

Patient and Family/Caregiver Engagement: Teaching and Guidance

Expanded Home Health Value-
Based Purchasing (HHVBP) Model

May 2023



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Featured Speaker



Lori Marmon, PT, MBA, COS-C

HHVBP Model TA Team

OASIS Answers, Inc

Objectives

✓ Define patient and family/caregiver engagement

✓ Describe teaching and guidance

✓ Examine HHA strategies to enhance patient and family/caregiver engagement

- Teaching and Guidance

✓ Describe how these strategies can potentially improve performance on expanded HHVBP Model measures

Definition of Patient and Family/ Caregiver Engagement

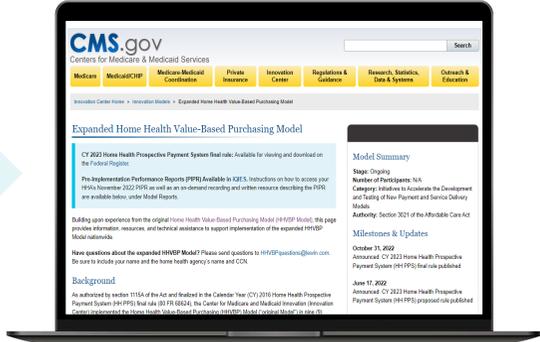
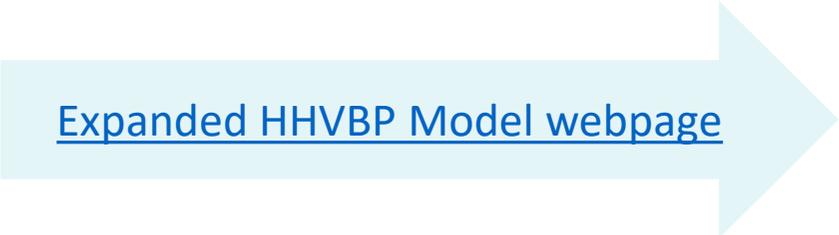
Patient and Family/ Caregiver Engagement: Assessment and Goal Setting

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The capability and willingness to *actively decide to participate in their healthcare and collaborate* with a healthcare facility or provider for the *goal of maximizing outcomes or improving experiences of care.*¹

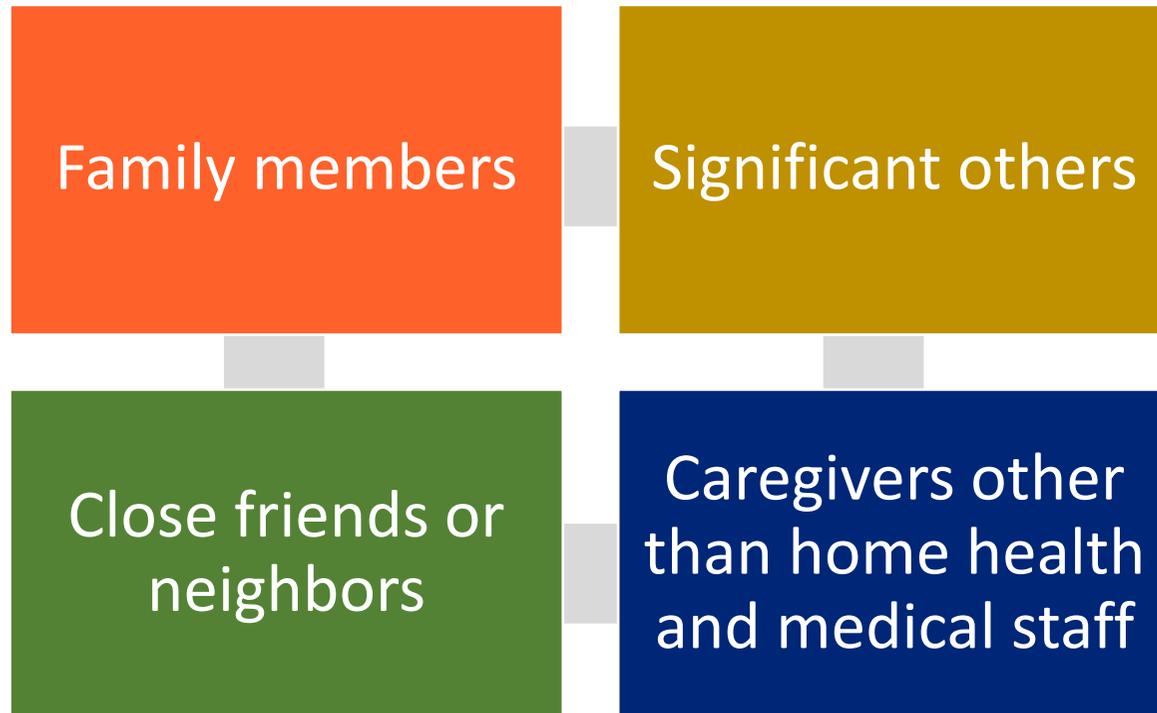
¹ Higgins, T., Larson, E., & Schnall, R. 2017. *Unraveling the meaning of patient engagement: A concept analysis.*





*Patient and Family/Caregiver Engagement is both a **process and a behavior**, shaped by the relationship amongst the patient, family/caregiver, and provider, as well as the care delivery environment.*

Patient and Family/Caregivers



What is teaching and guidance?

