



Promoting Improved Interventions and Clinical Outcomes in Diabetes Care

Diabetic Patient Engagement for Education & Self-Management
Training Session 3A

May 29, 2019



Hello!



Cheryl Fattibene



Jillian Bird

Promoting Improved Interventions and Clinical Outcomes in Diabetes Care

- 1A: Care Teams Training
- 1B: Care Teams Facilitation
- 2A: Pre-Visit Planning Training
- 2B: Pre-Visit Planning Facilitation
- 3A: Patient Engagement Training – Today
- 3B: Patient Engagement Facilitation – Wed., June 12, 1:30-2:00 PM EDT

National Nurse-Led Care Consortium

The **National Nurse-Led Care Consortium (NNCC)** is a membership organization that supports nurse-led care and nurses at the front lines of care.

NNCC provides expertise to support comprehensive, community-based primary care.

- Policy research and advocacy
- Technical assistance and support
- Direct, nurse-led healthcare services



Acknowledgements

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This learning collaborative was sponsored by the National Association of Community Health Centers (NACHC) and draws upon tools, resources, and best practices developed by NACHC and the Clinical Advisory Group convened by NACHC to provide subject matter expertise for its *Improve Diabetes Care in Health Centers* project.



Welcome & Introductions

Morris Charts

Line Chart



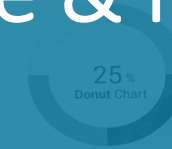
Area Chart



Bar Chart



Donut Chart



Sparkline Charts

Line Chart



Bar Chart



Pie Chart



Easy Pie Charts



Getting to know you...

In the chat box, for each participant, please enter:

1. Your name and email (necessary for CE credit)
2. Your role.
3. Your organization.
4. From your experience with your tests of change or expertise on diabetes treatment in general, share one area you consider a priority for diabetes management.

Learning Objectives

1. Identify opportunities for engaging patients in diabetes care.
2. Apply evidence-based strategies to improving patient and family engagement to achieve high-quality health care.
3. Create plan to engage patients in self-management using identified strategies

Today's Schedule

Time	Module	
15 minutes	Welcome and Introductions	<ul style="list-style-type: none">• Orientation to the session and goals• Review of Care Team work
10 minutes	Small test of change open share	<ul style="list-style-type: none">• Share outcomes of PDSA cycles related to pre-visit planning
5 minutes	Topic 1: Patient engagement in self-care	<ul style="list-style-type: none">• Evidence base and theory behind patient engagement
25-30 minutes	Topic 2: Teach Back and Be Prepared to Be Engaged	<ul style="list-style-type: none">• Overview of patient engagement tools• Implementation in the practice setting and evaluation
10-15 minutes	Q+A	
5 minutes	Conclusion/Wrap-Up Practice Transformation Work: PDSA of choice	



Small test of change report back:

Open share – Please update the group on any areas of success or challenges

Share the direction you are hoping to take to support improved diabetes care management.



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CONSORTIUM**
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Topic 1: Patient Engagement in Self-Care

