

Providing Patient-Centered Care



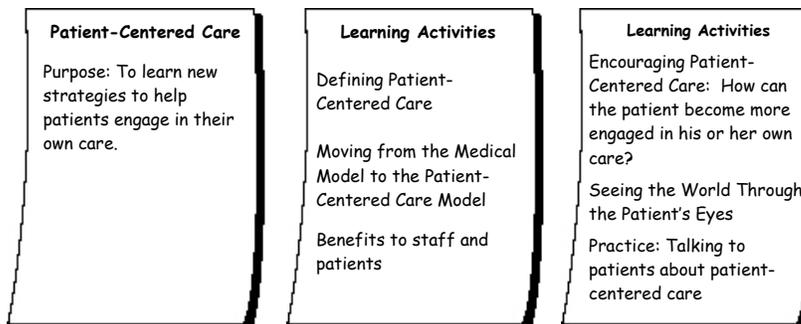
TIME REQUIRED

45 minutes
(55 minutes if optional pre-test and post-test are conducted)



PREPARATION/MATERIALS NEEDED

- Set up training space. The training room can be set up in many different ways. The recommended arrangement is in a circle or a U shape so that participants can see and interact with one another.
- Pens, pencils and paper for participants.
- Name tags and index cards.
- Handouts: *A New Trend in Dialysis Care* and *5 Questions to Engage Your Patient*.
- Case scenario cards (found at the back of this module). Photocopy each scenario as a handout or write scenarios onto index cards (1 card for each pair of participants).
- Blank flip chart for taking group notes. If no flipchart is available, then use blank 8 ½ x 11 inch paper or a dry-erase board.
- Prepare and post the following information well before the participants enter the room (see diagram below):
 - ◆ Module title
 - ◆ Purpose of training
 - ◆ Learning activities, including definition, comparing the old model to the new model, determining the benefits to staff and patients



- Optional: Photocopy pre/post-tests; 2 copies per participant.

Welcome and Statement of Purpose

(5 minutes)

Trainer states out loud:

*Welcome to the training on **Patient-Centered Care**. You'll see here that I've written the purpose of today's training on the flip chart.*

Trainer notes printed in italics should be stated

The purpose of the training is to provide you with an opportunity to learn new strategies to help patients engage in their own care, while also learning from one another the strategies that have helped make the patient a partner in their treatment plan. Because dialysis staff and technicians are helping patients manage a chronic condition, we have the opportunity to represent a new trend in health care. You all are involved in care that is moving from the traditional medical care model to a patient-centered care model.

Optional: Pre-test

(5 minutes)

Hand out 1 pre-test sheet per participant. Explain that this pre-test will allow you to assess whether the training is successful. Allow participants to work for a few minutes. Collect all sheets.

What Is Patient-Centered Care?

(5 minutes)

Trainer states out loud:

So let's start by asking ourselves the following questions. I'll write your answers here on the flip chart.

- ↪ What is patient-centered care?*
- ↪ What does patient-centered care mean to you?*
- ↪ What does it mean for our unit?*

- ↪ *What are specific challenges we face as a unit in providing patient-centered care?*
- ↪ *How is patient-centered care different from care that has been more centered on a traditional medical model? Is patient center care harder or easier than the more traditional medical model?*

The Medical Model of Care versus Patient-Centered Care

(5 minutes)



Pass out the handout: *A New Trend in Health Care*

Trainer states out loud:

This handout that I'm passing around compares patient-centered care with the traditional medical model of care.

As participants look at the handout, **Trainer** states out loud:

You'll notice that in patient-centered care, the role of the patient is one of action and collaboration. Many of us in health care were trained in the traditional medical model of care, where the doctor makes the decisions and the patient is not encouraged to ask questions. However, more health care workers are being trained in the model of patient-centered care. And more and more facilities are embracing the model of patient-centered care as the best way to deliver care.

