Envision New Mexico puts the tools for quality improvement and evidence-based practice into the hands of primary care and behavioral health providers throughout New Mexico.

To envision what can be and to create the highest quality health care for children in New Mexico.
Pictorial Asthma Action Plan (pic-AAP NM): Possibilities for Increasing Pediatric Self-Management

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University of New Mexico Department of Pediatrics

Head to Toe April 2017
How do providers, children and families use Asthma Action Plans (AAP)?

Do patients who self-report regular use of asthma action plans have fewer asthma exacerbations?

How can providers use Teachback to facilitate asthma self-management?
A question:

- How many children in New Mexico have asthma?
- A: 5%
- B: 9%
- C: 13%
- D: 15%
Asthma in New Mexico

- Asthma is the one of the most prevalent chronic diseases affecting New Mexicans.
  - 47,000 children (9%)
  - 150,000 adults (9.6%)
Best practice asthma management

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(Dark grey shading indicates this item was not included in this review (100% not applicable)

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<td>Daily Controller Med*</td>
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<tr>
<td>Quick Relief Med</td>
<td>100%</td>
<td>36</td>
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<tr>
<td>Action Plan</td>
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<td>Number that have ALL 4 items</td>
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*If Severity is Not Documented, Daily Controller is Not Pass
*If Severity is Intermittent, Daily Controller can be Yes or No

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<td>Control Test</td>
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<td>Number that have ALL 5 items</td>
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Recommended use of AAP

- Guidelines from National Heart, Lung and Blood Institute and Global INitiative for Asthma (NHLBI, 2007 and GINA, 2017) indicate self management paired with a tool leads to a reduction in acute care.

- The NHLBI reported that patients who have been taught asthma self-management techniques can be effective alone, but are more effective with a tool (like an AAP). This is most effective when providers triage the pieces of care that they teach patients to self-manage.
Who is using an asthma action plan in New Mexico?

- Current Public Education Department (PED) policy in New Mexico (NM) requires all children who have asthma to have an asthma action plan with signed nurse orders on file with their school nurse office or School Based Health Center (SBHC).
Getting technical: AAPs are complex!
What information do families get out of asthma visits?

Up to 80 percent of the information patients and families are told is forgotten (Vickers, 2012).

Half of what is retained is incorrect.
How can we improve self-management of asthma?

Strategies for patient self-management:
- Tools
- Self-medication adjustment
- Immediate action symptoms
- Teachback
The pictorial Asthma Action Plan (pic-AAP)

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How does Teachback help?

How to Make Teach Back

- Efficient,
- Effective,
- and Every-day

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Objectives

- Review the five key steps for doing teach back efficiently and effectively
- Practice doing a Teachback in a 1-1 environment.
What is it like to listen to a conversation or instructions without knowing a lot of the words or the context?

**Easy Step-by-Step Instructions**

for *Writing a Sestina*
A person may have:

- Little background knowledge of medical topics (Medical terms, the human body, and our health care system are mysteries!)
- Fears, pain, and stress related to being sick that make it harder to process information
- Potential barriers of language, culture, poverty and literacy (ELLs)

Only about 12% of U. S. adults are highly skilled when it comes to health literacy.
Teach Back is...

- Asking patients to repeat in their own words what they need to know or do, in a non-shaming way.
  - For example: “I want to make sure I explained your medicine clearly. Can you tell me in your own words how you’ll take it?”

- A chance to check for understanding and, if necessary, re-teach the information.

- Not a test of how well the patient understood you, but of how clearly you explained the information.

- A chance for patients to process the information they just heard—gives them a better shot at remembering
Teach back is also—

—a process that allows you and the patient to discover gaps in information, misunderstanding, and missing context. It allows for clarification on both sides.
What Happens Without Teach Back?
Teach back is about delivery **AND** reception

The 5 Teach Back Steps

- Delivery
  - 1. Triage
  - 2. Tools
  - 3. Take responsibility
  - 4. Tell me
  - 5. Try again

Reception
Breaking it down: Five Ts for teach back

**T**riage—**focus** on just one topic for teach back

**T**ools—Use a model, a written tool, a poster, graphics, a pill pack, a pill organizer to help you explain/review what you want your patient to know.

**T**ake responsibility for the communication: “I want to make sure I did a good job explaining...”

**T**ell me—ask the patient to tell you, in her own words, what she will do or what she understands. Be explicit and specific about what you want the patient to say back.

**T**ry again— if necessary
The most difficult step

Those “take responsibility” lines

Okay, now tell me what I just said.

Oh my, I don’t remember everything, it was complicated, this is like a test, I didn’t really get it, she’s going to think I’m an idiot, I don’t even know where to begin. And I feel sick!

I forgot.
Teach back lead-ins

- I want to be sure that I did a good job explaining about ____________ because this is complicated and can be confusing. Can you tell me (or show me) ______________

- That was a lot of information I gave you and I want to know if I did a good job of explaining it. Can you say back to me what you have to bring to your next appointment?

- I want to make sure I did a good job of showing you how to use a spacer with your inhaler.
  - What are you going to do when you get home?
  - While you’re showing me, tell me what you are doing.
Some things to consider—

- What’s the most important thing I want my patient to know/understand?
- What does the patient want to know?
- What is important for the patient to be able to do at home without mistakes?
- What do I really want them to remember?
- How much can I ask them to remember?
- What’s the most difficult thing for my patient to do?
Find out what your client knows by asking questions--

- Have you done this before?
- What do you know about this?
- What are your worries about your asthma?
- What might keep you from being able to do _____?
- What do you think would work or help?
A Useful Concept: **Chunk And Check**

Asthma action plan

The patient needs to know this much information...

- Green section
- Yellow section
- Red section

University of New Mexico  *  Department of Pediatrics  *  Envision New Mexico
This slide intentionally left blank:
A Summary of Ways To Deliver Information Effectively

- Use shorter, simpler terms and short sentences—plain language - **Simplify**
- Take turns or **Chunk and check.**
- Use examples—put the information in a context that is familiar to the patient **Use examples**

Roter, D. Oral literacy demands of health care communication: challenges and solutions. 2011

- Use the 5 skill steps - (5 T’s)
Here’s the Magic of Teach Back

Data from Carolinas Health Care System Teach Well Project

Percentage of Patients requiring Repeat Teach Back

Weeks

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<th>10</th>
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Acknowledgements

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- Teresa Anderson, MD, UNM Pediatrics
- Kathleen Moseley, American Lung Association of New Mexico.

For more information on Teachback, please contact: Kathryn Anderson at kmanderson@salud.unm.edu.

OR

See Envision New Mexico’s website at: http://envisionnm.unm.edu/index.php/telehealth/videos/
Pic-AAP references


Pic-AAP references p. 2


To envision what can be and to create the highest quality healthcare for children in New Mexico.

Envision New Mexico puts the best resources available into the hands of the doctors, nurses and community workers keeping New Mexico families healthy.

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