Descriptions of Teaching and Guidance

Activities designed to provide **information** and **materials**, encourage **action** and **responsibility** for **self-care** and **coping**, and **assist** the individual/family/community to **make decisions** and **solve problems**.²

Patient and family/caregiver education based on individual learning needs using **methods and materials tailored** to their current **knowledge and understanding**, **readiness to learn**, **barriers to learning and management**, **health literacy**, and **cultural beliefs and influences**.³

² The Omaha System, <https://www.omahasystem.org>

³ Ashton, K, and Oermann, MH. 2014. *Patient education in home care: Strategies for success*. *Home Healthcare Nurse*, 32(5), 288-294.

DOI: 10.1097/NHH.0000000000000059.

Key Concepts for Teaching and Guidance

- ✓ Multi-disciplinary practice
- ✓ Based on patient needs
- ✓ Methods and materials tailored to the patient and their family/ caregivers
- ✓ Goal-oriented and designed to prevent illness, improve or restore health, decrease decline, and mitigate risk



Care Planning, and Teaching and Guidance

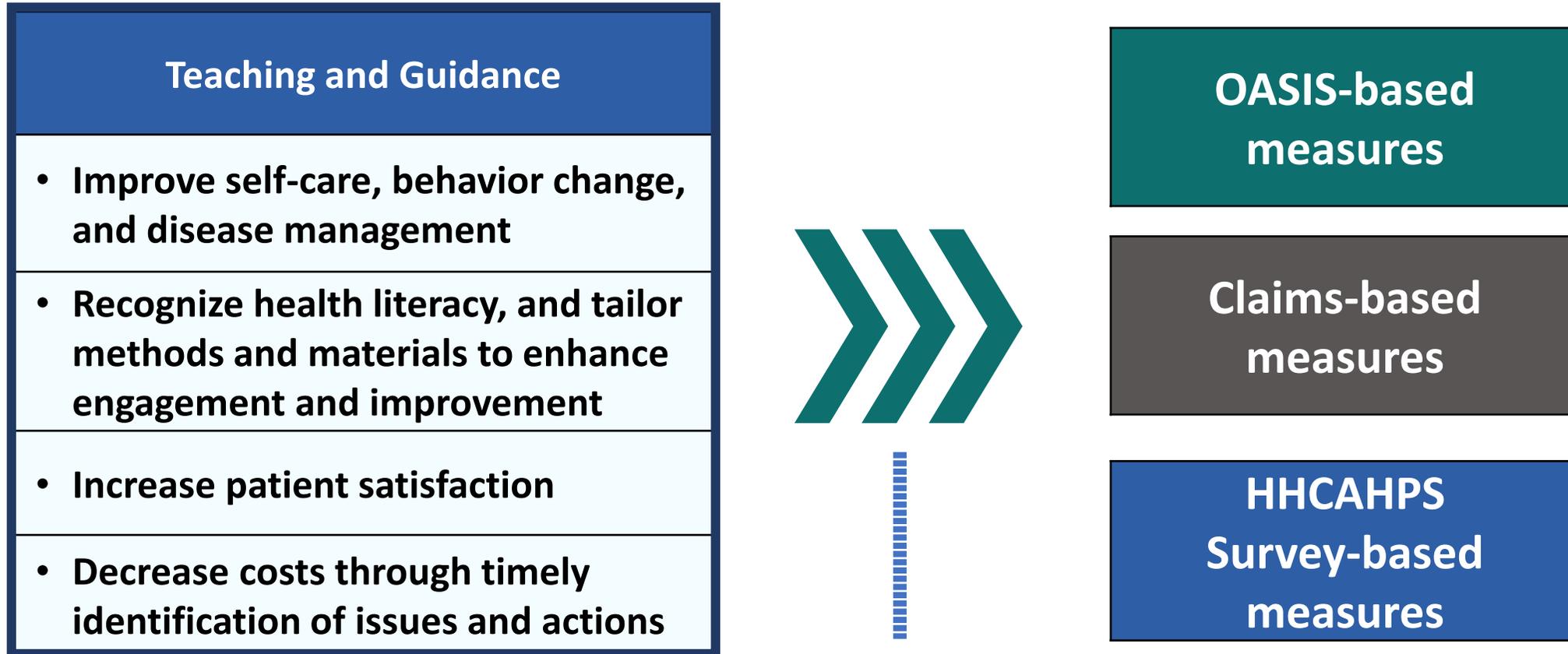
CMS Conditions of Participation for Home Health Agencies (CMS-3819-F) CoP 484.60 Care planning, coordination of services, and quality of care

