



VALUE TRANSFORMATION FRAMEWORK

Action Guide

HEALTH CENTER



CARE DELIVERY



INFRASTRUCTURE



PEOPLE



PATIENTS

PATIENT ENGAGEMENT

WHY

Engage Patients In Care?

There is mounting evidence that patient involvement with shared decision-making and self-care improves health care quality and outcomes at a lower cost^{1,2,3,4,5,6,7,8}. Engaging patients in their own care and treatment decisions is encouraged by leading health care authorities such as the Agency for Healthcare Research and Quality (AHRQ)⁹ and the Institute of Medicine (IOM)¹⁰. Patient-centered medical home (PCMH) recognition and accreditation organizations—including the National Committee for Quality Assurance,¹¹ the Joint Commission,¹² and the Accreditation Association for Ambulatory Health Care¹³—all address patient engagement in their core principles.

Expectations around patient engagement are embedded in national health care legislation as part of the Affordable Care Act (Section 3506)¹⁴. It is a required component of the Medicare Shared Savings Program, and it is under consideration for Centers for Medicare and Medicaid (CMS) coverage.

Building a truly patient-centric health system requires actively engaging patients. It is a system where patients make informed decisions based on, not only provider and care team expertise, but also their own skills, capabilities, values, and goals. A robust patient engagement process is central to a health system that delivers on the Quadruple Aim: improved health outcomes, improved patient and provider experiences, and lower costs.

This Action Guide addresses the development of patient-centric care systems through two key concepts: shared decision-making and self-care.

- **Shared decision-making (SDM)** is when health care providers and patients (including their family members and caregivers) work together to make a decision that is best for the patient. This decision-making process considers evidence-based information about available options, the provider’s knowledge and experience, and the patient’s values and preferences¹⁵.
- **Self-care** support is the assistance provided to patients, especially those with chronic conditions, that enables them to manage their health on a day-to-day basis¹⁶.



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The Value Transformation Framework addresses ways to intentionally and actively incorporate the patient perspective into governance, care system design, and individual care. This Action Guide draws on research and the experience of high-performing health care providers to offer proven strategies for patient engagement.



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WHAT

Can Health Centers Do Differently When It Comes to Patient Engagement?

A comprehensive patient engagement strategy relies on a team approach, and creating “a culture of empathy in the practice that is palpable to patients”¹⁷. Patients make choices based on how staff make them feel, not just the quality of care provided. An organizational approach to shared decision-making and self-management strategies has been shown to positively affect both patient and provider satisfaction¹⁶.

Patient engagement “is not trying to get patients to act in spite of their motivations, or in spite of a set of behaviors that they’re not inclined to do. It’s about understanding human motivation more deeply, and then channeling it [to]... enable patients to act in beneficial ways.”¹⁸



HOW

to Engage Patients in Care?

While there are many proven strategies for developing patient-centric systems, the first step begins with health center staff. Each member of the health care team should have accountability for patient engagement as part of their job role and task list (see the [Care Teams Action Guide](#)). Patient engagement is everyone’s responsibility.

*The process of sharing in the decision-making tasks involves developing a partnership based on empathy, exchanging information about the available options, deliberating while considering the potential consequences of each one, and making a decision by consensus*¹⁹.

PATIENT ENGAGEMENT ACTION STEPS:

This Action Guide provides health centers with a list of actionable steps to support and engage patients in meaningful partnerships with the health care team.

- STEP 1 Identify a Patient Engagement Lead:** Although every team member should participate in patient engagement, designate and train one key member of the staff whose role it is to maintain an organizational focus on patient engagement and staff development in related skills and strategies.
- STEP 2 Establish Patient Engagement Metrics:** Create a reasonable process for surveying patients on their health care experiences, health care goals, and current self-care knowledge.
- STEP 3 Use Daily Huddles to Support Patient Engagement:** Implement daily huddles with time for pre-visit planning and to anticipate patient education and self-care needs and resources, with discussion about the ways every team member can help.



