Teaching Patients

Patient-friendly written materials use:

- Simple words (1-2 syllables)
- Short sentences (4-6 words)
- Short paragraphs (2-3 sentences)
- No medical jargon
- Headings and bullets
- Highlighted or circled key information
- Lots of white space
- Use visual aids
- Be careful with color





How-to Guide:

Improving Transitions from the Hospital to Community Settings to Reduce Avoidable Rehospitalizations

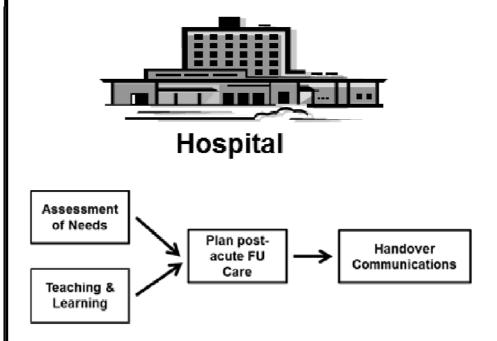
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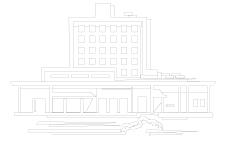
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How Might We....?



Skilled Nursing Care Centers



...use the same core content and teaching materials in all community patient care settings?



Primary & Specialty Care





Home Health Care



Home (Patient & Family Caregivers)

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Heart Failure Action



What zone are you in today?

You need to do these things

Green Zone

All Clear - You are feeling well

Your symptoms are under control

You have:

- · No shortness of breath
- No weight gain more than 2 pounds (it may change 1 or 2 pounds some days)
- No swelling of your feet, ankles, legs, or stomach
- · No chest pain

- Weigh yourself in the morning before breakfast and write it down
- Take your daily medicines as prescribed by your doctor, even if you are feeling well
- · Eat low salt food
- Check for swelling in your feet, ankles, legs and stomach
- Balance activity with rest periods

Yellow Zone

Caution – This zone is a warning You need to take action

You have:

- More shortness of breath
- Weight gain of 3 pounds in one day or a weight gain of 5 pounds or more in 1 week
- More swelling of your feet, ankles, legs, or stomach
- · No energy. Feel more tired.
- · Dry hacky cough
- Dizziness
- Feelings of uneasiness, you know something is not right
- . It is harder for you to breathe when lying down
- You are needing to sleep sitting up in a chair

- Call your doctor's office if you have any of the signs or symptoms listed in this yellow zone
- Make sure you have been taking your medicines correctly

Red Zone

EMERGENCY - You feel you are in danger

You have any of the following:

- Struggling to breathe.
- Shortness of breath that does not go away while sitting still
- Chest pain/tightness in your neck, jaw, throat, shoulders, arms or back
- Have confusion or can't think clearly

. Call 911

or

 Go to the hospital Emergency Room

(Do not try to treat this yourself or wait to see if symptoms improve)

Heart Failure Action Plan "Zones Sheet"



Low Sodium Eating Plan 2000mg Sodium







Low Sodium Eating Plan

2,000mg Sodium

Salt is also called "sodium" and is found in most foods. you eat.

Why do you need to limit sodium in your diet?

Sodium acts like a sponge and makes your body hold onto water. Eating too much sodium can cause you to gain weight, make your legs. swell, and cause water to collect in your lungs.

How much sodium can you have each day?

Doctors recommend that you eat less than 2000mg of sodium each day. This means taking the salt shaker off of your table and paying attention to the types of foods you eat.

The First Stees...

- 1. Do not add salt to foods when you cook or at the table
- 2. Use herbs and sessonings like Mrs. Dush that are sodium free
- Do not use instant foods that come in a can. bag, or box

Eat Less Added Salt

Choose this:

Mrs. Dash

Onion Pawde: Gartic Powder

Spices Herbs

Oil and Vinegar

Lemon Juice Hot Sauce

Pepper

Fresh Carlic, Onion, Green Pepper Ketchup labeled "No Salt Added"



Do not choose this:

Salt

Sea Salt

Seasoning Salts

Mustard

Meat tenderizer Soy Sauce

Ketchup **BBO Sauce**

Gartic Salt Bottled Salad Dressing Onion Sat. Bouillon

Start with fresh foods.

Olives

Sauerkraut Pickles

Relighes

Cheese Sauce Onion Saup Mix





COPD Teach Back Questions

- What should you do first if you are having more trouble with your breathing?
 - What is the name of your fast-acting/rescue inhaler?
 - How often do you use it?
- If your shortness of breath continues, without getting better, what should you do?
- What are the warning signs for you that indicate you should call your doctor?
- What should you do to prevent a flare-up (getting worse) with your breathing and lungs?





Teach Back Questions for Five High-Volume Conditions

Key Educational Topics for High Volume Clinical Conditions

St Luke's Hospital, Cedar Rapids, Iowa, 2011

Pick an educational topic to teach your patient/family. Narrow it down to four or more teaching points: the "must haves" or "vital few" for the patient/family to know when discharged.

Generic	Heart Failure	COPD	Stroke	Chronic Kidney Disease	Mental Health
Patient should explain diagnosis and health broblems for which hey need care. General understanding of disease process and	How would you explain heart failure to your family?	Tell me what you know about your COPD.	Do you know what happens when you have a stroke?	What do you need to do every day when you get home? Monitor B/P Weigh daily—in the	•



Use Teach Back Regularly

- In the hospital
- During home visits and follow-up phone calls
- To close understanding gaps between:
 - Caregivers and patients
 - Professional caregivers and family caregivers
- To assess the patients and family caregivers understanding of discharge instructions and ability to do self-care



Teach Back with Discharge Instructions

- Can you show me on these instructions:
 - How you find your doctors office appointment?
 - What other tests have you scheduled? And when?
- Is there anything on these instructions that could be difficult for you to do?
- Have we missed anything?



Teach Back Competency Validation

St Luke's Hospital, Cedar Rapids, Iowa Nursing Competency Assessment

Annual competency validation day: Methodology
The learning station uses discussion, role
playing and patient teaching scenarios to help
RN's communicate effectively to
patient/family.





Staff Competency Validation for Teach Back

- Each participant participates in role-play providing education to a patient.
- The following is assessed:
 - Ability to do teach back in a shame-free way, e.g. tone is positive
 - Utilizes plain language for explanations
 - Does not ask patient, "Do you understand?"





Evaluation/Discussion Questions

- What was the patient's reaction?
- What was it like for you as the Nurse doing Teach Back?
- Did it feel like extra work?
- How would you build Teach Back into your daily work?
- How could you use Teach Back to communicate with team members?