Teaching and guidance provide pertinent information related to the patient's care and treatment:

- ✓ Specific to the patient's care needs
- ✓ Harness the patient's strengths to facilitate patient wellbeing
- ✓ Gather and take into account patient preferences regarding their care

How can teaching and guidance affect performance on expanded HHVBP Model measures?

Relevance to the Expanded HHVBP Model Measures

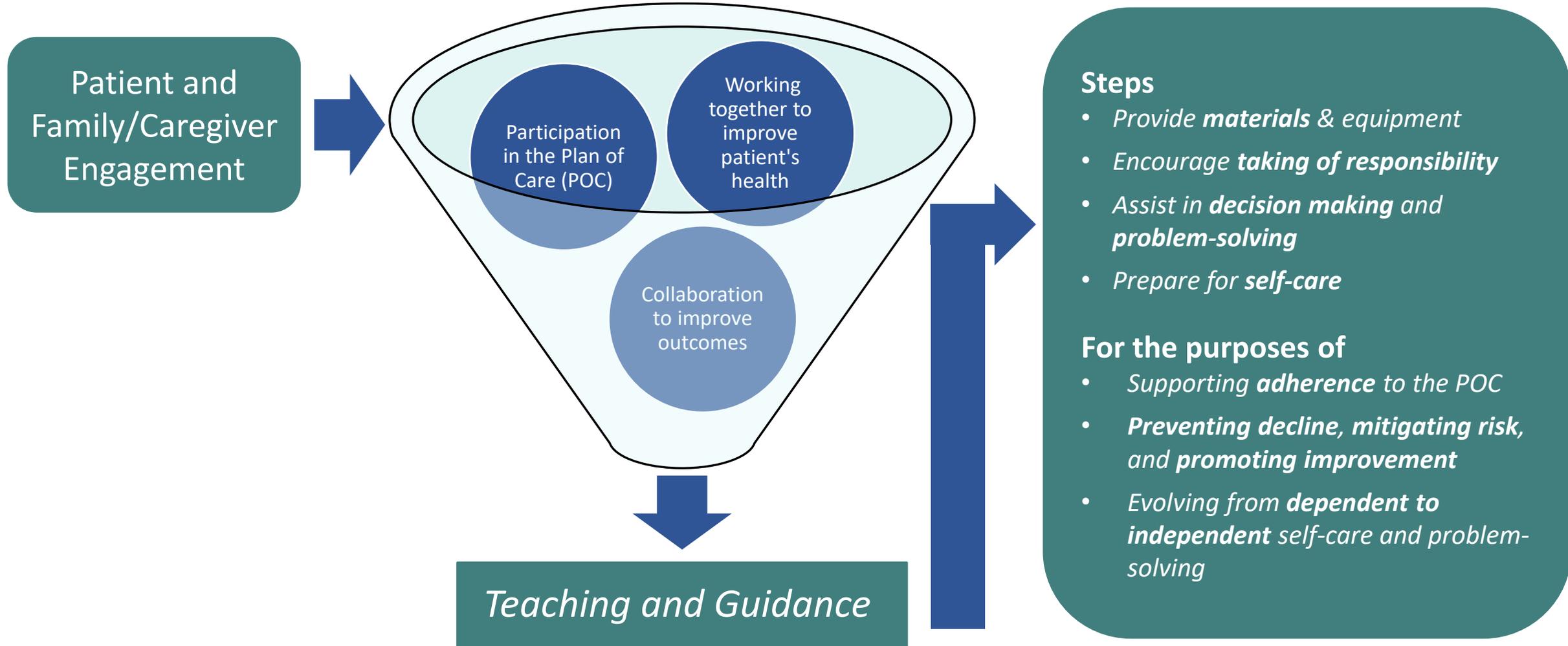


How might home health agencies provide teaching and guidance?

Applicable Measures in the Expanded HHVBP Model

Category	Count	Quality Measure
OASIS-based (35%)	5	Discharged to Community
		Improvement in Dyspnea (Dyspnea)
		Improvement in Management of Oral Medications (Oral Medication)
		Total Normalized Composite Change in Mobility (TNC Mobility)
		Total Normalized Composite Change in Self-Care (TNC Self-Care)
Claims-based (35%)	2	Acute Care Hospitalization During the First 60 Days of Home Health Use (ACH)
		Emergency Department Use without Hospitalization During the First 60 Days of Home Health (ED Use)
HCAHPS Survey-based (30%)	5	Care of Patients/Professional Care
		Communication
		Overall Rating
		Specific Care Issues/Team Discussion
		Willingness to Recommend

Patient and Family/Caregiver Engagement: Providing Teaching and Guidance in Home Health



What teaching and guidance strategies might impact expanded HHVBP Model measures?

