

# Be Prepared To Be Engaged

**AHRQ** 

Guide to Improving Patient Safety in Primary Care Settings by Engaging Patients and Families

## Speaker



Kelly Smith, PhD
Scientific Director, Quality & Safety
Co-PI, AHRQ Guide to Improve Patient Safety
in Primary Care Settings by Engaging Patients
and Families

kelly.m.smith@medstar.net

No financial conflicts of interest to disclose.

## **Objectives**

- Review the key threats to patient safety in primary care settings and interventions to engage patients and families to improve safety
- Describe the role and value of the Be Prepared to Be Engaged strategy in improving patient safety
- Identify strategies for implementing the Be Prepared to Be Engaged strategy in primary care settings

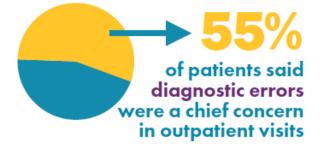
### **Patient & Family Engagement in Primary Care**



### **Patient Safety in Primary Care**

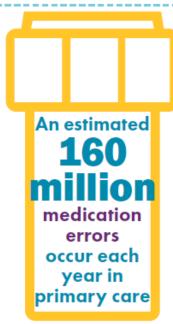


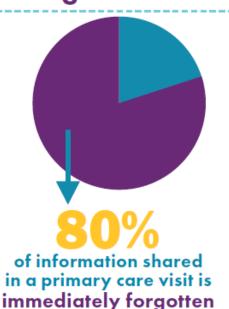




ED admissions are related to an adverse drug event







by patients

### **Four Interventions**

- Be Prepared to be Engaged
- Create a Safe Medicine
   List Together
- Teach-Back
- Warm Handoff Plus



### Be Prepared To Be Engaged

- Facilitates visit agenda setting for patients and clinicians.
- Improves visit efficiency and safety and promotes effective communication.



### Create a Safe Medicine List Together

- Creates a complete and accurate medicine list, which is the first line of defense against medication errors.
- Leads to improved patient outcomes, adherence, and safety.



### Teach-Back

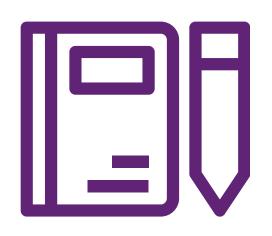
- Improves commuication and health literacy.
- Ensures the effective transfer of information shared with patients.



### Warm Handoff Plus

- Promotes collaborative communication, engaging the patient as part of the team.
- Supports handoff within the practice to reduce communication drops during transitions.

### What is Be Prepared to Be Engaged?



Be ready





Ask questions

Their questions



Speak up

Their health goals

# Why is it important?



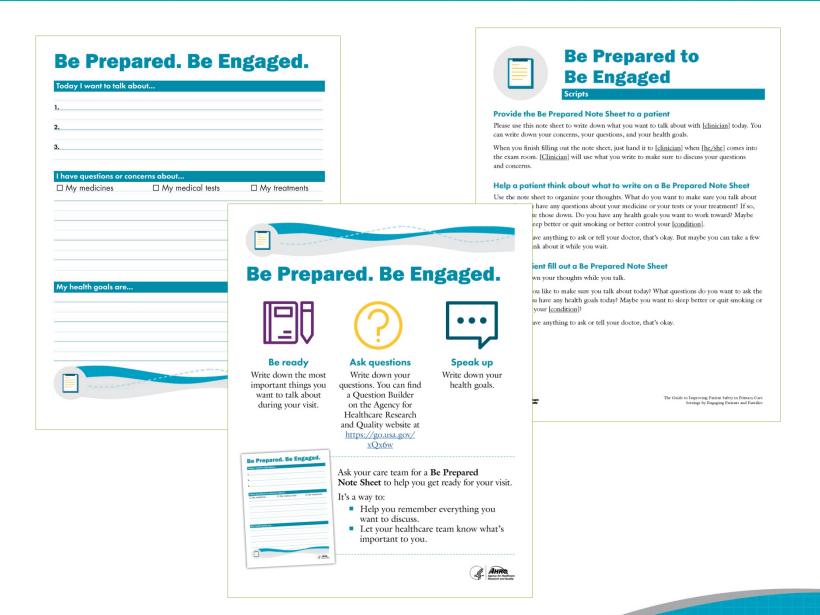
- There are significant time pressures in primary care and patients often arrive unprepared.
- The strategy helps patients come better prepared so time is used more effectively.

