

Teach-back: An evidence based strategy to enhance patient and family caregiver education through effective communication

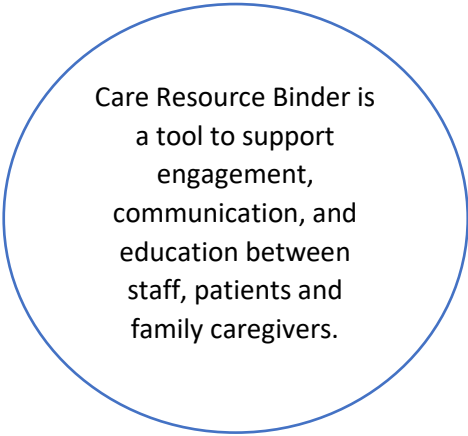
Thank you for your interest in Teach-back as a strategy to further enhance how St. Joseph’s staff engage patient and family caregivers and enhance the effectiveness of staffs’ communication skills and abilities. It can be implemented on its own or in conjunction with the PODS and/or Care Resource Binder – see the Patient and Family Partner Toolkit for details and direction to the respective toolkits.

Ever wonder if patients and/or family members really understood what was said?

Literature suggests that we retain about 20% of what we hear; add something visible like handouts and it increases to 50%. If we add discussion and/or teaching others, it increases to 70-95%.

Patient-Oriented Discharge Summary (PODS) is an evidence-based approach to discharge that ensures key information for improved transition success is provided:

- ✓ Medications
- ✓ Changes to my routine
- ✓ Appointments
- ✓ Who to contact
- ✓ Where to go for more information



Care Resource Binder is a tool to support engagement, communication, and education between staff, patients and family caregivers.

Teach back is an evidence based strategy to improve communication with patients and family caregivers thereby **improving outcomes**^{1,2}. By asking the patient or family member to explain or teach back in their own words the information provided, the health care provider can check-in to confirm that the information has been communicated in a way that is clear to the patient and/or family member. It can be as simple as asking “*Could you tell me back what we just talked about to see if I was clear*” or “*Can you show me how you are going to do this at home so I know I explained it well enough*”. Teach back is not quizzing the patient or family member – clear communication is the responsibility of the health care provider.

¹ Health Quality Ontario. Health literacy; teach back. <https://www.hqontario.ca/Patient-Partnering/Patient-Partnering-Tools-and-Resources/Resources-for-Health-Care-Providers/Health-Literacy> (accessed April 2020)

² Institute for Health Care Improvement. Teach back <http://www.ihc.org/resources/Pages/Tools/AlwaysUseTeachBack!.aspx>

Teach back is not complex to learn but requires time and support for learning and shifting how questions are asked to confirm if the information given was understood. With practice and support through mentoring and coaching, staff will develop proficient skills and knowledge to integrate this strategy into practice until it becomes a natural part of daily practice (habit).

The tools and structure for this Teach Back training and implementation package are based on what appear to be the most robust, efficient and cost-effective resources available online^{3,4,5}.

However, **the primary resource to affect the desired change is staff practicing** and receiving ongoing feedback; this needs to be built into the details of your implementation plan. Suggestions are for a minimum 3-month commitment with more intense support in the first month and slowly tapering off over month 2 and 3 depending on staff needs.

Teach Back Training tool kit is available and the following training is recommended as a part of the implementation of the method:

Preparing for Teach-back training:

- Review the introductory training power point – the first slide notes section outlines all required technology to run this presentation and highlights the needed resources (e.g. handouts, MP3video clips) all of which are available in the toolkit.
- This introductory session fits within a 1-hour time period. It is highly recommended to present this in groups rather than having staff watch it individually; discussion that arises is very valuable.

Why engaging Caregivers is important and makes a difference

- 70% of care provided to patients is by the family caregiver⁶
 - Caregivers save the healthcare system over \$31 billion annually yet they are often referred to as ‘silent partners’ in care⁶

³ *Always Use Teach Back!* <http://www.teachbacktraining.org/>

⁴ Teach-back [Internet]. Sydney, NSW: South Eastern Sydney Local Health District, Deakin University and University of Melbourne; 2018 [cited 2020 January 30]. Available from: <http://teachback.org/>

⁵ Agency for Healthcare Research and Quality (AHRQ) health literacy program. <https://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/index.html>

⁶ *Out of the shadows and into the circle: Partnering with Family Caregivers to Shift Ontario's Health Care System.* The Change Foundation. Published 2016. Accessed July 17, 2017. <http://www.changefoundation.ca/about-us/strategic-plan/>

- Consider if your team would benefit from having champions to support the training suggestions (see below). If yes, decide if your champions will learn along the way with your staff or if you wish them to have greater skills and abilities before proceeding with training the rest of staff. There are benefits and challenges with both options.

Introductory presentation session

- Prepare the tools and handouts from the toolkit that are needed to successfully use this presentation. The notes section for each slide contains all the key content needed. It can be used verbatim or paraphrased.
- Be prepared for those staff who state they know this technique/ use this technique regularly already
 - a. Highlight that they can take on a champion role
 - b. Indicate it will be a good opportunity to reflect personally to see if there are opportunities for enhancing this skill – experience found that staff who felt they were skilled already voiced benefit from participating in all aspects of the training.
 - c. Can use this on their learning development for their professional college/association learning plan or St. Joseph’s learning plan
- Towards the end of Introductory session have participants pair up – they will work together for the first 1-2 weeks helping to support each other through observation and reflection using the tools and resources provided at this session. See Weekly Challenges below.