Morris Charts

Line Chart



Area Chart



Bar Chart



Donut Chart



Sparkline Charts

Line Chart



Bar Chart



Pie Chart



Easy Pie Charts



Patient Engagement vs. Patient Activation

Patient Engagement

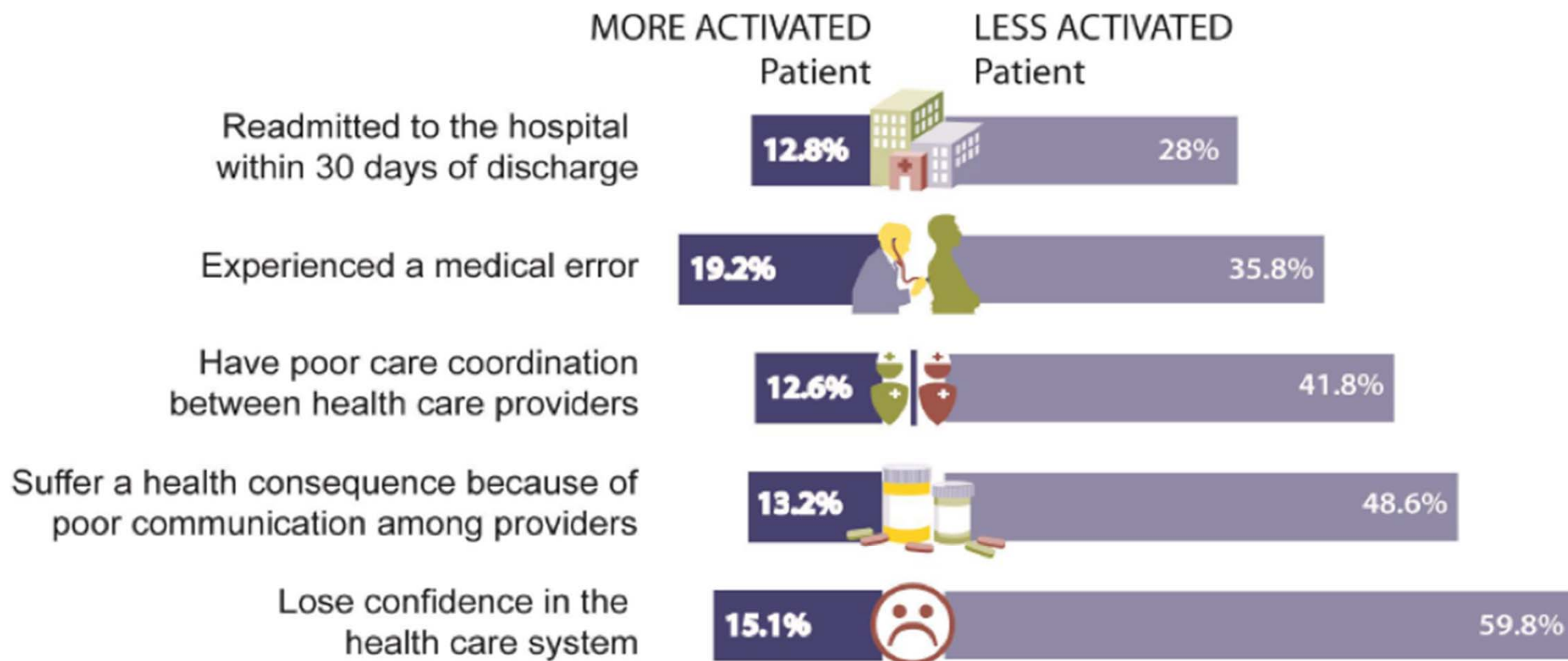
- Emotional involvement or commitment.
- Patient engagement is a broader concept designed to promote positive patient behavior.

VS

Patient Activation

- To set in motion. To make active or more active.
- Building confidence through experiential learning and small steps is the key strategy for increasing activation.

The MORE ACTIVATED you are in your own health care, the BETTER HEALTH CARE you get...



Source: Adapted from AARP & You, "Beyond 50.09" Patient Survey. Published in AARP Magazine. Study population age 50+ with at least one chronic condition. More Involved=Levels 3 & 4, Less Involved=Levels 1 & 2

