

Patient Self-Management

National Medical Home Summit West
THE PATIENT-CENTERED MEDICAL
HOME BOOT CAMP
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Session Overview

- ▶ Learn a five-step approach to implementing SMS in an ambulatory practice
- ▶ Explore examples of how practices have implemented each step in the field
- ▶ Discover tools for self-management support that can be adapted by the practice

Self-Management Support (SMS)

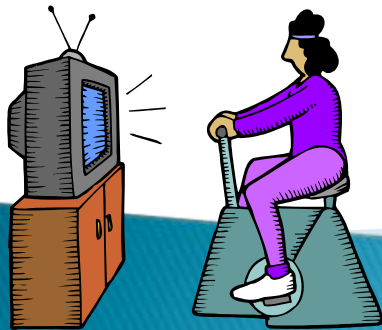
- ▶ Support for:

“The *individual’s ability to manage* the symptoms, treatment, physical and social consequences and lifestyle changes inherent in living with a chronic condition.”¹

- ▶ Includes health care, community and social structures
- ▶ Minimizes barriers to SM while supporting families and individuals to SM
- ▶ Builds on the skills, resources and existing social networks people have in their daily lives
- ▶ Can be provided one-on-one, in groups, or electronically

¹Barlow et al, Patient Educ Couns 2002;48:177

What SMS do you currently provide in your practice?



Five Steps

1. Involve the Whole Team
2. Enlist Clinical Leaders
3. Provide Additional Support
4. Look Beyond Assumptions
5. Partner Outside your Walls





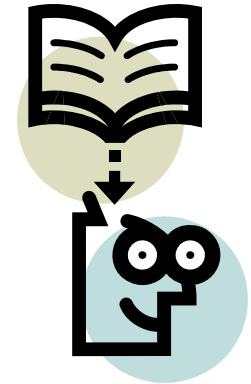
1. Involve the Whole Team

- Provide training*: core for all, more for a few
- Define roles and responsibilities
- Support essential infrastructure: time and resources
- Guide the work but encourage autonomy to find approaches that work
- There is not a *one-size fits all* that works

*See accompanying Resource List for recommended Training Materials.

Train the Team

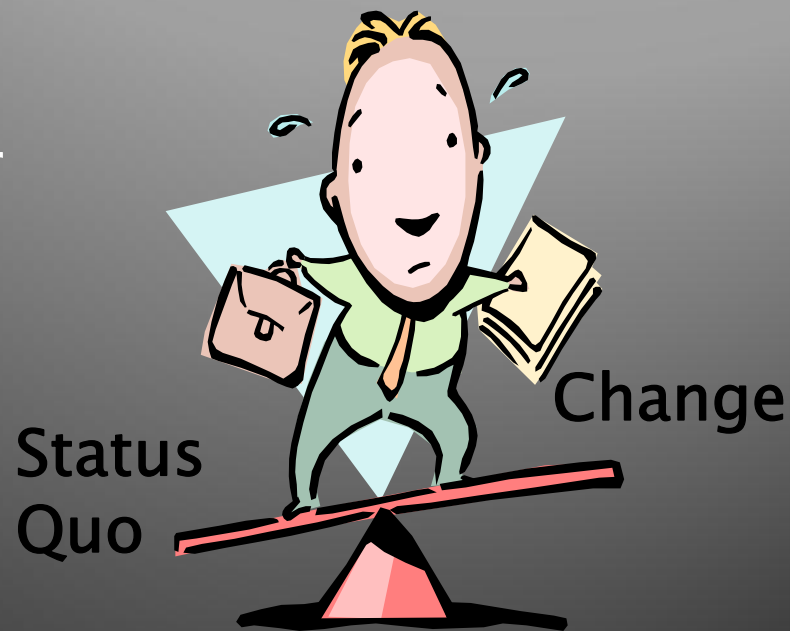
- ▶ Core training for all staff:
 - Context for SMS
 - Stages of Change
 - Basic Motivational Interviewing strategies
 - How to handle challenges
- ▶ Advanced training for some:
 - Personal action planning (self-management goals)
 - Outreach and follow-up
 - Specialized skills – health literacy, depression screening, cultural skills, other practice-based skills as needed