Strategies for Teaching and Guidance

Teaching & Guidance

Motivational
Interviewing
OARS

Self-
Management
Tools

Teach-back

Motivational Interviewing



Evidence-based approach to help patients adhere to treatment recommendations

OARS is a micro-skill or tool used by the clinician during the motivational interview process

- ✓ Open-ended Questioning
- ✓ Affirming
- ✓ Reflective Listening
- ✓ Summarizing



⁴ <https://case.edu/socialwork/centerforebp/practices/motivational-interviewing>

Motivational Interviewing

Transtheoretical Model (Stages of Change)^{5,6}

Stage	Description of Stage
Pre-contemplation	Not yet considering a change or unwilling or unable to change
Contemplation	Acknowledges concerns and is considering possibility of change but is ambivalent, uncertain, and even resistant
Preparation	Committed to and planning to make a change in the near future, however still considering what to do and can't do it alone
Action	Actively taking steps to modify behaviors and making required life-style changes, often with a mix of confidence and anxiety. Change has not yet reached a stable state
Maintenance	Initial goals achieved and has sustained change for a minimum of six (6) months, now working to maintain goals

⁵ Liu, KT, Kueh, YC, Arifin, WN, Kim, Y, & Kuan, G. (2018, Dec 17). Application of transtheoretical model on behavioral changes, and amount of physical activity among university's students. *Frontiers in Psychology*, 9, 2402. [https://doi: 10.3389/fpsyg.2018.02402](https://doi:10.3389/fpsyg.2018.02402)

⁶ Prochaska, JO, & Velicer, WF. (1997). The transtheoretical model of health behavior change. *American Journal of Health Promotion*, 12(1), 38-48. <https://doi:10.4278/0890-1171-12.1.38>

Strategy Application-

Motivational Interviewing/OARS^{7,8}

O

✓ Open-ended Questioning

“If you have one (1) routine you wanted to change to improve your consistency with taking your medications, what would that be?”

A

✓ Affirming

“Despite interruptions to your routine, you were able to take your medications on time. It is apparent your decision to keep on schedule with your medications has been difficult, but you have been successful.”

R

✓ Reflective Listening

“You mentioned that you are frustrated by needing to take some of your medications early in the morning before breakfast.”

S

✓ Summarizing

“Let me see if I understand what you have told me so far. Here is what I have heard you tell me about managing your medication routine.”

⁷ Miller, WR, & Rollnick, S. 2013. *Motivational interviewing: Helping people change* (3rd edition). Guilford Press

⁸ <https://info.nicic.gov/sites/default/files/OARS%20in%20Motivational%20Interviewing.pdf>

Self-Management Tools



Provide each patient and family/caregivers with the resources to manage health condition(s) during and after the patient's discharge from home care

How to engage patients and their family/caregivers in self-management?



Self-Management Tools

Engaging Patients and Family/Caregivers

- ✓ Discuss early what is ***important to the patient***.
- ✓ Discuss ***preferred language*** and ***learning style***.
- ✓ Use a ***combination of methods*** to provide information.
- ✓ Consider **health literacy and** provide ***tools*** in an ***understandable way***.
- ✓ Take time to understand the ***potential reasons for non-adherence***.

Self-Management Tools

Guidelines

Develop a teaching tool being mindful of health literacy

- ✓ Present information at or below ***fifth (5th) grade level*** (Joint Commission Guidelines).
- ✓ Present ***key information first*** and explain ***why*** it is ***important***.
- ✓ Be ***consistent*** with word choices and use fewer syllables.
- ✓ Describe ***what to do*** and provide information in patient's ***preferred language***.
- ✓ Use ***pictures, bulleted lists, and plain language***.
- ✓ ***Avoid abbreviations***.
- ✓ Use ***active voice*** and ***positive*** messaging.

Strategy Application

Self-management Tools – Examples^{9,10}

 **What medicines do I need to take?**
Each day, follow this schedule:

Morning Medicines			
Medicine name (generic and name brand) and amount	Why am I taking this medicine?	How much do I take?	How do I take this medicine?

What is my medical problem?

What are my medication allergies?

Where is my pharmacy?

What exercises are good for me?

What should I eat?

What activities or foods should I avoid?