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- STEP 4 Enhance Patient Communication Skills:** Communicate with patients in their language, and at their level of understanding (use the “Ask-Tell-Ask” technique). Help them set realistic expectations and identify the steps needed to reach their goals.
- STEP 5 Provide a Written Care Plan or Visit Summary:** Provide every patient with a written visit summary or care plan after each visit.
- STEP 6 Use Patient Decision Aids:** Provide patients with decision aids that are in a format and language appropriate for their culture, reading level, and background.
- STEP 7 Train Staff in Patient Engagement:** Clinicians and staff should be trained on how to communicate effectively with diverse patients, how to facilitate shared decision-making, and where to find online and print resources for patient education. Training should include cultural competency, with a focus on cultural differences in health beliefs, screening, and care.

STEP 1 Identify a Patient Engagement Lead. Designate and train a member of the staff whose role it is to maintain an organizational focus on patient engagement, including support for staff development in this area.



Action item: Identify a staff member to be the patient engagement lead.

STEP 2 Establish Patient Engagement Metrics. Health care organizations focused on the Quadruple Aim need to establish at least one performance metric for the ‘patient experience’ goal. Studies show that shared decision-making improves patients’ satisfaction with, and involvement in, their health care²⁰. At a minimum, health centers should establish a process for surveying patients on their experience and self-care knowledge at least annually. Results should be reviewed for themes and trends that drive future improvement efforts.



Action item: Administer a patient experience survey on a regular basis (at least annually). Examples are available [here](#).





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STEP 3

Use Daily Huddles to Support Patient Engagement. Implement daily huddles that include pre-visit planning, which allows teams to anticipate care needs. This planning period frees time during the visit for providers and staff to build a collaborative partnership with patients. Care teams that participate in huddles report better teamwork and more supportive practice climates. An open and trusting environment is critical to team effectiveness and improvement. See the [Leadership Action Guide](#) for steps supporting 'psychological safety'. See also, [sample huddle checklist and tools](#). Providers who huddle also report greater self-efficacy for implementing patient-centered medical home changes²¹.



Action item: Implement daily huddles that include pre-visit planning. Huddles should include a process for care teams to periodically assess how well the team functions.

STEP 4

Enhance Patient Communication Skills: While successful health care organizations establish standards of care for patients, recommended care may not be realized if it is not aligned with patients' goals, priorities, and knowledge. Care team members must become reflective listeners. Providers should set the norm that it is okay for patients to ask questions and offer suggestions to improve their own care. Research shows that a provider's communication style can influence patients to become more active in decision-making²². Providers can use the tools of partnership-building and supportive communication to facilitate patient involvement. Training in these skills is often required and can be supported by identifying a staff member to serve as a patient engagement lead (Action Step #1).



As part of a patient engagement strategy, institute a formal way to ask patients what they would like to accomplish at their visit. A [Pre-Appointment Questionnaire](#) can be used at check-in with follow-up by the care team. Assessing a patient's level of motivation for engagement, through observation and discussion, is critical before taking steps forward.

Incorporate the *Ask-Tell-Ask* method²³. First, Ask for permission to share information. If permission is given, provide information (Tell). Consider a patient's language and culture. Share information in small bits — using pictures or graphics and decision tools. Then, Ask if the patient understands. See [Ask-Tell-Ask Worksheet](#) and [1 minute ASK-TELL-ASK informational video](#). The last step, asking patients what they heard, is an approach for [Closing the Loop](#), or 'teach back'.




Action Items: Institute a few formal strategies to improve the communication and reflective listening skills of each provider and team member. Consider the pre-appointment questionnaire, the "Ask-Tell-Ask" method, and a way to set/track realistic goals for patient progress.

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STEP 5 **Provide a Written Care Plan or Visit Summary.** An important step in patient engagement, and incorporating patients as members of the care team, is to provide each patient with a written care plan or visit summary after each visit. Develop or enhance templates for written care plans or visit summaries so that each patient receives a comprehensive plan/summary after each visit. Design patient visit processes to include patient goal setting and, where appropriate, the development of an action plan. Set realistic goals and recognize that progress may involve small, incremental changes over time²⁴. Patients should see themselves as members of their care team. Other helpful tools for engaging patients include: patient education materials and instructions for patients on how to use the patient portal.