# How can it help me?

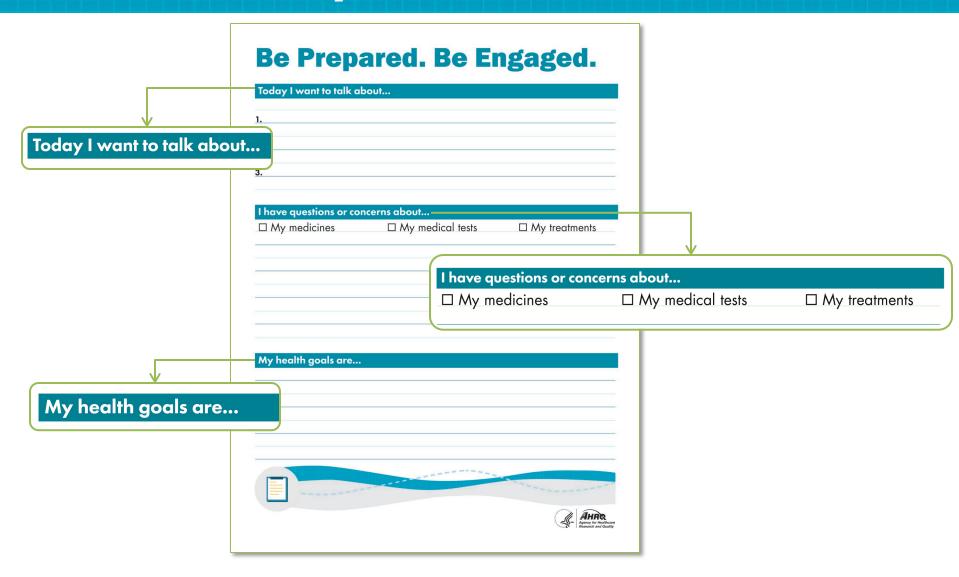
When patients wrote down an agenda before their primary care visit, 74% of clinicians and 79% of patients agreed that communication during the visit improved.

Over **80% of the clinicians** in the study *wanted* patients to continue to write down an agenda.

### What tools are available?



# **Be Prepared Note Sheet**



### How do I use it?

- Identifying patients
- Handing out
- Asking about
- Offering to help fill out
- Reviewing and discussing

## Getting Started with Be Prepared

### Implementation Quick Start Guide

### **Be Prepared To Be Engaged**



### Review intervention and training materials

- Understand the purpose, use, and benefits
   Review the training toolkit. of the Be Prepared strategy.

### Make decisions for your implementation

#### Obtain materials

- Will you print materials in the office or order printing?
- Who will be responsible for maintaining a supply?
- Do you need Spanish versions of the patient materials?

#### Set scope

Which patients will receive a note sheet? All Identify champions patients? A specific patient population?

#### Establish workflow

- When will you give patients the note sheet?
- Who will give patients the note sheet?
- Where will you document Be Prepared in the EHR?

#### Encourage use of the sheet

- How will you encourage patients to use the note sheet?
- Will you put up the posters? If yes, where? Will you ask staff to help patients fill out the note sheet?
- How will clinicians use the note sheet during a visit?

 Who will champion the strategy within each role on the team?

### 3 — Customize training for your practice

· Customize the training materials to reflect your decisions.

#### 4—Train team members

15 minutes.

- · Use staff meetings and huddles. · Strive for training meetings of at least
- Provide staff with scripts.



The Guide to Improving Patient Safety in Primary Care Settings by Engaging Patients and Families

• Identify a Champion and Get Leadership Buy-in

Step 2

 Plan Your Implementation **Process** 

Step 3

Design Your Implementation

Step 4

• Make Patients Aware

Step 5

Evaluate Effectiveness

# Step 1. Identify a Champion and Get Leadership Buy-in



- Identify a Be Prepared to Be Engaged practice champion
- Consider engaging a patient champion
- Obtain leadership buyin and support

# Step 2. Plan Your Implementation Process

- Identify your team
- Set a reasonable timeline
- Determine a standardized implementation process



### Step 3. Design Your Implementation

### Implementation Quick Start Guide

### **Be Prepared To Be Engaged**



### Review intervention and training materials

- Understand the purpose, use, and benefits
   Review the training toolkit. of the Be Prepared strategy.