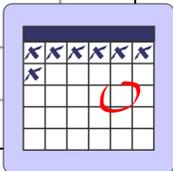
Medical Orders, Schedules, & Appointments

- ✓ Medication List
- ✓ Medication Resource

- ✓ Calendar

MONTH :

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday



Zone Tools

- ✓ Self-Check Plan



Excellent – Keep Up the Good Work!

<input type="checkbox"/> No new or worsening shortness of breath	<input type="checkbox"/> Physical activity level is normal for you	<input type="checkbox"/> No new swelling, feet, ankles and legs look normal for you	<input type="checkbox"/> Weight check stable Weight: _____	<input type="checkbox"/> No chest pain
--	--	---	---	--

GREAT! CONTINUE:

Daily Weight Check	Meds as Directed	Low-Sodium Eating	Follow-up Visits
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Medical Alert - Warning!

<input type="checkbox"/> Frequent dry, hacking cough	<input type="checkbox"/> Shortness of breath at rest	<input type="checkbox"/> Increased discomfort or swelling in the lower body	<input type="checkbox"/> Sudden weight gain of more than 2-3 lbs in a 24-hour period (or 5 lbs in a week)	<input type="checkbox"/> New or worsening dizziness, confusion, sadness or depression	<input type="checkbox"/> Loss of appetite	<input type="checkbox"/> Increased trouble sleeping; cannot lie flat
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WARNING! You need to be evaluated right away. Call your physician or call **911**

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Tracking & Flow Sheets

- ✓ Shortness of Breath & Activity
- ✓ Pain Management
- ✓ Weight
- ✓ Vital Signs

Daily Pain Diary

Date & Time	Pain score (1 to 10)	W	S	A	D

Rx Vital Signs Flow Sheet

PATIENT NAME: [Write Name] GENDER: M/F DOB [DATE]

DATE	WEIGHT	TEMPERATURE	BLOOD PRESSURE	PULSE	RESPIRATION	PAIN	Initials

⁹ <http://www.ahrq.gov/patients-consumers/diagnosis-treatment/hospitals-clinics/goinghome/index.html>

¹⁰ <https://www.heart.org/-/media/Files/Health-Topics/Heart-Failure/HF-Symptom-Tracker.pdf>

Teach-back



- ✓ **Definition:** Method of checking a patient's understanding by having them state in their own words the directions or instructions a clinician has provided.
- ✓ **Why Important:** Provides the patient an opportunity to restate the instructions and provides confirmation to the clinician that they explained things in a manner the patient understands.



¹¹ Always Use Teach-back! Training Toolkit: <http://www.teachbacktraining.org/>

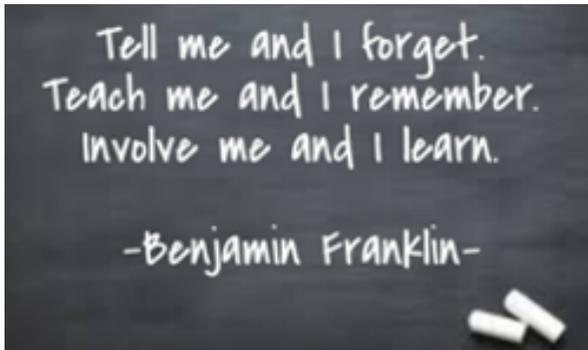
Guidelines for Teach-back¹²

- ✓ Use as a test of ***how well you explained the concept***, and NOT as a test of the patient's knowledge.
- ✓ ***Initiate early*** in the visit; do not wait until the end to provide the opportunity for Teach-back.
- ✓ ***Teach in sections***, and then perform teach-back for each section.
- ✓ Use ***“show me” method*** for procedures or medication changes.
- ✓ Use handouts or written instruction to ***reinforce your training***.
- ✓ Include non-clinical ***staff who interact with the patient*** during the training.

¹² Always Use Teach-back! Training Toolkit: <http://www.teachbacktraining.org/>

Strategy Application- Teach-back

Why should we use Teach-back¹³?



When should we use Teach-back?

Use teach-back whenever explaining important concepts to patients regarding their health care, including:

- Medicines
- Home care instructions.
- Use of a new device.
- Next steps in their care.
- Anything else that is important for them to understand

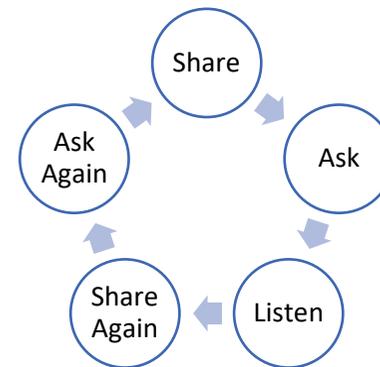
How should we use Teach-back¹⁴?