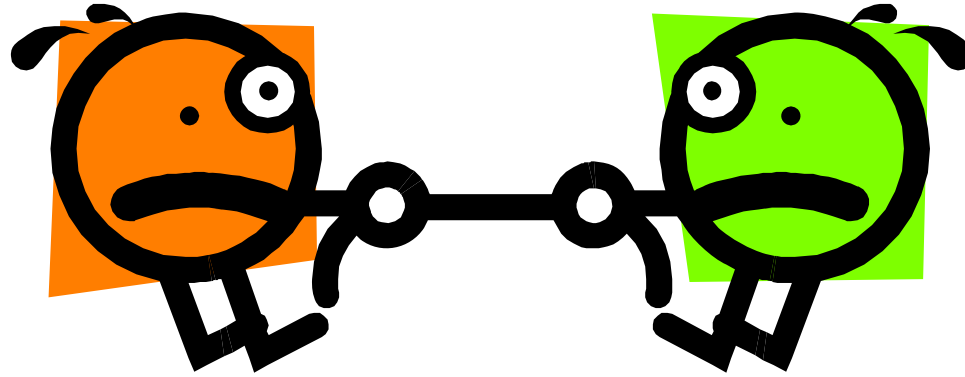
SM from the patient perspective is all about change....

- Take a medicine
- Increase a healthy behavior
- Decrease an unhealthy behavior

We call it following a care plan



SM Tug of War



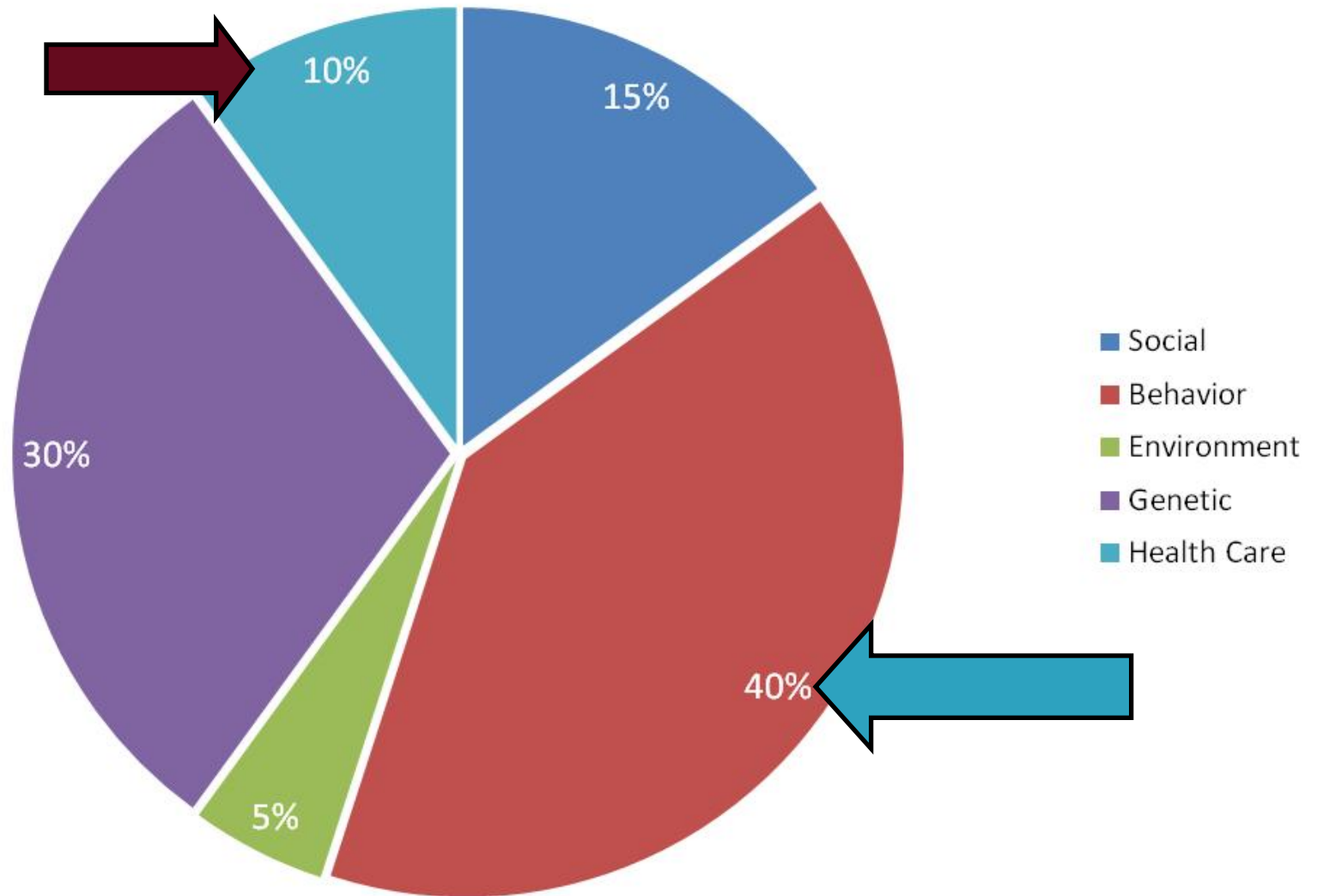
- Desire to see patients do well
- Experience and knowledge to know what it takes
- “Report card” for outcomes