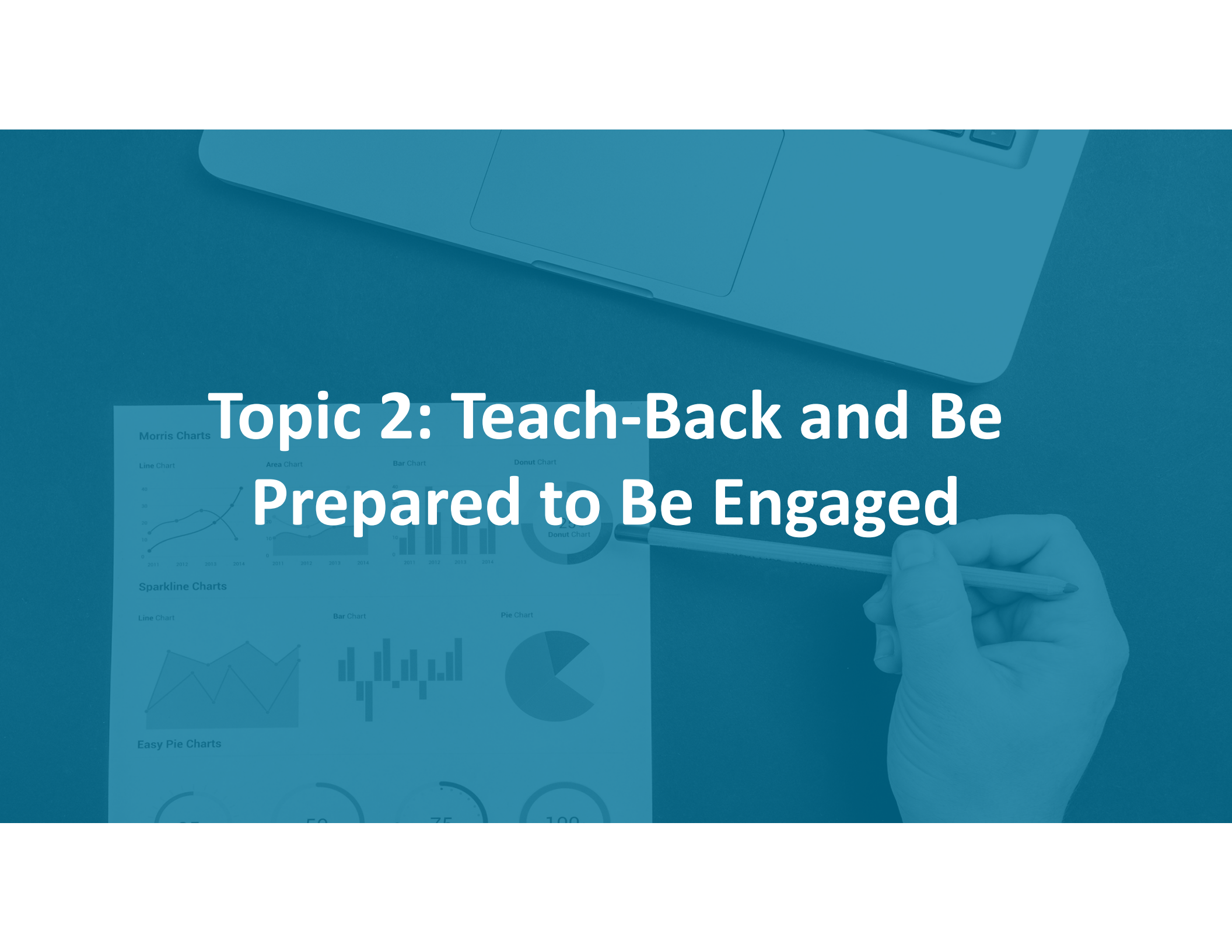
Diabetic Patient Engagement

Evidence for Diabetic Education

- Tailored information more likely to lead to diabetic behavior change
- Electronic, individualized education shown improvements in diet and metabolic indicators
- Skills-based self-management education improves psychological health

Evidence for Diabetic Patient Engagement

- Provider-patient communication associated with positive diabetic health outcomes
- Coaching, group education, and group visits shown to improve diabetic outcomes
- Motivational interviewing found to help – with substance abuse and diet, not diabetes

A hand holding a pencil points to a grid of various data charts. The charts include Morris Charts (Line, Area, Bar, Donut), Sparkline Charts (Line, Bar, Pie), and Easy Pie Charts. The background is a blue-tinted image of a laptop and a hand holding a pencil.

Topic 2: Teach-Back and Be Prepared to Be Engaged

Morris Charts

Line Chart



Area Chart



Bar Chart



Donut Chart



Sparkline Charts

Line Chart



Bar Chart



Pie Chart



Easy Pie Charts





MedStar Health
Institute for Quality and Safety

Achieving High Quality Diabetes Care through Patient Engagement

Presenter: Kelly M. Smith, PhD

Knowledge and Compassion
Focused on You



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Institute for Quality and Safety

Learning Objectives

- Identify opportunities for engaging patients in diabetes care.
- Apply evidence-based strategies to improving patient and family engagement to achieve high-quality health care.