Teach-back Quick Guide

- Use teach-back for ALL patients.
- Start with most important message.
- Limit to 2-4 key points.
- Use plain language.
- Rephrase message until patient demonstrates clear understanding.

Examples of Teach-back Starters

- “Just to be safe, I want to make sure we are on the same page. Can you tell me...”
- “I want to make sure that I explained things clearly. Can you explain to me...”
- “Can you show me how you would use your inhaler at home?”



Use Plain Language

For example, use:

- “Reduces swelling” instead of anti-inflammatory
- “High blood sugar” instead of hyperglycemic

How should we use Teach-back now?

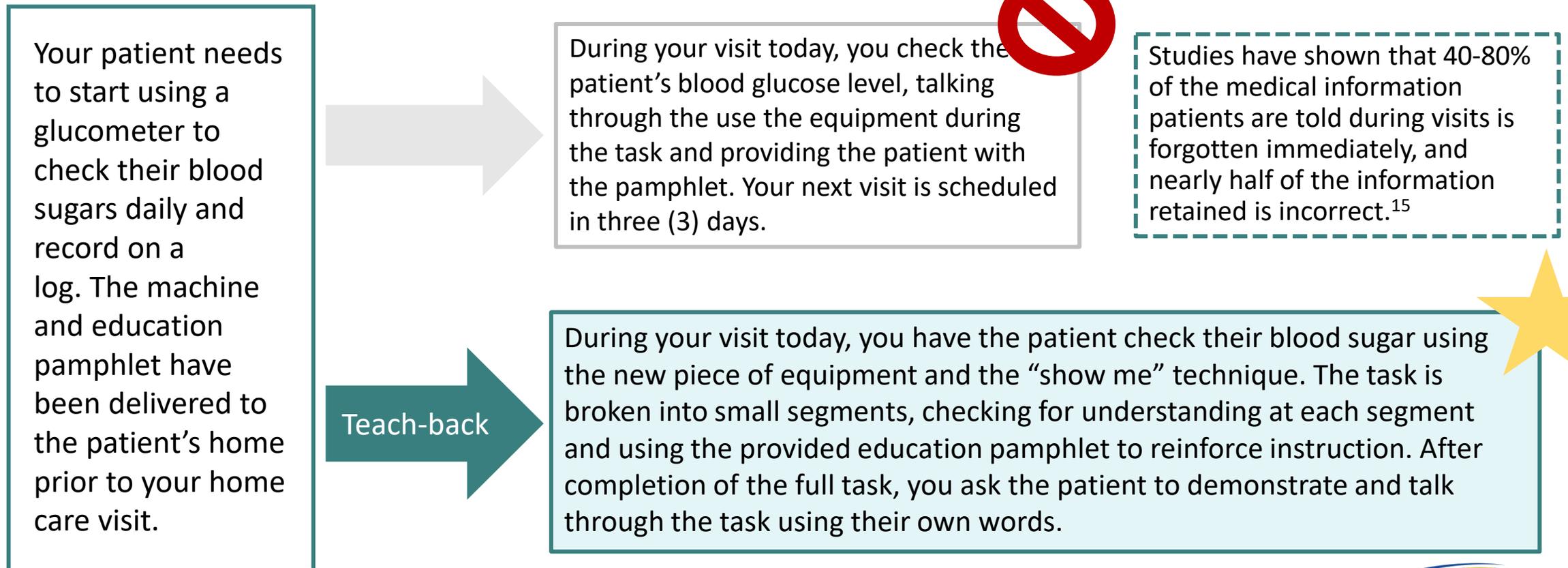
Just ask patients to explain what you have told them using their own words.

For example, if you explain what they need to do to prepare for a procedure, ask them if they can teach back to you how they are going to prepare.

¹³ <https://homeschoollegacy.com/2017/05/27/the-family-table/ben-franklin-teach-me-quote/>

¹⁴ <https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/quality-patient-safety/patient-family-engagement/pfeprimarycare/TeachBackClinicianJobAid-Poster.pdf>

Patient Scenario: Teach-back



¹⁵ <https://www.ahrq.gov/health-literacy/improve/precautions/tool5.html>

The Impact of Teaching and Guidance Strategies

Insights from the Literature

Impact of Motivational Interviewing ¹⁶	Impact of Self-Management Tools ^{17,18}	Impact of Teach-back Method ¹⁹
<p>Communication skill:</p> <ul style="list-style-type: none"> • Promotes self-care and behavior change • Supports patient-centered decision making • Improves clinician communication self-efficacy • Potentially results in outcome improvement for disease management, function, and emergent care in chronically ill patient 	<p>Extended, iterative, individually tailored patient education in the place of residence:</p> <ul style="list-style-type: none"> • Improves self-care activities and safety • Eliminates gaps in patient education • Provides patient and caregiver participation in decision making • Decreases costs associated with misunderstandings and lack of competence to identify changes and appropriate actions 	<p>For medication education, discharge information, and health management</p> <ul style="list-style-type: none"> • Increases patient satisfaction <p>In patients with limited health literacy</p> <ul style="list-style-type: none"> • Increases medication comprehension <p>For patient with heart failure at 12 months, and when used with the discharge summary</p> <ul style="list-style-type: none"> • Improves hospital readmission rate