My patients are
non-compliant.....

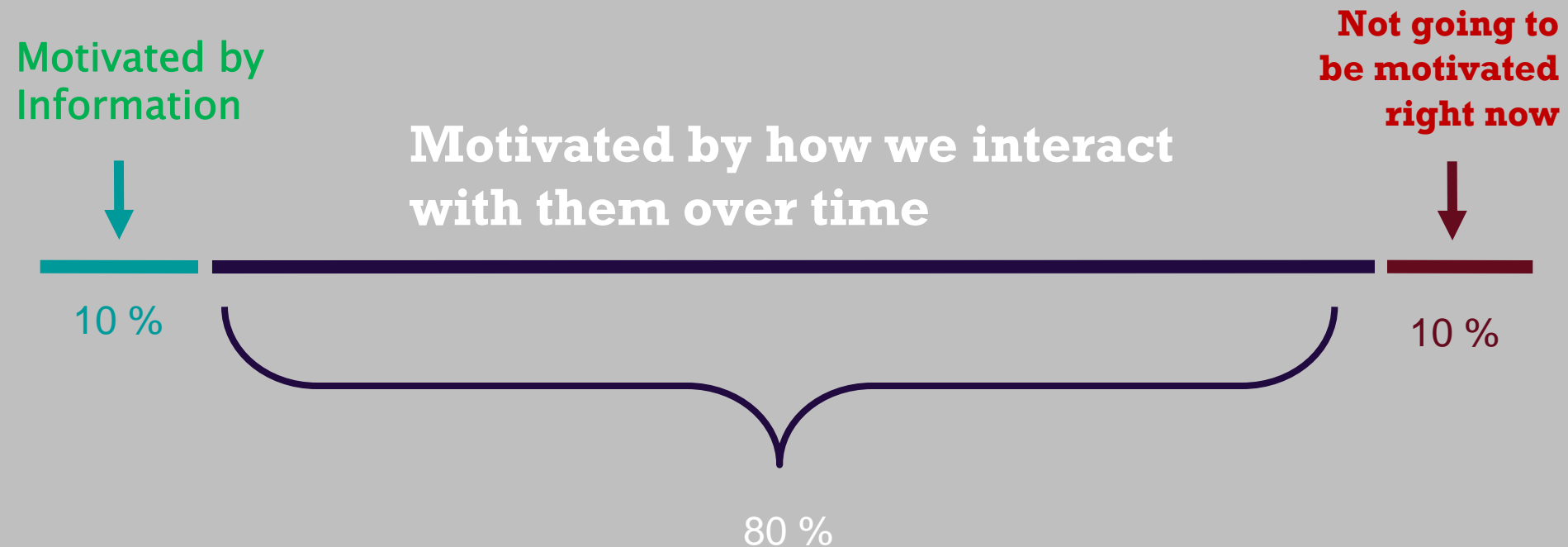


My doctor does not
listen to me.....