High Quality Health Care





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422
MILLION

422 million people have diabetes in the world



that's about 1 out of every 11 people

1 OUT OF 4

do not know they have diabetes

REGULATION
INSULIN MELLITUS
 T2D INJECT ENERGY
 COMPLICATION **BLOOD SUGAR** EXERCISE
 WEIGHT **DIABETES** BETA CELLS
 DIET **SUGAR** HORMONE
 BODY HEALTH PANCREAS PREVENTION
 BLINDNESS **FOOD** BLOOD PRESSURE
 AUTOIMMUNE DISEASE
BLOOD GLUCOSE

Knowledge and Compassion **Focused on You**

Diabetes Self-Management Education and Support



Healthy
Diet



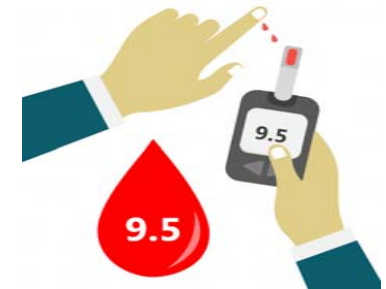
Physical
Activity



Healthy
Weight



Regular
checkups



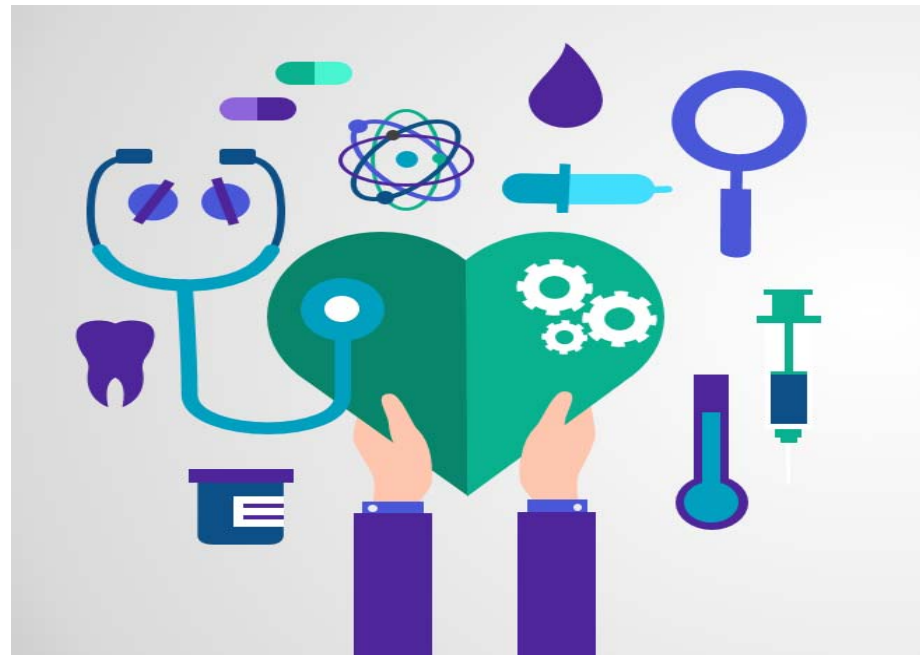


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Patient Engagement – Strategies for Success

SO HOW CAN WE HELP OUR PATIENTS?

Engagement Strategies to Improve Diabetes Care



Optimizing Engagement at the Clinic



Before the
Encounter



During the
Encounter



At the End of the
Encounter

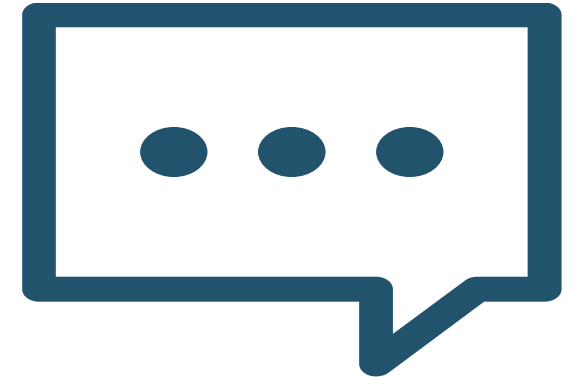
What is Be Prepared to Be Engaged?



