

## Section 3.5.6

## **Patient Mediated Interventions**

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# **Key Messages: Patient- Mediated Interventions**

- Aim to actively engage patients to improve their knowledge, experience, service use, health behaviour, and health status
- Patient education and information improve knowledge; other outcomes improve with more specific and personalized information, and added professional and other support
- Research gaps: underlying frameworks, essential elements & duration, costeffectiveness, best implementation strategies





# **Topics**



Case Study



2. Effective Interventions



3. Exemplars







# **Topics**



1. Case Study



2. Effective Interventions



3. Exemplars



Canada



# Mrs. C

## "I've had a sleepless night..."



Knee pain affects sleep→
not sure re surgery that was
offered

Husband feverish→
<a href="https://notsure">not sure</a> re going to ER

Forgot to fill new script → not sure how important it is







# Mrs. C Is Not Alone...

- 924 patients were questioned
- From 5 family practices in Quebec
- <u>after</u> making a decision with MD











	Unsure
TOTAL	55%
Vaccination	71%
Diabetes	60 %
Pain	59 %
Depression	58 %
Hypertension	57 %
Lifestyle	58 %
Cholesterol	55 %













	Unsure	Uninformed	Unclear Values	Unsupported
TOTAL	55%			
Vaccination	71%			
Diabetes	60 %			
Pain	59 %			
Depression	58 %			
Hypertension	57 %			
Lifestyle	58 %			
Cholesterol	55 %			











	Unsure	Uninformed	Unclear Values	Unsupported
TOTAL	55%	15%	7%	38%
Vaccination	71%	29%	36%	36%
Diabetes	60 %	20%	0%	27%
Pain	59 %	14%	10%	31%
Depression	58 %	15%	5%	30%
Hypertension	57 %	17%	5%	40%
Lifestyle	58 %	15%	5%	30%
Cholesterol	55 %	18%	18%	27%





# **Topics**



1. Case Study



2. Effective Interventions



3. Exemplars









Effectiveness of strategies for informing, educating, and involving patients

Angela Coulter and Jo Ellins

BMJ 2007;335;24-27 doi:10.1136/bmj.39246.581169.80

**25** Reviews: Health Literacy Interventions

**22** Reviews: Clinical Decision Making Interventions

**67** Reviews: Self Care & Chronic Disease Self Management interventions







## **Health Literacy**

### **Definition**

A person who is health literate is able to access, understand, evaluate and communicate information as a way to promote, maintain and improve health in a variety of settings across the life course

Expert Panel on Health Literacy. A Vision for a Health Literate Canada: Report of the Expert Panel on Health Literacy. Canadian Public Health Association, 2008.

### Interventions

- Written health information materials (e.g. brochures)
- Alternative format resources (e.g. internet)
- Targeted approaches for disadvantaged groups with low health literacy (e.g. pictograms, videotape, interactive computer)







# **Clinical Decision Making**

## Interventions

- Communication skills training for clinicians
- Question prompts for patients and coaching to develop skills in preparing for a consultation, deliberating about options, and implementing change
- Patient decision aids: explain options, present probabilities benefits vs. harms, clarify features of options that matter most, and provide structured guidance in deliberation and communication







# Self Care & Self Management Interventions

- Aim to improve people's practices in maintaining and managing their disease
- Self management education to help people cope with their disease and manage daily problems
- Self monitoring and self-administered treatment
- Self help groups and peer support
- Patient access to personal health information
- Patient-Centered tele-care









## Effectiveness of strategies for informing, educating, and involving patients

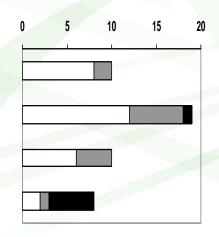
Angela Coulter and Jo Ellins

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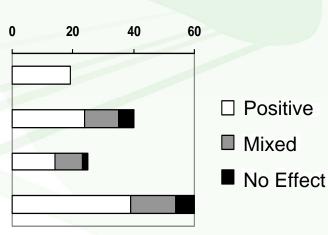