*You'll notice here on the flip chart that I've posted some of **the documented benefits that staff** can gain when engaging patients in their own care and treatment plan. We can also imagine several **benefits to the patients** who are involved in a patient-centered model of care. I've posted some of them on the flip chart.*

NOTE TO THE TRAINER



The following benefits should already be posted on the flip chart:

Benefits to staff	Benefits to patient
<ul style="list-style-type: none">✓ Better medical results. (Research shows that the best results, as measured by adherence and outcome, come from patients who are informed and involved.)✓ Fewer disruptions on the floor. (Staff is less likely to have disruptive patients or conflict on the floor when patients are involved in their own care.)✓ Increased patient compliance.✓ Fewer misunderstandings between patient/staff and staff/patient.	<ul style="list-style-type: none">✓ Improved patient-care outcomes.✓ Increased patient self-esteem. Feeling better about themselves.✓ Empowerment of patients to care for, and about, themselves.✓ Staff is more attentive.✓ Staff is more understanding.✓ Greater involvement of family and support system in patient care.

Trainer states out loud:

You'll notice that many of the staff benefits overlap with the patient benefits, or vice versa. Can you think of any other benefits that staff, the unit or patients might receive from using a patient-centered model? Go ahead and share them out loud, and I'll add them to the list of benefits.



Post any others that training participants mention, and then continue.

Trainer states out loud:

So it sounds like most of us are in agreement that patient-centered care can directly benefit both the patient and the staff. Let's take a look now at how we can talk to the patient and encourage patient-centered care. Let's start by brainstorming ways in which we can encourage patients to participate in their care. I'll write your answers here on the flip chart.



Listen for, and post, answers like:

- ◆ Provide choices and options
- ◆ Offer shift flexibility
- ◆ Give reasons why things are done the way they are at your facility
- ◆ Allow patients to make decisions
- ◆ Offer patients a role in their dialysis visit, such as weighing themselves, self-cannulization and taking their own blood pressure or temperature
- ◆ Discuss patient's care plans and agree to steps toward improvement

Examples from Participants

(5 minutes)

Trainer states out loud:

*I know that many of you are already encouraging your patients to be involved in their own care. Now I'd like to ask each of you to take a blank index card and write down **one example** of how you encouraged a patient to become a more active partner in their treatment.*

*Tell us how the **patient's action made a difference** in their dialysis care. And **what might have happened** if the patient had not been actively involved.*



After 2 minutes, use the remaining 3 minutes to ask for volunteers to read their examples out loud.

Trainer states out loud:

*Thank you for sharing your experience in supporting patient-centered care among your patients. You know one of the benefits to patient-centered care is that it allows the **patient to have some control** over their care and their lives. We all know that even the smallest amount of control can make someone feel very strong and competent. The minute that control is taken away the person can end up feeling weak, out-of-control, and often very angry.*

Seeing the World through the Patient's Eyes

(10 minutes)

Trainer states out loud:

*Let's talk for a minute as a group about **Seeing the World Through the Patient's' Eyes***

To do this, let's post a list of things that come to mind when we talk about losses that the patient has faced. In other words, what does the patient lose when he or she go on dialysis? Just state them out loud, and I'll write them down.

NOTE TO THE TRAINER



Listen for, and post, the following losses:

- ✓ **Time**—9 hours or more per week.
- ✓ **Freedom**—"I can no longer come and go as I please." "Sometimes I just want to get in the car and go wherever I damn well please!" "I can no longer eat or drink anything I would like. I've given up all of the food that I love."
- ✓ **Kidneys**—Losing a part of you (or the function of a part of you) can be devastating. In addition, patients may have lost a limb from amputation due to diabetes.
- ✓ **Control**—"It seems everyone is telling me what to do and not do—not only the staff at the dialysis unit, but also my relatives, friends and neighbors."
- ✓ **Job**—Patients may have to cut back on work hours or quit their jobs altogether. Even volunteering or being involved in a hobby may now seem impossible or too difficult. "I used to spend all of my spare time helping out at my church. Now I'm just too tired."
- ✓ **Income**—Losing a job or having hours cut back seriously affects wages and benefits. "I used to be the breadwinner, the provider. Now I'm on disability and welfare."
- ✓ **The way things used to be**—Patients on dialysis miss their old life. Looking back on the past life it now may appear pretty easy and care-free compared to being on dialysis. Letting go of the old life is very difficult and can cause intense grief.
- ✓ **Sex**—Patients on dialysis may lose interest in, or lose the ability to enjoy, sex. "My spouse and I used to have a great sex life. We really love each other, but now we hardly touch each other."
- ✓ **Memory**—Long-term dialysis may cause memory loss.