First month:

- Have weekly “teach-back huddles” that all staff in training are expected to attend.
 - a. talk about what has gone well, what they are having difficulty with, answer questions, review concepts, demonstrate, re-inforce the requirement to include using Teach back in their documentation (not extra but done with usual documentation of an education session). Provide the next “challenge” to help build upon the skills they are developing.
 - b. Offer multiple huddles times per week to choose from; the requirement would be to attend at least one, but can attend more than one if they want.
 - c. At week 2 huddles – have them switch partners to build upon their learning opportunities; review as above in “a”.

Second Month

- a. At end of month 1 or 5-week mark,
 - a. have 30-minute sessions offering time options similar to huddles
 - i. in-depth reflection and review of what has gone well, what challenges are being experienced, how to handle different situations
 - ii. re-administer the Conviction and Confidence scale and reflect on progress/change from initial scale done at introductory session; identify successes and areas to focus on over the next month
 - iii. introduce and demonstrate the next “big challenge”
 1. start using Teach-back in training sessions such as group education sessions (e.g. on SCI – the pain education sessions), bedside shift change, or other time standard practice is provided. Document that Teach-back was used and outcomes
 - b. The weekly huddles could change to alternate weeks depending on the needs of staff; may need to continue weekly for a few more weeks for some.
 - c. Encourage continued use of self and peer observation – use Observation Tool so progress can be tracked.
 - d. Support the ongoing need for documentation related to using Teach-back
 - e. If possible, have colleagues from different disciplines/professions observe using the Observation Tool. Each staff should have at least 1 observation done on them each week, preferably more, to enhance their learning. For optimal learning have observations done by a variety of co-workers.

Third Month and onward

- a. Repeat above with bigger challenges, such as discussions around discharge planning that each team member does. Need to discuss and decide as a team on how/when to use Teach Back with PODS or discharge planning checklist
- b. Repeat Conviction and Confidence scale – reflect on progress
- c. Open ended questions should be common practice by now as should using Teach back with education provided to patients and family caregiver
- d. Discuss and decide ongoing needs. Some may continue with regular huddles (decide on frequency and timing) while others may feel confident to continue on their own.

- e. Consider a 4 or 6 month follow up and regular check-ins for the next few months, using the observation tool and/or the conviction and confidence scale. Build Teach back as part of rounding and/or as part of professional development plan (e.g. how do you use teach back, how do you know your patients understand you, give an example of when you had great success from using Teach back or a time when it didn't go as well as you hoped).
- f. Decide on how orientation for new staff will be completed – should follow the same format and support provided for at least 3 months.
- g. If written materials are being developed to support Teach back, Health Literacy and Senior Friendly guidelines for written communication should be considered. Appendix XX contains the guidelines used during the development of the initial Care Resource Binders.

Weekly challenges:

Week 1 training challenges

1. Asking questions:
 - Pay attention to how you ask questions – are they open ended or close ended (yes/no)?
 - Try changing how you ask questions to more open ended questions
 - X Do you have any questions?
 - What questions do you have for me about...?
2. Use Teach-back with 1 patient/family caregiver on 2 different days.
 - Choose a slower time, or the last patient of the day
 - Use the Teach Back Observation Tool on yourself to help reflect on how it went
 - Document that Teach-back was used and the outcome, as part of your normal documentation about providing education.
 - Example: Transfer training to/from toilet was provided this date to patient and family caregiver using teach-back approach. Patient and family caregiver were able to demonstrate appropriate techniques.
 - Example: Education for safe swallowing was provided to patient and family caregiver using teach-back approach. Patient and family caregiver both were able to teach-back the key points, and indicated they felt comfortable and confident with this information.

Week 2 training challenges

1. Asking questions:

- Continue to reflect on how you ask questions – are they open ended or close ended (yes/no)?
 - Start a running list of the open ended questions you are trying, what worked, what didn't and why. Have it available for quick reference.
2. Use Teach-back with 2 patient/family caregiver on different days.
 - Choose a slower time, or the last patient of the day
 - Use the Teach Back Observation Tool on yourself to help reflect on how it went
 - Document that Teach-back was used and outcomes

Week 3 training challenges

1. Asking questions:
 - Continue to reflect on how you ask questions – are they open ended or close ended (yes/no)?
 - Continue your running list of open ended questions you are trying, what worked, what didn't and why. Have it available for quick reference.
2. Use Teach-back with 4 different patient/family caregiver
 - Use the Teach Back Observation Tool on yourself to help reflect on how it went
 - Ask a co-worker to observe and provide feedback using the **Observation Tool** – for 1 patient/family caregiver
 - Document that Teach-back was used and outcomes

Week 4 training challenges

1. Use Teach-back with 6 different patient/family caregiver
 - Use the Teach Back **Observation Tool** on yourself to help reflect on how it went
 - Ask a co-worker to observe and provide feedback using the Observation Tool – for 3 patients or family caregivers
 - Document that Teach-back was used and outcomes
2. Use teach back with the discharge summary or patient-oriented discharge summary (PODS) (whichever is applicable) with 1 patient and family caregiver
 - a. Document that Teach-back was used and outcomes
3. Continue:
 - To reflect on how you ask questions in different situations
 - Asking open ended questions
 - What questions do you have for me about...?
 - Your running list of open ended questions related to your work