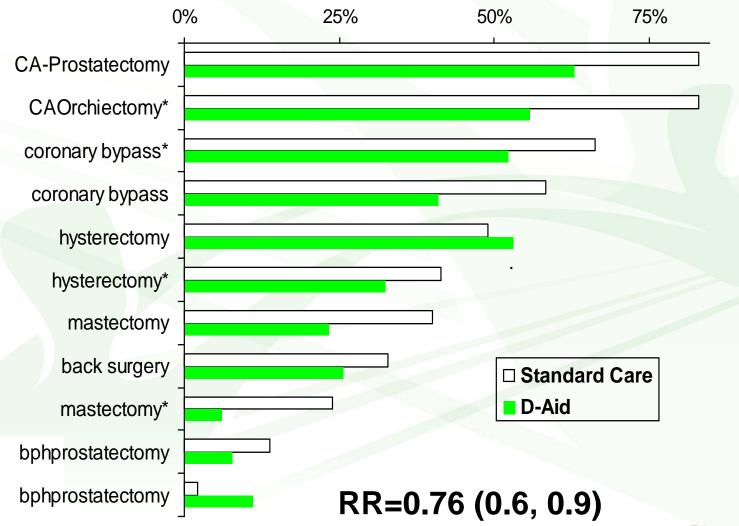


# 67 Reviews: Self Care & Chronic Disease Self Management





# Decision Aids Reduce Rates of Discretionary Surgery







## **Review Conclusions**

- Patient education/information hknowledge
- To ↑ experience, service use, health outcomes, behaviour change...
  - specificity/personalization of information
  - combine interventions with professional or other social support
  - extend duration for long term behaviour change
- Research gaps: underlying frameworks, essential elements & duration, cost-effectiveness, best implementation strategies







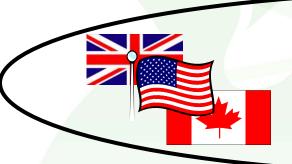
# **Topics**



Case Study



2. Effective Interventions

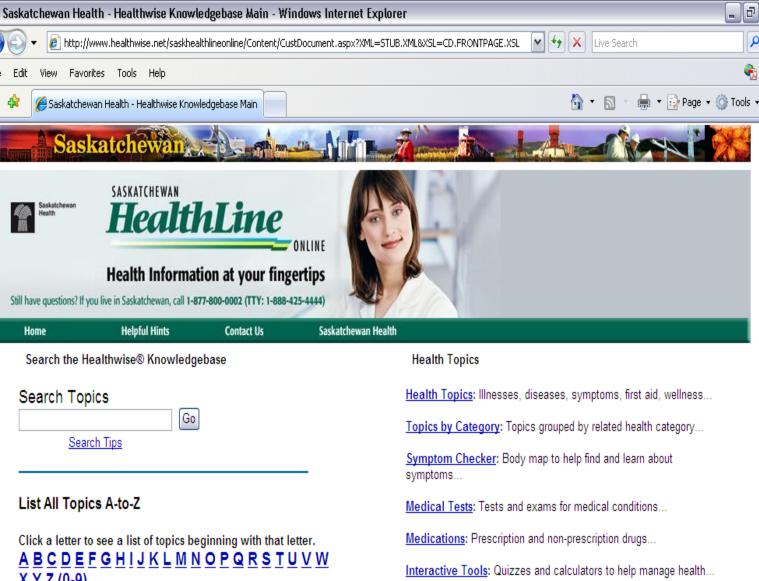


3. Exemplars









X Y Z (0-9)

<u>Help</u> **New and Updated Topics About Healthwise** 







#### **Health Information at your fingertips**







#### High Blood Pressure (Hypertension)

Health Tools

Health tools help you make wise health decisions or take action to improve your health.

DECISION

Decision Points focus on key medical care decisions that are important to many health problems.

Should I take medicine for high blood pressure?



Actionsets are designed to help people take an active role in managing a health condition

Monitoring your blood pressure at home

Taking your high blood pressure medications properly

Tips for following the Dietary Approaches to Stop Hypertension (DASH) diet

#### Osteoarthritis

Health Tools

Health tools help you make wise health decisions or take action to improve your health.

DECISION

Decision Points focus on key medical care decisions that are important to many health problems.

Should I have hip replacement surgery?

Should I have knee replacement surgery?