The Leading Determinants Of Health



But can we impact an individual's behavior?




Stages of Change




Pre-Contemplation	Contemplation	Determination/Preparation	Action	Maintenance	Relapse/Recycle
	 Fence				
No; Denial	Maybe; Ambivalence	0-3 Months Yes, Let's Go; Motivated	3-6 Months Doing It; Go	Over 6 months Living It	Ugh!!



Basic Motivational Interviewing

- ▶ Active listening
 - ▶ Express empathy
 - ▶ Develop discrepancy
 - ▶ Roll with resistance
 - ▶ Ambivalence is normal
 - ▶ Importance of a personal action plans (self-management goals)
 - ▶ Support self-efficacy
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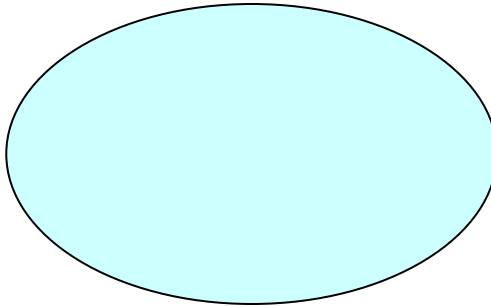
Tips and Tools

- ▶ Use pictures
 - ▶ Ask for patient's story
 - ▶ Clear roles and responsibilities for SMS
 - ▶ Prompts: work flow, VS, flow sheet
 - ▶ Process for unexpected challenges
 - ▶ Continued emphasis of “team” supporting a panel of patients
 - ▶ Consider Group Visits
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BUBBLE DIAGRAM - Diabetes

Here are some things other people have decided to do for their health.
Would you like to set goals concerning any of them?

Blood glucose monitoring

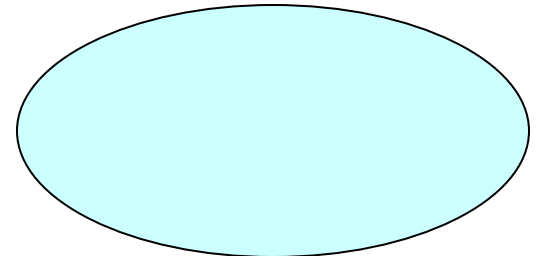


Taking medications to help control blood sugar



Skin care

Taking insulin



Diet



Losing weight



Depression



Daily foot care



Smoking



My diabetes self-management goal



Eat a Healthy Diet



Be Physically Active



Take My Medicine



Other



Monitor My Blood Sugar and Blood Pressure



Cope with Stress



Limit Alcohol



Stop Smoking

One way I want to improve my health is (e.g., be more active):

My goal for this week is (e.g., walk 4 times):

When I will do it (e.g., mornings before breakfast):

Where I will do it (e.g., at the park):

How often I will do it (e.g., Monday thru Thursday):

What might get in the way of my plan (e.g., I have to take the children to school one day):

What I can do about it (e.g., I'll choose days when I don't take them to school):

How confident am I that I can reach this goal: *circle one*

0	1	2	3	4	5	6	7	8	9	10
Not at all		A little			Somewhat confident			Very sure		Totally confident

Follow-up plan (how and when):

SMART


Specific,
Measurable,
Achievable,
Realistic, and
Timed




2. Clinical Leadership

- ▶ Encourages supportive culture
- ▶ Recognizes that SMS is an essential part of care
- ▶ Understands SMS takes a team
- ▶ Opinion leader and can lead by example

