Today’s Host

Dorian Burks
Project Coordinator
Institute for Healthcare Improvement
Phone Connection (Preferred)

To join by **phone**:
1) Click on the “Participants” and “Chat” icons in the top right hand side of your screen.
2) Click the ☎️ button on the right hand side of the screen.
3) A pop-up box will appear with the option “I will call in.” Click that option.
4) Please dial the **phone number**, the **event number** and your **attendee ID** to connect correctly.
Please use chat to "All Participants" for questions.

For technology issues only, please chat to "Host".
When Chatting…

Please send your message to All Participants
Expedition Director

Joelle Baehrend
Director
Institute for Healthcare Improvement
Today’s Agenda

- Welcome & Introductions
- Action Period Debrief
- Health Literacy and Medication Safety – Gail Nielsen, BSHCA, FAHRA
- Action Period Assignment
Session 1 – Improving Polypharmacy
  Faculty: Robert Feroli, PharmD and Amanda Brummel, PharmD, BCACP

Session 2 – Health Literacy and Medication Safety
  Faculty: Gail Nielsen, BSHCA, FAHRA

Session 3 – Improving Medication Adherence
  Faculty: William Strull, MD

Session 4 – Medication Reconciliation
  Faculty: Anne Myrka, RPh, MAT

Session 5 – Safe Management of Newly Released Anticoagulants and High-Alert Medications
  Faculty: L. Hayley Burgess, PharmD
Action Period Assignment – Report Out

- Research and consider what your facility has in place to optimize medication use and minimize polypharmacy.

- Please use the chat to share:
  - What did you learn about your organization’s process for medication therapy management and efforts to reduce polypharmacy where appropriate?
  - Any surprises?
Survey Results - Current State

Health Literacy: My hospital has a process for assessing patients’ ability to understand instructions related to their medications.

- Do not know current status of this practice: 10%
- Do not currently have this practice in place: 10%
- Have a process that supports this practice: 30%
- Process is reliably applied: 30%
- Need further clarification on this practice: 20%
Faculty

Frank Federico, RPh
Executive Director, Strategic Partners
Institute for Healthcare Improvement
Faculty

Gail A. Nielsen, BSHCA, FAHRA
Fellow & Patient Safety Scholar
Institute for Healthcare Improvement
Health Literacy Impact on Medication Safety

Gail Nielsen

March 12, 2015
Objectives

• Describe the impact of health literacy on medication safety

• List two ideas for using health literacy principles and techniques to increase medication safety
Health Literacy

“The degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions.”
Impact of Literacy and Health Literacy

- Lower health literacy is associated with poorer health outcomes, worse health status, less health knowledge, and worse disease control.

- Literacy is a stronger predictor of worse outcomes than age, income, employment status, educational level or racial or ethnic group.

- Better health literacy is associated with a lower prevalence of diabetes.


Health Literacy: Impact on Medication Safety

- Med errors and adverse drug events
- Unrealistic optimism of patient and family to manage self-care and medications
- Patient lack of adherence to do self-care e.g., take medications, because of:
  - Poor understanding or confusion about how to use, access, or pay for medications
  - Self-care instructions that are confusing, contradictory to other instructions, or are not tailored to a patient’s level of health literacy
  - Medication discrepancies in handover information
Post-discharge Complications

ADEs account for 2/3s of post-discharge complications occurring within 3 weeks of hospital discharge

24% were judged preventable [1]

In a similar study, 27% were judged preventable; 33% ameliorable [2].


## Changing Paradigms

<table>
<thead>
<tr>
<th>Traditional Focus</th>
<th>Transformational Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinician teaching</td>
<td>What are the patient and family caregivers learning?</td>
</tr>
<tr>
<td>Patients are the recipients of care and the focus of the care team</td>
<td>Patient and family members are essential and active members of the care team</td>
</tr>
</tbody>
</table>
Two ideas for using health literacy principles and techniques to increase medication safety

- Always Use Teach-back!
- Develop consistency of teaching content across the continuum
Helping Patients Understand

Assess patient’s ability to understand how to:

- Do critical self-care activities - taking medications
- Access care needs related to medications
Use Teach-back

• Explain needed information to the patient or family caregiver

• Ask in a non-shaming way for the individual to say in his or her own words what was understood

  **Example:** “I want to be sure that I did a good job of teaching you today about how to take this new medication. Could you please tell me in your own words how you will take it at home?”
Augmenting Teach-back

- Patients and families often don’t know what questions to ask

- To discover potential opportunities for intervention, ask:
  - What will be hard about taking this medicine?
  - What worries you about taking your medications?
  - Have we missed anything?
  - Who helps you with your medications?
Using Teach-back Reliably

Requires:

Developing user competence

and

Building the daily habit
Helping Patients Understand

Assess process reliability through observations:

- Meds administration by non-pharmacy staff
- Patient teaching around taking medications
- Using patient-friendly language and techniques
- Using competence and habits for teach-back
10 Elements of Competence for Using Teach-back Effectively

1. Use a caring tone of voice and attitude
2. Display comfortable body language and make eye contact
3. Use plain language
4. Ask the patient to explain back, using their own words
5. Use non-shaming, open-ended questions
6. Avoid asking questions that can be answered with a simple yes or no
7. Emphasize the responsibility to explain clearly is on you, the provider
8. If the patient is not able to teach back correctly, explain again and re-check
9. Use reader-friendly print materials to support learning
10. Document use of and patient response to Teach-back
Coaching to Always Use Teach-back

Giving staff knowledge on teach-back and its effectiveness is important. But, to change from a long-standing patient education habit of asking yes/no questions like "Do you have any questions?" to one of using teach-back to confirm understanding via the patient's own words, takes coaching.

www.teachbacktraining.com
How Might We........?

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

Resources
AHRQ Health Literacy Tools for Use in Pharmacies

- Pharmacy Health Literacy Assessment Tool & User's Guide
- Training program for pharmacy staff on communication
- Guide on how-to create a pill card
- Telephone reminder tool to help refill medicines on time
- Explicit and standardized prescription medicine instructions

Improve Communication

Health Literacy linked to misunderstanding instructions about prescription medication errors…

ACTION:

• Target and Tailor Communication

• Make Organizational Changes

Linking limited health literacy to misunderstanding instructions about prescription medication, medication errors, poor comprehension of nutrition labels, and mortality:


Creating standards and guidelines to improve the communication of information on prescription labels

The United States Pharmacopeia and the National Association of Boards of Pharmacy both have initiatives to create standards and guidelines to improve the communication of information on prescription labels.


Taking Action: 3 High-Risk Drugs

Initial targets of the ADE Action Plan:

- Anticoagulants
- Diabetes agents
- Opioids

Approach to reduce patient harms from these three ADEs:

- Surveillance
- Prevention
- Incentives and Oversight
- Research

Roundtable on Health Literacy
Board on Population Health and Public Health Practice
Questions/Discussion

- Raise your hand
- Use the chat
Action Period Assignment:

- Review your organization’s patient literature for three medications and ask patients to read it and provide feedback on understanding of content
  - Please be prepared to share on our next session
Expedition Communications

• All sessions are recorded
• Materials are sent one day in advance
• Listserv address for session communications: medicationsafety@ls.ihi.org
• To add colleagues, email us at info@ihi.org
Session 3

Improving Medication Adherence

William Strull, MD
Medical Director for Quality and Patient Safety
The Permanente Foundation

Thursday, March 26th, 1:00 – 2:00 PM ET
Thank You!

Please let us know if you have any questions or feedback following today’s Expedition webinar.

Joelle Baehrend
jbaehrend@ihi.org

Dorian Burks
dburks@IHI.org