 **Action item:** Provide every patient with a written visit summary or care plan, including goals based on their abilities and self-care goals arrived at through a process of shared decision-making. Where appropriate, include a written [Action Plan](#) and timeline for self-care.

STEP 6 **Use Patient Decision Aids.** Decision aids help patients engage in their care decisions and feel more satisfied with their care^{15,25}. Provide patients with decision aids in a format and language appropriate for their culture, reading level, and background. Explore the [Make It Your Own](#) website for customizable tools. Resources can be shared during visits and via the patient portal.

A decision aid, for instance, could list the minimum set of care services and areas of clinical focus, such as diabetes management, heart health, asthma, or smoking cessation (see [Care Teams Action Guide](#)). Provide patients with the decision aid early in the visit (e.g., at check-in) so that it serves as both an informational tool for patients and a prompt for the care team.

 **Action item:** Create or use existing patient decision aids for each target group. Incorporate patient decision aids as part of the patient visit process.

STEP 7 **Train Staff in Patient Engagement.** Building a patient-centric model of care requires a culture of teamwork, open communication, and continuous learning. Training should include cultural competency and an understanding of cultural health beliefs, prevention, and care. Train clinicians and staff in how to communicate effectively with diverse patients and about diverse care decisions. Include training in the use of decision aids and where to access credible online patient education tools or referral sources. Consider the free webinar from [AHRQ's SHARE Approach](#), a five-step process for shared decision-making. CME/CE credits are available.

Build a process for regular training and measurement as part of annual performance reviews. Organizations that offer staff access to IHI's Open School can include the 'Introduction to Patient-Centered Care' course in their training. Add accountability for patient engagement to each team member's task list. Patient engagement is everyone's responsibility.



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Action item: Schedule training for the care team in shared decision-making and patient self-care. Offer training to all staff in cultural competency, communication skills, and patient aid resources.

