality Culture</td>
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<td>Wellness and Self-Management</td>
<td>Employee Wellness</td>
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<td>Activities and Classes</td>
<td>Flexible visiting policy</td>
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<th>Community</th>
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<td>Pastoral Care Ministry</td>
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<td>Hospital collaboration with community care sites</td>
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<td>Transition plans for high risk readmissions</td>
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<td>Support Groups</td>
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<td>Tobacco Program</td>
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<td>Community Health Education</td>
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Our Guiding Principles

1. We will seek opportunities to engage our patients in their health and health care in everything that we do. (Always ask, is this in opportunity to engage our patients?)
2. We will partner with our patients to reduce barriers to improving health.
3. We will work to engage, empower and activate our patients at different points in time and in different places.
4. Patient-centered
5. Quality and safety
6. Improve patient experience
7. Cost effective
8. Community alignment
Low tech Engagement

Evidence-supported wallet cards in English, Spanish, and Portuguese supported by the NH Medical Society
Thank You

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The 3 As to Patient Engagement

“Tell me and I forget. Teach me and I remember. Involved me and I learn.”
~ Benjamin Franklin

Presented by Michelle Gaudet, Communications and Community Engagement Manager, Lamprey Health Care
Knowing your audience isn’t enough. To really communicate, you need to **understand** and **empathize** with them.

Consider this statement:

“We provide high quality asthma care.”
Your Message

What does that mean to you, as a care provider?
• You follow best practices
• You meet nationwide standards for care
• You’re really strong in certain asthma care indicators

What does it mean to the patient? It might mean…
• My doctor listens to me
• My doctor spends time with me
• My doctor can see me when I need to be seen

But what if that patient is homeless? Then it might mean…
• My doctor didn’t judge me
• My doctor treated me with respect
• My doctor’s office helped me get other services
AVAILABILITY

Answer my phone call
~ ON THE FIRST RING

Schedule my appointment
~ ON THE EXACT DAY AND TIME I WANT IT

Check me in
~ ASAP

Why am I still in the waiting room?
~ THAT GUY ARRIVED AFTER ME

The doctor only spent 5 minutes with me
~ I MAY HAVE CALLED FOR A UTI BUT I HAVE 6 OTHER ISSUES AND THE DOCTOR NEEDS TO DEAL WITH ALL OF THEM TODAY
AFFABILITY

Everything and everybody the patient comes in contact with is an ambassador for your practice!

- Professional Services (Pathology, Lab, etc.)
- Billing & Collections
- Building Maintenance Vendors
- Outdated Magazines in the Lobby
- Scratchy Toilet Paper

“Someone calling themselves a customer says they want something called service.”
Most patients assume that medical professionals are good at what they do.

If you are trying to attract new patients to your practice, and you don’t deliver on availability and affability, it won’t matter how good your ability is.
KEY POINT

When you communicate with patients, it has to be about the things they care about.

Getting back to our earlier statement,

“**We provide high quality asthma care.**”

How can we reframe that message to appeal to patients, while still conveying your message?

My Health, My Care, City of Nashua Division of Public Health and Community Services in collaboration with the Access to Health Care Work Group

https://www.youtube.com/watch?v=5d5yFtrhuK8
CHOOSING A MEDIUM

How do you communicate with your patients?

Find out where they are and go there.
You can’t be everywhere, but you have to be somewhere.

Gather data, while avoiding analysis paralysis.
Avoid Analysis Paralysis

What are some things you may want to find out from your patients?

- How did you find us?
- How do you usually search for information?
- Do you use the internet?
- Do you use social media?

These can help you identify places your patients are that you might be missing out on.

- What do you like most about us?
- What can we improve upon?

These can help you narrow down which parts your 3 A’s (availability, affability and ability) your practice might need to improve upon to retain patients.

Don’t forget about patient demographics: Age ▲Gender ▲Income ▲Education

This information will help you hone your message and determine what medium you choose to communicate your message.
SOCIAL MEDIA

Social Media & HIPAA – Resources

- Dept. of Health and Human Services
- Centers for Disease Control
- American Medical Association

Don’t
- Be nasty, mean or a jerk
- Try to police the internet
- Be defensive or accusatory
- Delete posts
- Be dismissive of the criticism

Do
- Stay positive
- Respond
- Be genuine
- Own it
- Offer an apology AND a solution
Q&A

“As we have just five mins left, I will take just 3 million questions.”