#### 2—Make decisions for your implementation

#### Obtain materials

- Will you print materials in the office or order printing?
- Who will be responsible for maintaining a supply?
- Do you need Spanish versions of the patient materials?

• Which patients will receive a note sheet? All Identify champions patients? A specific patient population?

#### Establish workflow

- When will you give patients the note sheet?
- Who will give patients the note sheet?
- Where will you document Be Prepared in the EHR?

### Encourage use of the sheet

- How will you encourage patients to use the note sheet?
- Will you put up the posters? If yes, where?
- Will you ask staff to help patients fill out the note sheet?
- · How will clinicians use the note sheet during a visit?

· Who will champion the strategy within each role on the team?

### 3—Customize training for your practice

· Customize the training materials to reflect your decisions.

### 4 — Train team members

- · Use staff meetings and huddles.
- · Strive for training meetings of at least 15 minutes.
- · Provide staff with scripts.



 Use the Implementation **Quick Start Guide** 

 Make implementation decisions

Train team members

### **Step 4. Make Patients Aware**

- Orient the patient to the Be Prepared strategy
  - Patient poster
- Discuss expectations for use
- Reinforce behaviors at every level of the encounter





### Be ready

Write down the most important things you want to talk about during your visit.



### Ask questions

Write down your questions. You can find a Question Builder on the Agency for Healthcare Research and Quality website at https://go.usa.gov/

xOx6w



### Speak up

Write down your health goals.



Ask your care team for a **Be Prepared Note Sheet** to help you get ready for your visit.

It's a way to:

- Help you remember everything you want to discuss.
- Let your healthcare team know what's important to you.



### **Step 5. Evaluate Effectiveness**

Recognize your team's efforts and successes

Establish evaluation measures

 Monitor the impact on patient safety and patient engagement activities

### How can we evaluate it?

- Number of follow-up questions
- Visit length
- Satisfaction
- Reported use:
  - Receive note sheet.
  - Fill out note sheet.

# **Get Started Today!**

- Visit the AHRQ Website
- http://bit.ly/PrimaryCareGuide



### Be Prepared To Be Engaged

- Facilitates visit agenda setting for patients and clinicians.
- Improves visit efficiency and safety and promotes effective communication.



### Create a Safe Medicine List Together

- Creates a complete and accurate medicine list, which is the first line of defense against medication errors.
- Leads to improved patient outcomes, adherence, and safety.



### Teach-Back

- Improves commuication and health literacy.
- Ensures the effective transfer of information shared with patients.



### Warm Handoff Plus

- Promotes collaborative communication, engaging the patient as part of the team.
- Supports handoff within the practice to reduce communication drops during transitions.

# QUESTIONS?



### References

- 1. Lucchiari C, Pravettoni G. The role of patient involvement in the diagnostic process in internal medicine: a cognitive approach. Eur J Intern Med 2013;24(5):411-5. <a href="doi:10.1016/j.ejim.2013.01.022">doi:10.1016/j.ejim.2013.01.022</a>.
- 2. Litchfield IJ, Bentham LM, Lilford RJ, et al. Patient perspectives on test result communication in primary care: a qualitative study. Br J Gen Pract 2015;65(632):e133-40. doi:10.3399/bjgp15X683929.
- 3. Elder NC, Regan SL, Pallerla H, et al. Educating seniors to be patient safety self-advocates in primary care. J Patient Saf 2008;4(2):106-12.
- 4. Singh H. Safe and effective communication to prevent diagnostic errors. Middleton, MA: Patient Safety & Quality Healthcare; 2013. <a href="http://psqh.com/safe-and-effective-communication-to-prevent-diagnostic-errors">http://psqh.com/safe-and-effective-communication-to-prevent-diagnostic-errors</a>.
- 5. Weiner S, Schwartz A., et al., Annals of Internal Medicine, 2010;153(2):pp69