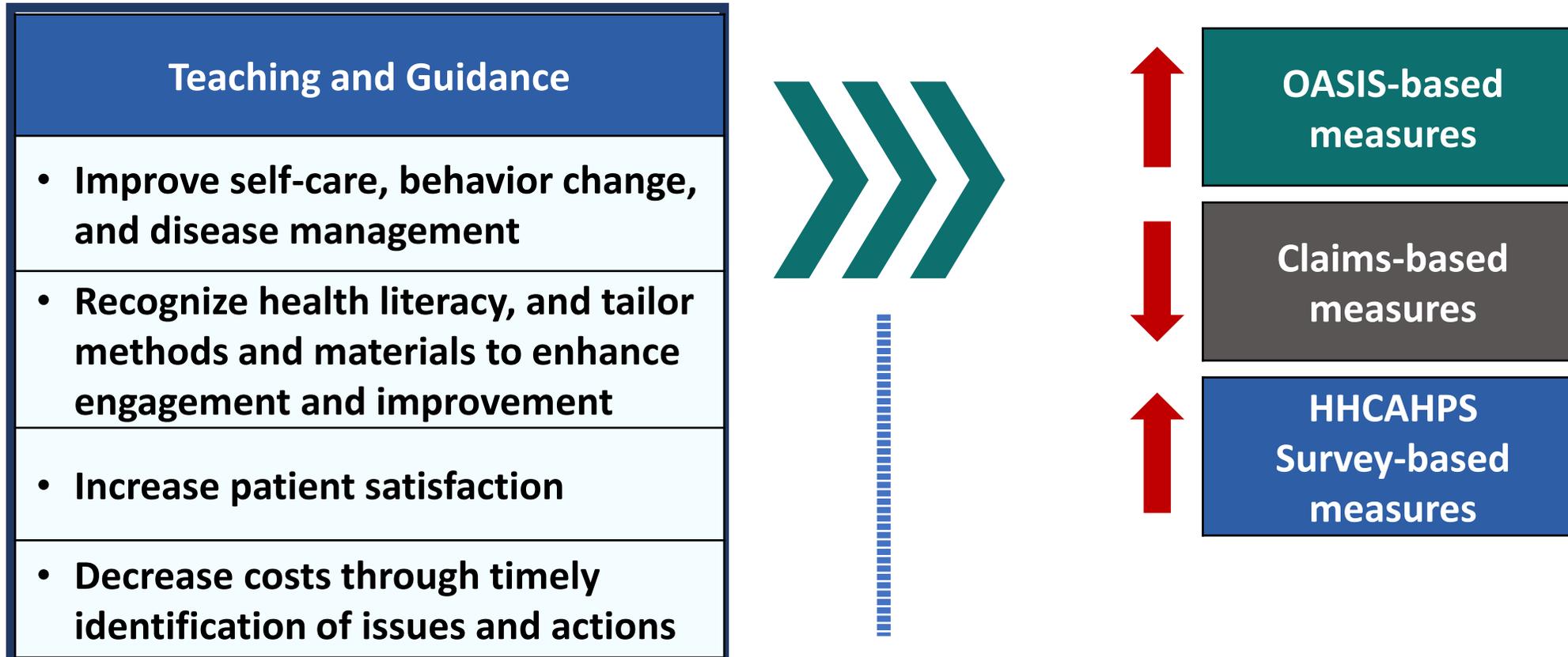
¹⁶ Pyle JJ. 2015. A motivational interviewing education intervention for home healthcare nurses. *Home Healthcare Now*, 33(2), 79-83. doi: 10.1097/NHH.000000000000184. PMID: 25654455. <https://pubmed.ncbi.nlm.nih.gov/25654455/>

¹⁷ Vaartio-Rajalin H, Nyholm L, Fagerström L. 2020. Patient education in the hospital-at-home care context. *Patient Experience Journal*, 7(1), 65-74. doi: 10.35680/2372-0247.1408. <https://pxjournal.org/cqi/viewcontent.cqi?article=1408&context=journal>

¹⁸ Agency for Healthcare Research and Quality, *Self-Management Support*, <https://www.ahrq.gov/ncepcr/tools/self-mgmt/self.html>.