Post any other losses that group participants mention, and then continue.

Trainer states out loud:

You all came up with a long list of possible losses that patients on dialysis may experience. I don't think any of us can truly imagine how very difficult and challenging these losses must be. So let's spend a moment talking about the feelings these losses may produce.



Listen for, and post, the following feelings: anger, fear, helplessness, depression, sadness, grief and gratitude (most patients know that their dialysis is a lifesaver.)

Post any other feelings that are mentioned by the group and move on to the next section.

Case Scenarios

(10 minutes)

Trainer states out loud:

One of the best ways to encourage patient-centered care is to know as much about your patient and their care as possible (and appropriate). That way you will be able to identify many ways (some big, some small) that they can be more involved in their care plan. Remember, getting a patient to be more involved in even the smallest way can be empowering.

The purpose of the activity is to build empathy for different situations that patients experience. For example, you may be talking with a patient about the importance of eating the proper food for a renal diet, but find out during the discussion that they may have no transportation to the supermarket and must eat what people bring for them. For this next activity you will need paper and something to take notes with. Please pick a partner to work with. Let's pair up. For this last activity, one of you will be the patient care staff; the other will be a patient. Decide who will be who.

I have an index card here for each patient that describes some of your life situations. Don't show your card to your partner.

*I have a handout here for each technician, called **5 Ways to Engage Your Patient**. It supplies you with possible questions to ask your patients. Use the handout to come up with your own questions. The technician should have a discussion with the patient in such a way that you get as much information from them as you can about their care situation. Use your paper and pen to take notes. You will **have five minutes** to do this.*



After 5 minutes call time.

Trainer states out loud:

Wow, I heard a lot of great discussions going on. Let's take another five minutes and have one or two of the technician tell us what they learned about their patient.



Let one or two participants share their discussions. Listen for, and post, answers like:

- ✓ Resources or information provided to the patient that could help them understand and engage more fully in their treatment
- ✓ The kind of feedback that the technician was giving the patient
- ✓ Any differences or similarities (age, race, languages, culture, neighborhood, etc.) that made the discussion difficult or easy

If time allows, shuffle the scenarios and repeat the above activity with participants switching roles. If you run out of time, move on to the wrap-up session.

Resources/Wrap-Up/Questions

(5 minutes)

Trainer states out loud:

Before we finish, I'd like to ask you what information was new or felt most useful to you? Do you have any questions or comments about this in-service?



Answer any questions or acknowledge comments.

Trainer states out loud:

I have some resources on patient-centered care that you can pick up in my office if you would like to go on a web site to learn more about patient-centered care. I want to thank you all for coming to the training today. You all did a great job!

Optional: Post-test

(5 minutes)

Hand out 1 post-test sheet per participant. Allow participants to work for a few minutes. Collect all sheets.

Want More Information?

Here are some resources to help you adapt this training module to your facility's circumstances or to share with your staff.

Articles

- ◆ National Research Corporation and the Picker Institute, "Eight Dimensions of Patient-Centered Care." Available at:
www.patientexperiencestandard.org/preparation/fact_sheet_Eight_Dimensions_Care.doc
- ◆ Anderson E.B., "Patient-Centeredness: A New Approach." *Nephrology News & Issues* 16(12), November 2002, pages 80-82.
- ◆ Agency for Health Care Research and Quality, "20 Tips to Help Prevent Medical Errors," AHRQ Publication No. 00-P038. Available at:
www.ahrq.gov/consumer/20tips.htm
- ◆ Patient satisfaction survey results from your facility.

Web sites

- ◆ www.lifeoptions.org
Life Options encourages patients to increase their quality of life through rehabilitation and increased activity. The Web site contains worksheets to help patients talk with their care providers.
- ◆ www.esrdnet5.org
The Mid-Atlantic Renal Coalition (ESRD Network 5) offers an online training in patient-centered care and offers CEUs for its completion. Click on "CEU Opportunities."

Case Scenarios



NOTE TO THE TRAINER

Copy the cards, cut them into half, read the “Case Scenario” portion and then hand them out to the participants. Then you use the “Note To The Trainer” portion for further instructions.