References

- Arterburn, D., Wellman, R., Westbrook, E., Rutter, C., Ross, T., McCulloch, D., Handley, M., Jung, C. (2012). Introducing Decision Aids at Group Health was Linked to Sharply Lower Hip and Knee Surgery Rates and Costs. *Health Affairs*. 31(9), 2094-2104.
- Bodenheimer T., Lorig, K., Holman, H., Grumbach, K. (2002). Patient Self-Management of Chronic Disease in Primary Care. *Journal of the American Medical Association*. 288(19), 2469-2475.
- Carman, K.I., Dardess, P., Mauzerer, M.E., Workman, T., Ganachari, D., Pathak-Sen, E. *A Roadmap for Patient and Family Engagement in Healthcare Practice and Research*. Palo Alto, CA. Prepared by the American Institutes for Research under a grant from the Gordon and Betty Moore Foundation. Accessed August 20, 2017 at <http://www.air.org/project/roadmap-guides-patient-and-family-engagement-healthcare>.
- Clever, S.L., Ford, D.E., Rubenstein, L.V., Rost, K.M., Meredith, L.S., Sherbourne, C.D., Wang, N.Y., Arbelaez, J.J., Cooper, L.A. (2006). Primary Care Patients' Involvement in Decision-Making is Associated with Improvement in Depression. *Medical Care*. 44(5), 398-405.
- Naik, A.D., Kallen, M.A., Walder A., Street, R.L., Jr. (2008). Improving Hypertension Control in Diabetes Mellitus: the Effects of Collaborative and Proactive Health Communication. *Circulation*. 117(11), 1361-8.
- Schoen, C., Guterman, S., Shih, A., Lau, J., Kasimow, S., Gauthier, A., Davis, K. (2007). *Bending the Curve: Options for Achieving Savings and Improving Value in U.S. Health Spending*. The Commonwealth Fund. Commission on a High Performance System. Washington, DC: The Commonwealth Fund.
- Veroff, D., Marr, A., Wennberg, D.E. (2011). Enhanced Support for Shared Decision Making Reduced Costs of Care for Patients with Preference-Sensitive Conditions. *Health Affairs*. 32, 285-293.
- Wilson, S.R., Strub, P., Buist, A.S., Knowles, S.B., Lavori, P.W., Lapidus, J., Vollmer, W.M. *Better Outcomes of Asthma Treatment (BOAT) Study Group. (2010)*. Shared Treatment Decision Making Improves Adherence and Outcomes in Poorly Controlled Asthma. *American Journal of Respiratory and Critical Care Medicine*. 181(6), 566-77.
- Agency for Healthcare Research and Quality. (2002). *Expanding Patient-Centered Care to Empower Patients and Assist Providers*. Research in Action. May(5). Rockville, MD: AHRQ, US Department of Health and Human Services.
- Institute of Medicine. (2001). *Crossing the Quality Chasm: A New Health System for the 21st Century*. Washington, DC: National Academies Press.
- National Committee for Quality Assurance (NCQA). (2016). *Building an Organizational Response to Health Disparities. A Practice Guide to Implementing the National CLAS Standards: For Racial, Ethnic and Linguistic Minorities, People with Disabilities, and Sexual and Gender Minorities*. Washington, DC: NCQA.
- The Joint Commission. (2010). *Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care: A Roadmap for Hospitals*. Oakbrook Terrace, IL: The Joint Commission.
- Accreditation Association for Ambulatory Healthcare, *Accreditation Programs, Community Health Centers*. (August 20, 2017). Retrieved from: <http://www.aaahc.org/en/accreditation/FQHCs/>.
- Patient Protection and Affordable Care Act, 42 U.S.C. § 18001 (2010).
- Agency for Healthcare Research and Quality, Shared Decision Making Toolkit, *SHARE Approach Curriculum Tools*. (August 20, 2017). Retrieved from: <https://www.ahrq.gov/professionals/education/curriculum-tools/shareddecisionmaking/tools/index.html>.
- Agency for Healthcare Research and Quality, Programs, Improving Primary Care Practice, *Self-Management Support*. (August 20, 2017). Retrieved from: <https://www.ahrq.gov/professionals/prevention-chronic-care/improve/self-mgmt/self/index.html>.
- AMA *STEPSforward health coaching* <https://www.stepsforward.org/modules/health-coaching>.
- Chang, S. (2017). *Hardwiring Patient Engagement to Deliver Better Health*. Presentation at NEJM Catalyst event at Kaiser Permanente Southern California, April 13, 2017.
- Mayo Clinic Shared Decision Making National Resource Center, *Shared Decision Making Philosophy*. (August 20, 2017). Retrieved from: <http://shareddecisions.mayoclinic.org/decision-aid-information/decision-aids-for-chronic-disease/>.
- Swanson, K.A., Bastani, R., Rubenstein, L.V., Meredith, L.S., Ford, D.E. (2007). Effect of Mental Health Care and Shared Decision Making on Patient Satisfaction in a Community Sample of Patients with Depression. *Medical Care Research and Review*. 64(4), 416-30.
- Rodriguez, H.P., Meredith, L.S., Hamilton, A.B., Yano, E.M., Rubenstein, L.V. (2015). Huddle Up!: The Adoption and Use of Structured Team Communication for VA Medical Home Implementation. *Health Care Manager Review*. 40(4), 286-99.
- Street, Jr., R.L., Gordeon, H.S., Ward, M.M., Krupat, E., Kravitz, R.I. (2005). Patient Participation in Medical Consultations: Why Some Patients Are More Involved Than Others. *Medical Care*. 43, 960-969.
- American Medical Association, STEPSforward, Health Coaching, *Ask-Tell-Ask Sample Dialogue*. (August 20, 2017). Retrieved at: <https://www.stepsforward.org/modules/health-coaching>.
- Schaefer, J., Miller, D., Goldstein, M., Simmons, L. (2009). *Partnering in Self-Management Support: A Toolkit for Clinicians*. Cambridge, MA: Institute for Healthcare Improvement. Available at: www.IHI.org.
- Stacey, D., Légaré, F., Col, N.F., Bennett, C.L., Barry, M.J., Eden, K.B., Holmes-Rovner, H., Llewellyn-Thomas, H., Lyddiatt, A., Thomson, R., Trevena, L., Wu, J.H. (2014). *Decision Aids for People Facing Treatment or Screening Decisions*. Cochrane Database Systematic Reviews. Jan 28(1).