

EVALUATE UNDERSTANDING



With All Patients and Primary Learners

Typical Patient Teaching / Discharge Experience

"After being a patient for 2 days, I was discharged without knowing exactly what was wrong in the first place. *And I was still in pain with swelling.*"

"No one kept me informed."

"Fragile at discharge, incomplete meds list. NO home health care or PT arrangements made. Needed assistance—returned to hospital a week later in worse condition!"

"Medication changes never mentioned."

"All of a sudden, they said you are going home this afternoon."

"We were disappointed with the way the discharge date was handled. They would not give us an exact date which made it very hard for us to make adequate plans."

Why are Patients Readmitted?

- Worsening of ongoing medical problems
- Development of a medical problem or complication
- Adverse events related to care transitions
 - Lack of understanding of discharge care plan
 - Not clear about reason for first hospitalization
 - Not sure about what *danger signs* to watch out for after discharge
 - Not sure about follow-up for tests and consultations
 - Not sure about exact medication regimen
 - Poor handoff communication
 - Lack of timely follow-up with PCP



What Can We Do?

Use "Teach Back"

Evidence Suggests...
Specific Interventions Can
Reduce Rehospitalizations



1. Engaging/educating patients
 - Identify the **PRIMARY LEARNER**
 - Improve patient/family teaching through use of **TEACH BACK**
2. Improving handoffs through real-time, patient centered communication
3. Ensuring appropriate and timely post-hospital follow-up

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Prevent Re-Admissions



- *Improves Patient Understanding*
- *Evaluates Patient Comprehension*



Use of Teach Back

Teach Back Method



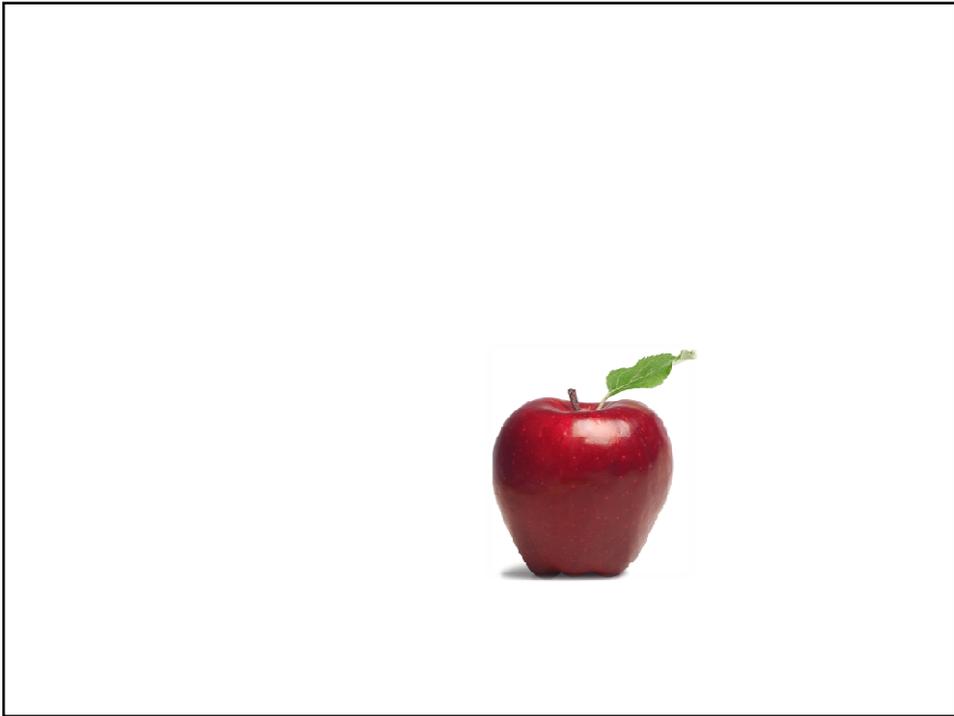
Effective teaching method to ensure that your patient understands what you tell them

Why “Teach Back”



- Studies have shown that:
 - 40-80% of the medical information patients receive is forgotten immediately
 - Nearly 1/2 of the information is retained incorrectly
- **Teach-Back or Show Me** can close the gap of communication between the clinician and the patient
- Patient understanding is confirmed when it is explained back to you

AHRY Health Literacy Universal Precautions Toolkit 2010



A graphic designed to look like a piece of lined paper. A blue diagonal banner with the words "TEACH BACK" in white, bold, sans-serif capital letters is positioned across the upper half. Below the banner, a red apple with a green leaf is centered. At the bottom, a teal horizontal bar contains the URL "http://www.nhealthliteracy.org/teachingaids.html" in white text. The background consists of light blue horizontal lines and a vertical red margin line on the left side.

Teach Back Language

Problem solving offers opportunities for patients to increase confidence through verbal rehearsal:



- “So I can be sure I was clear, tell me how you will take your medicine.”
- “If your wife asks you about your new medicine, Metformin, what will you tell her?”
- “Show me how you will use the asthma inhaler when you go home.”

Teach Back Language

Problem solving offers opportunities for patients to increase confidence through verbal rehearsal:



- “When your daughter comes to visit today and asks why you are in the hospital and what your treatment has been---what will you tell her?”
- “If you feel sweaty, shaky, confused what will you do?”
- “Let’s make sure I covered everything...”

Using Teach Back

- Teach back will be used by every nurse on every patient
- IHI STAAR Project determined that you can and should use teach back for all teaching. Every patient and primary learner will be taught:
 - Diagnosis
 - Treatments and Tests
 - Medications
 - When to contact the Doctor or seek emergency help after discharge

Using the teach back method

Teach Back Role Play

1. Introduction

- Ask/discuss patient problems/issues
- State what you are going to teach

2. Teach

- Diagnosis
- Tests and Treatments
- Danger Signs and responses

3. Confirm Patient Understanding

- Teach back (tell back)