Improving Quality and Increasing Affordability in Healthcare: The Role of Education in Securing Patient Engagement

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Introduction

Patient engagement is widely recognized as an important ingredient for increasing positive patient outcomes and improving healthcare quality in the United States. Yet many patients feel disengaged from their healthcare providers, and when patients are not active in their own care, the affordability and quality of healthcare suffer. At the same time, many healthcare providers lack time or are unclear about how to get patients involved in decisions about their care and do not have the incentives in place to involve patients in decisions about their care.

The field of education is uniquely positioned to lead efforts to improve patient engagement, especially when harnessed to health information technologies. Patients and clinicians increasingly rely on online resources and digital technology to acquire health-related information. Gaining health information is just the first step in facilitating engagement; the process is a multifactorial combination of education, tools, and support to facilitate better understanding and outcomes by patients. Patient and clinician education can build on this existing foundation to deliver timely information that enhances patient-provider communication and supports patients to take an active role in their health and health care.

Vignette 1

Tom is 67 and has hypertension. He is being treated with angiotensin-converting enzyme (ACE) inhibitors and a diuretic. He sometimes fails to take the diuretic during the day because the effects interfere with work. Because he is taking his medication at night, he is not sleeping well.

Physician: Come in, Tom. I haven’t seen you in a while. What’s going on?

Tom: Well, I’m not getting much sleep. I’m getting up a lot to go to the bathroom.

Physician: OK, I can see how that would affect your sleep (glances at notes). And I see that your blood pressure’s a bit high, certainly higher than the last time I saw you. And that was a while ago.

Tom: Well, life’s pretty busy.

Physician: Yes, but if you don’t come in, we can’t keep track of your blood pressure.

Tom: Says nothing!

Physician: [Writes in chart then looks up]: And are you taking your medications? Are these working out for you?

Tom: You know, I sometimes think they may be part of the problem. I try to take ‘em, but I miss some days. And I ran out of them about a week ago.

Physician: [Shakes his head]: Again, it’s really important to take your medication. Otherwise, you can’t control your blood pressure.

Tom: leaves the office feeling chastized with no real solution to his sleeping problems.

Reducing the amount of information patients correctly recall from clinic visits is staggeringly small. Memory research shows that patients immediately forget 40% to 80% of the medical information that healthcare providers give them during an office visit and incorrectly recall almost half of the information that they are able to remember.21

59% of all adults in the US use the Internet to search for health information.2

Practical solutions for enhancing patient engagement that acknowledge this time crunch are emerging. The Robert Wood Johnson Foundation has created a “flipped classroom” strategy that relieves pressure at the point of care by using technology to arm patients with information before the office visit and providing tools to manage their health after the visit.22

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Physician: OK, it sounds as though we need to find a way to make it easier for you to take your medications. The blood pressure medicine is supposed to be taken three times a day, but maybe that’s not practical for you. We could find a different medicine that you only have to take once a day. That would also help your sleep. What do you think?

Tom: Making it easier to take my medication is definitely good—I sure could use the sleep.

Physician: And if it’s easier for you to take your medication, that’s going to help control your blood pressure, too, Tom. I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too. Tom, I’m also going to give you a prescription to learn your blood pressure, too.

This vignette describes a patient encounter in which the provider is able to provide patients with information about how to get patients involved in decisions about their care and do not have the incentives in place to involve patients in decisions about their care.

Vignette 2

Before Tom visited his provider, he took an online educational quiz about living with hypertension. The activity generated a report that provided him with information about the benefits and side effects of antihypertensive medications, including diuretics, and listed some questions that Tom was able to ask his doctor at his next visit. Armed with these resources, Tom felt not only in more control of the clinical encounter, but also that he was more actively involved in making a decision about his treatment. And Tom’s provider was impressed that his patient was informed and willing to consider a change in medication.

Physician: I understand that you’re worried about losing sleep and having to visit the bathroom so often. What’s the most helpful thing I can do for you today?

Tom: I thought perhaps we could review my medications. I’m supposed to take the blood pressure med twice a day and the fluid pill at night, before bed. I researched this a little and it looks as though this might be messing up my sleep.

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Transforming Healthcare Quality Through Patient Engagement

Health Care in Crisis

It is no secret that the quality of healthcare in the United States is in crisis. When health care is evaluated on its ability to increase life expectancy and curb individual and national costs, the United States ranks 44th out of 51 nations for life expectancy, the cost of health care as a percentage of the gross domestic product, and total medical expenditure per person. In addition, multiple patient behavior studies affirm that approximately 50% of patients do not adhere to prescribed medications and 83% do not follow provider recommendations, thereby limiting the potential for reducing chronic diseases with a significant lifestyle component, such as diabetes. Beyond these statistics, it is an unrealistic expectation to curb cost and improve quality during the average brief 15-minute office visit.