Encourage all Providers to:

- ▶ Incorporate SM goal into every visit
 - ▶ Consider setting a visit agenda
 - ▶ Use MI techniques
 - ▶ Leverage the whole team
- 

Encourage all Staff to:

- ▶ Expect patients to engage
 - ▶ Be creative to meet heterogeneous needs of patients
 - ▶ Celebrate SMS successes!
- 



3. Provide Additional Support: SMS after the Visit


- ▶ High needs and complicated patients
- ▶ Progress check or coaching call
- ▶ Increasingly technology used: text, email, mApps
- ▶ Focus on removing barriers and improving SMS success
- ▶ Outreach, information, re-assess confidence



4. Look Beyond Assumptions


- ▶ Tendency to jump to conclusions
- ▶ Instead, view SM failure as a challenge:
 - Health literacy issue?
 - Undiagnosed mental health issue?
 - Cultural issues?
 - Other undisclosed barriers?
 - Goal too ambitious?
 - Ambivalence?
 - Prefer a more anonymous approach?

Tools to Uncover Challenges


- ▶ Newest Vital Sign
 - ▶ PHQ-9
 - ▶ Confidence Ruler
 - ▶ Direct but open-ended questions
 - ▶ Advanced MI skills
 - ▶ Explore alternatives: web sites, apps
- 



5. Partner Outside your Walls

- ▶ Community Organizations
 - ▶ Public Health
 - ▶ Schools
 - ▶ Workplace
 - ▶ Social Supports
 - ▶ Peer Supports
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Take Home Points

- ▶ Self-management is essential
 - ▶ Self-management requires change and patients need support to make changes
 - ▶ A step-wise, methodical approach can build on the SMS already in place
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Please contact me with
questions or to share your
success!

SMS Resources: Core Training

- ▶ Schaefer J, Miller D, Goldstein M, Simmons L. *Partnering in Self-Management Support: A Toolkit for Clinicians*. Cambridge, MA: Institute for Healthcare Improvement; 2009. Available at: www.IHI.org
- ▶ Physician Tip Sheet for Self-Management Support. Chicago, IL: American Medical Association; 2008. AMA.org
- ▶ Prochaska, JO; Norcross, JC; DiClemente, CC. *Changing for good: the revolutionary program that explains the six stages of change and teaches you how to free yourself from bad habits*. New York: W. Morrow; 1994. [ISBN 0688112633](https://www.amazon.com/ISBN-0688112633).

SMS Resources: Advanced Training

- ▶ Cole S. *Ultra-Brief Personal Action Planning*. Rochester, NY: Stony Brook University Medical Center; 2008.
- ▶ http://www.improvingchroniccare.org/index.php?p=Critical_Tools&s=162
- ▶ California HealthCare foundation Website:
<http://www.chcf.org/publications/2005/06/helping-patients-manage-their-chronic-conditions>
- ▶ Weiss, Barry D., Mays, Mary Z., Martz, William, Castro, Kelley Merriam, DeWalt, Darren A., Pignone, Michael P., Mockbee, Joy, Hale, Frank A.
Quick Assessment of Literacy in Primary Care: The Newest Vital Sign
Ann Fam Med 2005 3: 514-522

SMS Resources: Advanced Training

- ▶ *The Newest Vital Sign: A New Health Literacy Assessment Tool for Health Care Providers*
<http://www.pfizerhealthliteracy.com/physicians-providers/newest-vital-sign.html>
- ▶ *The Macarthur Initiative on Depression and Primary Care*
<http://www.depression-primarycare.org/clinicians/toolkits/materials/forms/phq9/>
- ▶ *Motivational Interviewing* <http://www.motivationalinterview.org/>
- ▶ *Motivational Interviewing in Health Care: Helping Patients Change Behavior* (Applications of Motivational Interviewing)
Stephen P Rollnick PhD, William R. Miller Phd, Christopher C. Butler MD, Guilford Press, New York, 2008.