Be ready



Ask questions



Speak up

**What they want to
talk about**

Their questions

Their health goals



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Be Prepared. Be Engaged.

Today I want to talk about...

1.

2.

3.

I have questions or concerns about...

My medicines

My medical tests

My treatments

My health goals are...





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What is Teach-back?

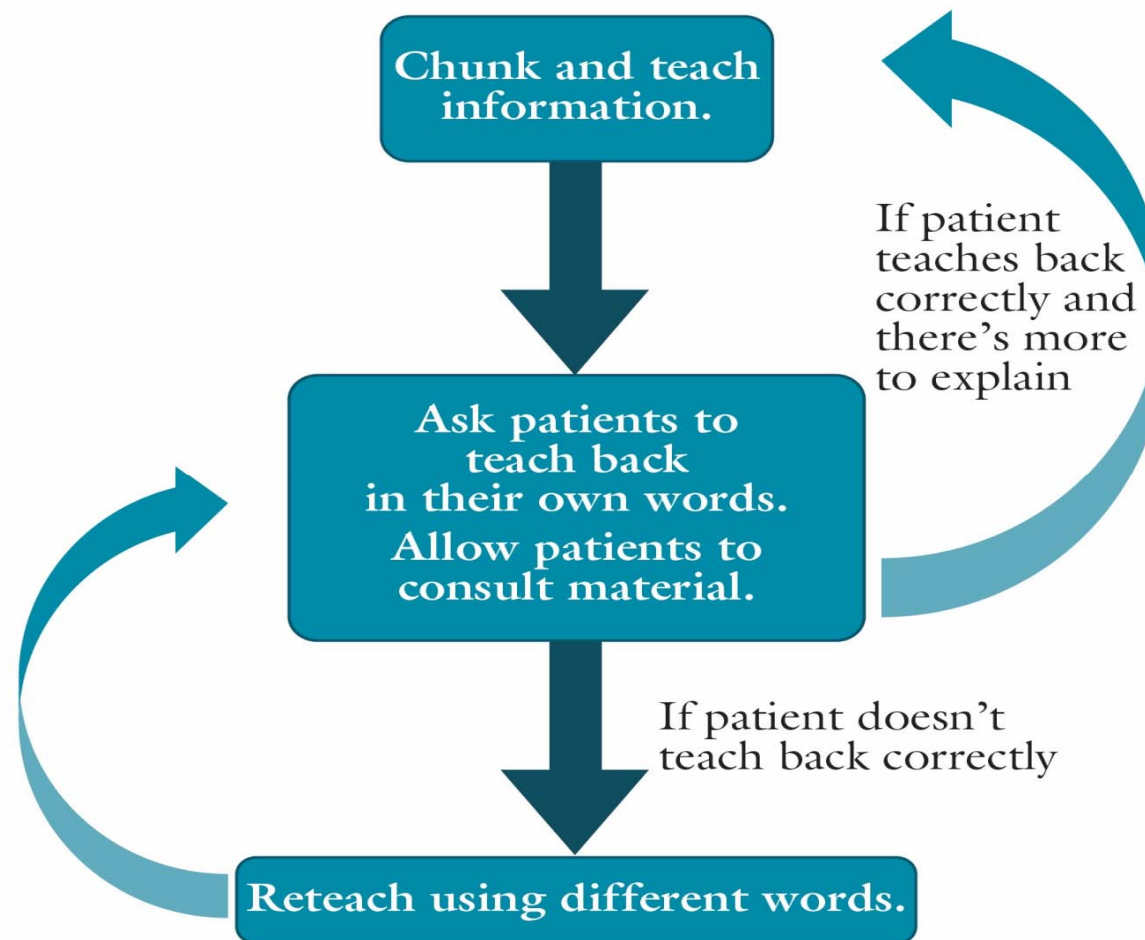
“I want to make sure we are on the same page. Can you tell me...”

“Can you show me how you would you inject your insulin at home?”

“I want to make sure I explained things clearly. Can you explain to me...”

Knowledge and Compassion **Focused on You**

How do I use Teach-Back?