In response to this crisis, patient groups, employers, health plan administrators, and government papers have all increasingly called for a system of care that is more responsive to patient needs, as well as for strategies to engage patients as decision makers in their health care. For instance, patient engagement—through shared decision making and acts of self-management—is widely recognized as an important ingredient for transforming health care. Indeed, the Patient Protection and Affordable Care Act (PPAC) has identified a larger role for patients in their own care as a cornerstone of successful healthcare reform by establishing the National Strategy for Quality Improvement in Health Care (NSQIS). The NSQIS emphasizes the principle of patient engagement and is a catalyst for improving population health, reducing the cost of patient care, and improving healthcare quality.

But what is patient engagement?

Defining Patient Engagement

Several leading healthcare quality improvement organizations such as the Commonwealth Fund, the Agency for Healthcare Research and Quality, and Planetree have developed definitions of patient engagement (also called patient activation). For instance, the Center for Advancing Health defines patient engagement as the [A]tions individuals must take to obtain the greatest benefit from the health care services available to them.”

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1. Have lower rates of hospitalizations, 30-day hospital readmission, and emergency department visits.

Better Clinical Outcomes

Compared with less-engaged patients, engaged patients are more likely to:

• Adhere to treatment and prevention plans
• Increase healthy behaviors and use of preventive care (eg, physical activity, smoking cessation, screenings, immunizations)
• Use health care appropriately (ie, not delay care)
• Effectively self-manage chronic conditions (eg, regular eye examinations, blood pressure measurements, and glucose monitoring)
• Recover more rapidly
• Experience fewer diagnostic tests and referrals

Ultimately, the goals of engagement—benefits of which are deep—are to improve patient outcomes and improve healthcare quality.

The Role of Education in Patient Engagement

Despite the proven benefits of patient engagement for improving both the affordability and quality of health care, many patients who want to be engaged in decisions about their health care may lack the resources or skills to do so. Additionally, many clinicians do not currently view their role as enabling patients to engage and are concerned about the additional time, costs, and potentially lower efficiency that patient engagement could require.

Patient-centered education can be a powerful tool to support patients in taking action about their health care. Specifically, education can equip patients to take small, manageable steps before, during, and after clinical encounters.16,17 Provide strategies that motivate patients to ask questions, know their medications and medical history, bring friends or relatives to appointments, or learn about care that may be unnecessary.18

Education can also help providers develop communication skills known to improve patient satisfaction, encourage adherence, reduce medication errors, and improve outcomes, as well as teach them how to use technology more effectively to foster engagement.19

For both patients and healthcare providers, online resources and digital technologies offer a platform for educational activities and resources that can help build patient engagement.

Online Resources and Digital Technologies: The Foundation for Patient Engagement

Although there is a lot of pressure in a typical office visit for clinicians to gather and document patient information and for patients to ask their questions and ask questions, there is rarely enough time to do so. Indeed, patients in the United States spend on average less than 1 hour per year in face-to-face clinical encounters with healthcare providers.
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Take patient engagement to the population level. To learn more, visit www.medscape.org/vision or contact Chris Hoffman at choffman@medscape.net.

This time deficit undermines the potential for engagement, in no small measure because the amount of information patients comely recall from clinic visits is staggering. Memory research shows that patients immediately forget 40% to 80% of the medical information that healthcare providers give them during an office visit and incorrectly recall almost half of the information that they are able to remember. Practical solutions for enhancing patient engagement that acknowledge this time crunch are emerging. The Robert Wood Johnson Foundation has created a “flipped classroom” strategy that reverses pressure at the point of care by using technology to arm patients with information before the office visit and providing tools to manage their health after the visit. Solutions like this are possible because both patients and clinicians are already using online resources and digital technologies to seek out health-related information and engage with one another.

Before 12 months prior to the survey, 59% of US adults used the Internet to search for health information. Solutions like this are possible because both patients and clinicians are already using online resources and digital technologies to seek out health-related information and engage with one another. The Pew Research Center recently reported that in the United States, many healthcare providers lack time or are unclear about how to get patients involved in decisions about their care and do not have the incentives in place to involve patients in decisions about their care. The field of education is uniquely positioned to lead efforts to improve patient engagement, especially when harnessed to health information technologies. Patients and clinicians increasingly rely on online resources and digital technology to acquire health-related information. Gaining health information is just the first step in facilitating engagement; the process is a multifaceted combination of education, tools, and support to facilitate better understanding and outcomes by patients. Patient and clinician education can be built on this existing foundation to deliver timely information that enhances patient-provider communication and supports patients to take an active role in their health and health care.