¹⁹ Yen, PH, Leasure, R. 2019. Use and effectiveness of the teach-back method in patient education and health outcomes. *Federal Practitioner*, 36(6), 284 – 289. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6590951/?report=classic>

Summary



Teaching and Guidance Approaches

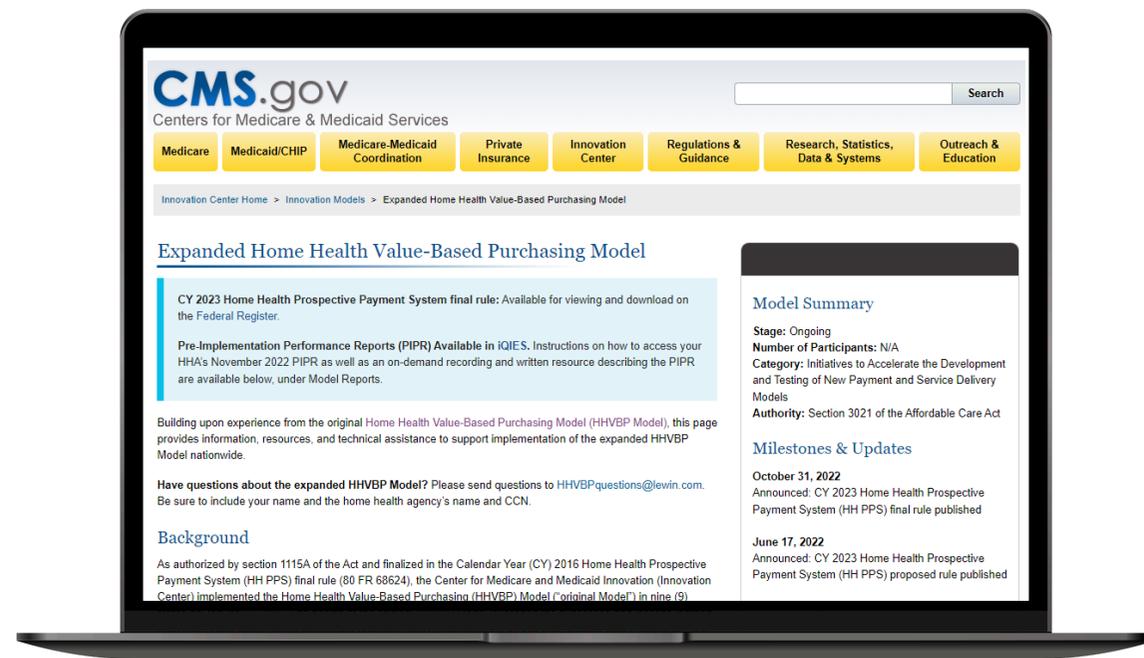
References and Resources

References

- 1 Higgins, T., Larson, E., & Schnall, R. 2017. *Unraveling the meaning of patient engagement: A concept analysis.*
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- 9 <http://www.ahrq.gov/patients-consumers/diagnosis-treatment/hospitals-clinics/goinghome/index.html>
- 10 <https://www.heart.org/-/media/Files/Health-Topics/Heart-Failure/HF-Symptom-Tracker.pdf>
- 11,12 *Always Use Teach-back! Training Toolkit:* <http://www.teachbacktraining.org/>
- 13 <https://homeschoollegacy.com/2017/05/27/the-family-table/ben-franklin-teach-me-quote/>
- 14 <https://www.ahrq.gov/sites/default/files/wysiwyg/professionals/quality-patient-safety/patient-family-engagement/pfepriarycare/TeachBackClinicianJobAid-Poster.pdf>
- 15 <https://www.ahrq.gov/health-literacy/improve/precautions/tool5.html>
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- 17 Vaartio-Rajalin H, Nyholm L, Fagerström L. 2020. *Patient education in the hospital-at-home care context.* *Patient Experience Journal*, 7(1), 65-74. doi: 10.35680/2372-0247.1408. <https://pxjournal.org/cgi/viewcontent.cgi?article=1408&context=journal>
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Staying Connected Checklist

- ❑ Visit and bookmark the [Expanded HHVBP Model webpage](#)
- ❑ Review the [Expanded HHVBP Model YouTube playlist](#) for all recorded content
- ❑ [Subscribe to the Expanded HHVBP Model listserv](#) by entering your email address on the contact form, then select “Home Health Value-Based Purchasing (HHVBP) Expanded Model” from the Innovations list. To ensure you receive expanded Model communications via email, please add “cmslists@subscriptions.cms.hhs.gov” to your email safe sender list.
- ❑ Access and review the reports available in [iQIES](#) in the “HHA Provider Preview Reports” folder
- ❑ Contact the HHVBP Help Desk with questions: HHVBPquestions@lewin.com



Thank You

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