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**HOW MANY OF YOU CURRENTLY USE TEACH-
BACK IN YOUR PRACTICE?**

**HOW MANY OF YOU HAVE ADOPTED A
STRATEGY FOR AGENDA SETTING IN YOUR
PRACTICE?**



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Scenario

- Mrs. Martin – 63-year-old female
- Recent diagnosis of Type 2 Diabetes
- Metformin plus lifestyle changes
 - Daily log of her blood sugars
- 3-month follow-up visit





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Mrs. Martin

Be Prepared. Be Engaged.

Be Prepared. Be Engaged.

Today I want to talk about...

1. Why is my blood sugar still so high?
2. Why am I having stomach pains + diarrhea? What is wrong? Cancer?
- 3.





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Mrs. Martin

Be Prepared. Be Engaged.

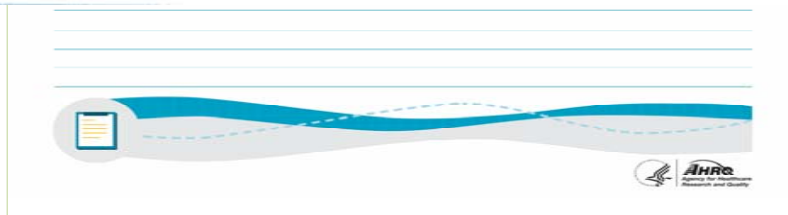
I have questions or concerns about...

My medicines

My medical tests

My treatments

How often do I really need to take my bloodsugar?
My fingers are so sore.





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Mrs. Martin

Be Prepared. Be Engaged.

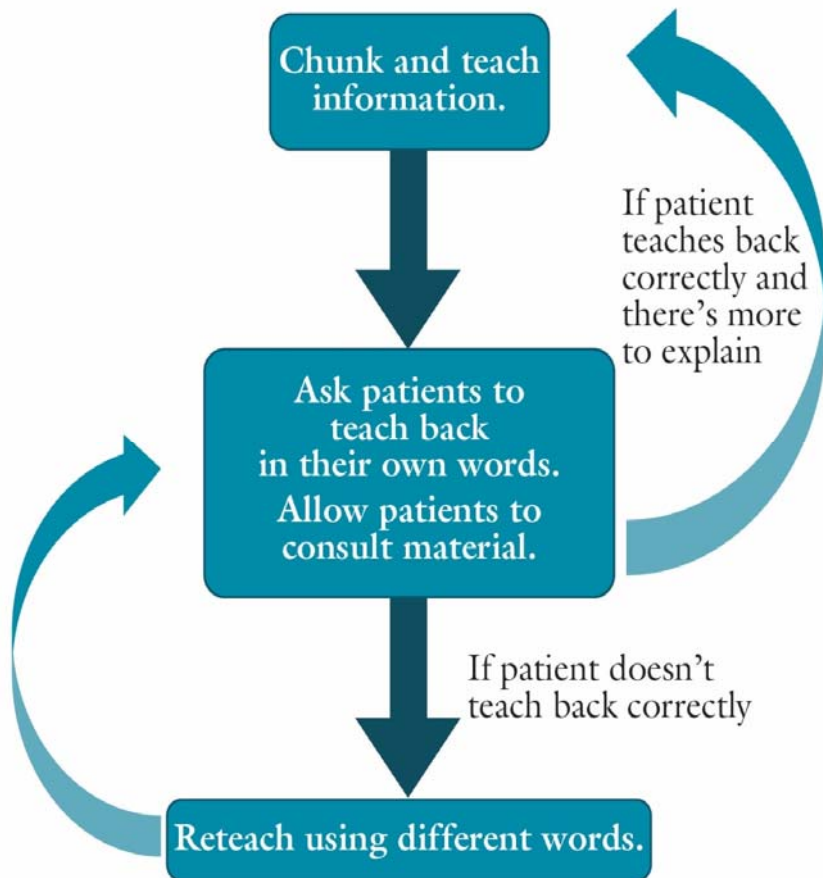
My health goals are...

To have more time with my grandchildren
and more energy. I am worried about
how to take care of my diabetes.



Knowledge and Compassion **Focused on You**

– How can you use Teach-back to...