As participants report back on their case scenarios, listen for and post the following kinds of answers:

- ✓ Resources or information provided to the patient that could help them understand and engage more fully in their personal treatment
- ✓ The kind of feedback that the technician was giving the patient
- ✓ Any differences or similarities (age, race, languages, culture, neighborhood, etc.) that made the discussion difficult or easy

If time allows, shuffle the scenarios and repeat the above activity with participants switching roles. If you run out of time, move on to the wrap-up session.



Case Scenario #1

You are a 65-year-old African-American woman who is an active member in her local church. You have always been an influential person in your community and feel like you have had to slow down since starting dialysis six months ago. You understand the importance of maintaining your prescribed diet and always come to your scheduled appointments on time. However, you are frustrated with the inconvenience of your treatment program.

NOTE TO THE TRAINER

There are no “right” answers in this exercise, but listen for the technician to acknowledge things like: how vital the patient has been to her church and community; how it must be frustrating to have her busy schedule cut into three times a week for dialysis; how staying on her diet will help her feel better so she can keep up with her busy life; or how staying on her prescribed diet will help the dialysis treatment go more smoothly so she can get in and out and on with her life. Listen for probes like, “How can we work together to help you stay on your diet?” “What can you do when you are away from the dialysis clinic to stay on your diet?”



Case Scenario #2

You are a 72-year-old white male. You have been on dialysis for several years and believe you know everything you need to know about your treatment. Your wife died from cancer two years ago and you live alone. You enjoy the company of the unit's staff but often feel like they don't pay enough attention to you. You often cheat on your diet but don't think it is a big deal.

NOTE TO THE TRAINER

There are no "right" answers in this exercise, but listen for the technician to acknowledge things like: You know more about your treatment than anybody, but I've noticed that you have been slipping off your diet a little. Listen for the technician to probe for the reasons why. For example the technician might say, "I've noticed that your potassium was high today. Can you tell me what's been going on this week with your diet?"

If the patient admits to a little cheating, the technician needs to acknowledge how difficult it must be to have stayed on a prescribed diet for so long. She/he might say something like, "You really have done a great job over the years of staying on your diet. I know it must be tempting to stray off the diet every now and then. Can we talk about things you can do this week to get back on your prescribed diet?" In this case the patient feels the need for more attention. The positive feedback and gentle reminders about the importance of diet might just be what the patient needs.

Listen for probes like, "How can we work together to help you stay on your diet? What can you do away from the dialysis clinic to stay on your diet?"

Case Scenario #3

You are a 47-year-old Hispanic-American woman whose use of English—both spoken and written—is limited. You work with your husband in a family-owned restaurant and have four children. You recently started dialysis. Finances are tight for your family, and you are concerned about all of the information and medical forms you have to fill out, but you don't want to burden anyone.

NOTE TO THE TRAINER

There are no "right" answers in this exercise, but listen for the technician to acknowledge things like the need for someone who is bilingual to help with this case. If the technician is not bilingual, listen for her to report back to the group that she would find a social worker or another technician who is bilingual to help with medical forms and information about dialysis treatment. Because the patient is self-employed, a small-business owner and the mother of four children, the trainer should also listen for the technician or social worker to acknowledge how busy this woman is, how tempting it might be to skip treatments, but how important it is to come to every treatment. This patient should be given a lot of reassurance that the facility will do everything possible to help her fit treatments into her busy schedule. Listen for probes like, "How can we work together to help you focus on your treatments? Even though you are very busy, what are a few simple things that you can do when you are away from the clinic to make your treatments a little smoother?"



Case Scenario #4

You are a 50-year-old African-American male who is overweight and eats poorly despite diet restrictions. You have lived in the community for years and personally know many of the unit's staff. You believe it is their job to take care of you and often tease them about your quality of care not being good enough. You often speak loudly to the staff and tease some of them, calling them by their first names or a nickname. You are not interested in becoming more engaged in your own care. You have been on dialysis for four years.