(ACTIONSET)

Actionsets are designed to help people take an active role in managing a health condition

**Exercising with osteoarthritis** 



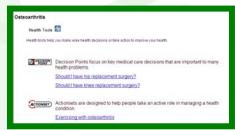












## **Challenge #1**

- Need to train potential users:
  - High school students
  - Post 2ndary students
  - Health science students day1 of training
  - New mothers
  - Health departments
  - Call centers and help-lines















## **BIG Challenge #2**

 Embed 'just in time' information for an individual as part of the process of care



## Wagner Chronic Care Model



Resources and Policies

Self-Management Support

## **Health System**

**Health Care Organization** 

Delivery System Design

HHR Utilization

Clinical Information Systems

Informed, Activated Patient Productive Interactions

Prepared,
Proactive
Practice Team

**Improved Outcome** 





# Implementation: Clinical Care



 Dartmouth HMC, VA, Mass Gen. & FIMDM Network



Group Health Cooperative





 Ottawa Pilot: Orthopedic Intake Clinic; Breast/Prostate Ca Center





## **Delivery Model**

### DARTMOUTH-HITCHCOCK MEDICAL CENTER

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#### Center for Shared **Decision Making**

About Shared Decision Making

How We Help

Decision Aid Library

Healthcare Decision Guide

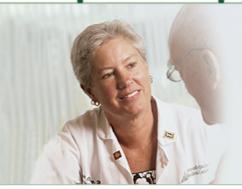
Resources

Shared Decision Making Team

More Appointment Information.

#### Go back to...

Departments & Services DHMC Home



Center for Shared **Decision Making** 

The Center for Shared Decision Making helps when you need to make a difficult healthcare decision. At times it can be hard to decide whether to have surgery, to have a test, or to continue with treatment.

#### Our services include:

- One-on-one counseling sessions for any medical condition
- A Decision Aid Library of helpful videotapes, audiotapes, booklets, CD-ROMs, and websites
- A Healthcare Decision Guide worksheet to help you work through a decision on your own

To make an appointment, stop by our offices, call (603) 650-5578, or email us at shared-decision-making@blitz.hitchcock.org.

#### Printable \

#### Make an Appointme

(603) 650-5578

More Appointment Information

#### Tools

A Woman's Introduction to Breast Cancer Care DHMC Video

Decision Support Tool

Ottawa Health Resear Institute: Ottawa Decision Aids



### **Decision Aid**

### **Personal Decision Form**

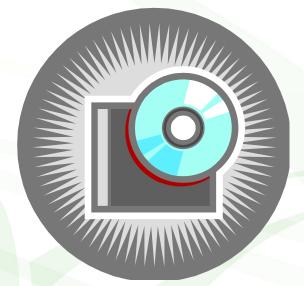
#### KNEE OSTEOARTHRITIS:

#### Personal Decision Form

There are several different ways to treat knee osteoarthritis. Each has possible benefits and risks. This form and video, together with your healthcare team, will help you make the decision that is best for you.

Please return this form with the video.

Your answers will tell us three important things:



#### Knowledge



How well we are doing our job of giving you information?

#### Values



What matters most to you?

#### Making Choices



How far along you are in decision making and what else you may need?

## BEFORE WATCHING THE VIDEO, PLEASE ANSWER QUESTION 1 – 2

1	Have you talked with a healt	haana muuridan ahant	this desision?
ı.	Liave And tarked with a hear	unate brovinet acom	tinis decisions
	<b>□</b> 37	-	

Yes No

2. At this time, which treatment option are you leaning toward?

□ Non-surgical treatment
 □ Surgery

Unsure

NOW, PLEASE WATCH THE VIDEO



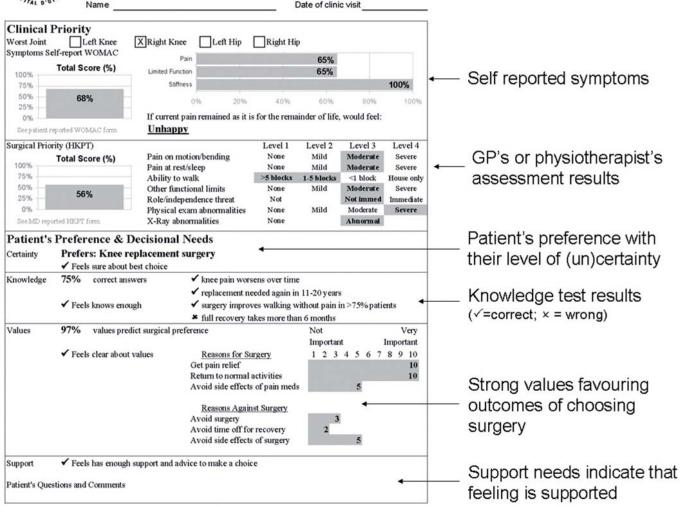


# **Summary Report for Surgeons**



AL OTTAWA HOSA	Summary of Clinical Priority and Patient's Preference for Total Joint Replacement
NONITAL D'OTTANK	Name