- Confirm understanding of the GI symptoms and next steps?
- Blood sugar monitoring?
- Concerns about being successful with her diabetes care plan?



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Questions?

- Materials and guides for implementing

Be Prepared to Be Engaged
Teach-Back

Available at: <https://www.ahrq.gov/professionals/quality-patient-safety/patient-family-engagement/pfeprimarycare/strategies.html>

How can I get Started?

- Identify a champion leader
- Develop a process for engaging patients and families using the intervention
- Engage entire practice team
- Inform patients & families
- Evaluate & refine process



Recognizing Success: Teach-Back

Fact

Studies have shown that 40-80% of the medical information patients are told during office visits is forgotten immediately, and nearly half of the information retained is incorrect.

Patient Outcomes

- Improve patient understanding and adherence.
- Improve patient satisfaction and outcomes.

Practice Outcomes

- Decrease call backs and cancelled appointments.
- Improved staff satisfaction
- Improved teamwork and engagement

Teach-Back Competency

- Conviction and Confidence Scale

Recognizing Success: Be Prepared to be Engaged

Patient Outcomes	Practice Outcomes
<ul style="list-style-type: none">▪ Improve patient understanding and adherence.▪ Improved health outcomes▪ Improve patient satisfaction and outcomes.▪ Improved patient safety	<ul style="list-style-type: none">▪ Reduced rate of “no-shows”▪ Enhanced coordination with healthcare team and broader healthcare community▪ Improved staff satisfaction



Final Questions



Improving Health Systems & Infrastructure

Clinical Policy

Standing Orders

EHR: Structured Data

Leadership

Clinical Champion

Optimizing Provider & Multidisciplinary Teams

Care Team Training

Motivational Interviewing

Pre-Visit Planning

Group Visits

Expand Job Roles

Facilitating Behavior Change in Patients

Patient Self-Management

Patient Education

Obesity Screening

Obesity Reduction

Depression Screening

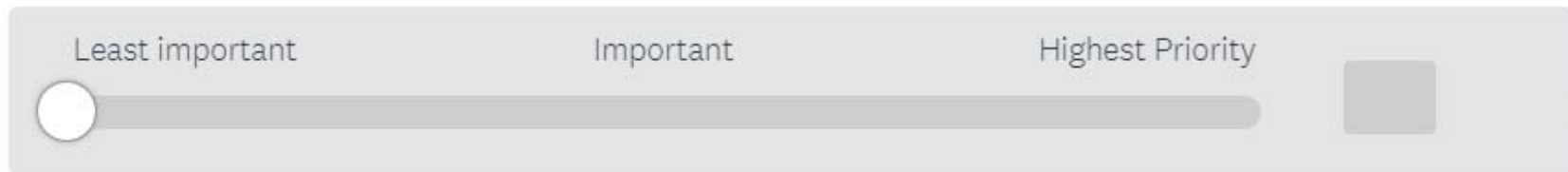


Survey on the NACHC Change Package

We would like to invite each of you to participate in a survey to help calibrate the importance of each of their following evidence-based interventions. We will ask you evaluate the following areas and which your feel need a greater emphasis for training and technical assistance purposes.

1. Clinical policy. Clinical policies and procedures are necessary to organizational change and quality improvement

Least important Important Highest Priority



Present your work at our annual conference

NURSE-LED CARE CONFERENCE 2019
DESIGNING THE FUTURE OF HEALTHCARE



CALL FOR ABSTRACTS

Submit an abstract today for our Nurse-Led Care Conference in Nashville, Tennessee on October 1-3. We are convening nursing leaders and advocates from across the country to learn about the transformative role that nurses play in designing the future of healthcare.

DUE: MAY 31, 2019

Want to share your experience with Improved Interventions and Clinical Outcomes in Diabetes Care? Please consider submitting an abstract at www.nurseledcare.org

Final Reminder!

Practice Transformation Work

1. Create plan to engage patients in self-management using identified strategies
2. Resources available in session 3A on Moodle
 - a. Forum for sharing tools/ideas in Moodle
3. Session 3B: check in to share progress & feedback, wrap up Learning Collaborative with goal setting, prepare for NACHC feedback survey.

THANK YOU!



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