NOTE TO THE TRAINER

There are no "right" answers in this exercise, but listen for the technician to acknowledge things like the patient's poor diet. Though he is not willing to become more engaged in his own care, the technician could still inquire about how the facility could help him do a better job on his diet. His four-year familiarity with the staff may be contributing to his lack of commitment to his diet and general health. Listen for reminders from the staff that they care about him, but that they expect him to care about himself as well. He may need a gentle but firm reminder that he needs to re-focus his attention on his own care, instead of the staff. Listen for probes like, "How can we work together to help you get back on your program. What are a few simple things you can do when you are away from the clinic to help you re-focus on your own health?"

Case Scenario #5

You are a 60-year-old white woman. You are a local business owner and pride yourself on doing things well. You try to follow your treatment plan and are easily offended when staff tells you that you have missed your targets in a way that other patients hear. You feel they are belittling you and that they don't understand how hard you try. When you get upset, you often snap at staff and come off as unfriendly.

NOTE TO THE TRAINER

There are no "right" answers in this exercise, but listen for the technician to acknowledge things like the fact that the patient is upset about something. A statement and question like, "You seem upset about something. What's troubling you?" may give the patient the permission she needs to tell what's really bothering her. For example, if she says, "I try so hard to stay on my treatment plan, but all you ever do is criticize me!" then the technician could say something like, "Oh, I'm sorry, I could have done a better job of telling you what a good job you've been doing overall, rather than just point out the targets that you missed. I'm glad you shared this with me." Listen for probes like, "How can we work together to make sure you get the support that you need without making you feel like we're scolding? Will you please let us know when something is bothering you so we can correct it right then?"

A New Trend in Dialysis Care

Moving from a traditional medical model to a patient-centered model of care

Medical Model	Patient-Centered Model
Patient's role is passive <i>(The patient is quiet)</i>	Patient's role is active <i>(The patient asks questions)</i>
Patient is recipient of treatment <i>(The patient doesn't voice concerns, even if there's a problem)</i>	Patient is partner in treatment plan <i>(The patient asks for information about other options)</i>
Provider (usually a doctor) dominates as decision-maker <i>(The provider does not offer options)</i>	Provider collaborates with patient in making decisions <i>(The provider offers options and discusses pros and cons)</i>
Disease-centered <i>(Dialysis is the focus of daily activities)</i>	Quality-of-life-centered <i>(The patient focuses on family and other activities)</i>
Provider does most of the talking <i>(The provider does not allow time for questions)</i>	Provider listens more and talks less <i>(The provider allows time for discussion)</i>
Patient complies (or not) <i>(Patient does not comply with diet)</i>	Patient adheres to treatment plan <i>(Diet is flexible to accommodate culture and family traditions)</i>

5 Questions to Engage Your Patient

- 1** What are some of your questions about your care plan?
- 2** Tell me about your week. Do you feel better or worse?
- 3** What challenges did you face this week?
- 4** What issues do you feel unsure or have concerns about?
- 5** When is your next doctor's appointment? What questions do you have for him/her?

Pre/Post-test

Name: _____

Title: _____

Today's date: _____

Today's session: **Providing Patient-Centered Care**

Goal:

This module defines patient-centered care and helps participants apply it to their daily work.

Objectives:

- Demonstrate, through a verbal exercise, what the world is like through their patients' eyes.
- Demonstrate, through role-playing, at least three examples of courteous, respectful ways to interact and communicate with patients.
- Describe ways in which active patient participation improves treatment outcomes.
- Demonstrate, through role-playing, a variety of methods for communicating with patients in order to engage them in their continual care planning.

Directions: Please circle your responses. There is one correct answer for each question.

Questions:

1. The following are losses that a dialysis patient experiences when starting treatments:
 - a. Time
 - b. Freedom
 - c. Control
 - d. All of the above

2. As a staff member at a dialysis facility, there are several ways that I can interact with a patient that encourages him to be involved in his care.
 - a. Giving him no choices or options
 - b. Giving him reasons why things are done the way they are at the facility
 - c. Offering shift flexibility
 - d. Allowing him to make decisions
 - e. b, c, and d are ways that could encourage the patient to be involved in his own care

3. One of the best ways to encourage patient-centered care is to know as little about your patients and their care as possible.
 - a. True
 - b. False

4. Examples of the "patient-centered model" in dialysis care include:
 - a. The patient asks questions
 - b. The provider offers options and discusses pros and cons
 - c. The provider allows time for discussion
 - d. All of the above