BM



## DARTMOUTH-HITCHCOCK MEDICAL CENTER



### **Quality Reports**

# **Online Quality Reports**

по поэрпал			
SHARED DECISION MAKING  We want all of our patients to feel good about the healthcare choices that they make. We invite our patients to visit the Center for Shared Decision Making. It is a free service for our patients who need help making a healthcare decision. The center offers one-on-one counseling, as well as take-home decision aids in the form of videos, audiotapes, booklets, CD-ROMs, and websites. If you are facing a healthcare decision, we encourage you to visit the Center for Shared Decision Making at DHMC. Call (603) 650-5578 for more information. (For more detail, click on each underlined measure below. A dash " - " means that there is no available comparison.)	DHMC 2006	Top 10%	Average
DECISION AID VIDEO			Back to Top
Patients who found the video clear: Percent of patients who reported that the information on the video was clear.	99%	-	-
Patients who said the information was unbiased: Percent of patients who said the information about treatment options was balanced.	98%	-	-
Patients who would recommend the video: Percent of patients who reported that they would recommend the video to others in the same situation.	99%	-	-
MAKING A DECISION ABOUT KNEE REPLACEMENT SURGERY			Back to Top
Patients who know the available choices: Percent of patients who watched the decision aid video and reported that they know what choices are available to them.	98%	-	-
Patients who know the risks of each choice: Percent of patients who watched the decision aid video and reported that they know the risks of each choice.	97%		-
Patients who know the benefits of each choice: Percent of patients who watched the decision aid video and reported that they know the benefits of each choice.	97%	-	-
Patients who know which risks and benefits matter most to them: Percent of patients who watched the decision aid video and reported that they know which risks and benefits mattered most to them.	95%	-	-
Patients who change their treatment choice: Percent of patients who change their treatment choice after watching the video (this includes those who were unsure about their treatment choice before the video).	13%	-	-

	SAFE AND EFFECTIVE CARE  Monitoring our care helps us evaluate and improve the way we deliver care. We emphasize areas where experts agree on the best treatment for a certain condition. (For more detail, click on each underlined measure below. A dash " - " means that there is no available comparison.)	DHMC 2006	Top 10%	Average
	PREVENTING SURGICAL INFECTIONS			Back to Top
	Use of appropriate preventive antibiotics: Percent of knee replacement patients getting the recommended preventive antibiotics before surgery.	100%	-	-
	<u>Timing of preventive antibiotics before surgery</u> : Percent of knee replacement patients getting preventive antibiotics within one hour of the start of surgery.	99%	98%	85%
	Stopping preventive antibiotics after surgery: Percent of knee replacement patients whose preventive antibiotics are stopped within 24 hours after surgery is completed.	82%	98%	73%
	COMPLICATIONS IN THE HOSPITAL			Back to Top
	Blood clots after single knee replacement: Percent of patients who got a blood clot after having single knee replacement.	1.1%	-	1.5%
	Blood clots after bilateral knee replacement: Percent of patients who got a blood clot after having bilateral knee replacement.	1.1%	-	2.3%
	MORTALITY			Back to Top
	<u>In-hospital mortality</u> : Percent of patients who died in the hospital after primary knee replacement surgery.	0%	-	0.1%
	COMPLICATIONS AFTER DISCHARGE			Back to Top
	Readmission to the hospital: Percent of patients who have had a knee replacement and are readmitted to the hospital within 90 days.	3.9%	-	-
	AFTER SURGERY The care of our patients doesn't end after surgery. We work with patients and their families to make sure their needs are met when they leave the hospital. (For more detail, click on each underlined measure below. A dash " - " means that there is no available comparison.)	DHMC 2006	Top 10%	Average
	SINGLE KNEE REPLACEMENT			Back to Top
	Average length of hospital stay after single knee replacement: The average number of days patients stay in the hospital after single knee replacement.	3 Days	-	-





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