

# Partnering to Achieve Adherence

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Write your name

I must start writing with my opposite  
hand today.

Ann

I must start writing with  
my opposite hand today.

# Review of Behavior Change

- Stages of Change
    - Prochaska and Diclemente
  - Sometimes experience predicts success
    - “I have failed before”, “I am afraid”, “I want it *FAST!*”
  - Social support is KEY
    - Family, friends
  - Go slow for lasting results (counterintuitive)
    - Baby steps, one change begets another, analysis paralysis
- 

# Review of Behavior Change

- Patients are THE key stakeholders in their own care
  - Patients must buy-in and be in control of the process of behavior change.
- Patient empowerment can be a ‘value added’ solution
  - People must learn to care for themselves as funding shortages occur (KY=\$500M, Medicaid)
- Power of the pill over behavior change
  - Pills are ‘easier’ than changing behavior

If changing WAS easy.....

- Phill's Morris....

**Closed!!!**

- Budweiser..... **out of business !**

- McDonald's.... **marginal profits!**

- **NOT ENOUGH TO GO AROUND!**

- **Shortages in every state**

# What kinds of things do THEY need to change?

- Exercise more
- Pay attention to your diet
- Stop smoking
- No more beer drinking with your friends.
- Quit stressing out
- Get to the doctor when you are supposed to
- Take this new pill
- Give yourself a shot
- [Check your blood sugar](#)
- Eat less fast food
- Write down your numbers
- Turn off the TV
- Read these instructions...written at 12<sup>th</sup> grade
- Park farther away from the store door
- Use the stairs
- Stop frying food
- Don't use bacon grease to cook your beans
- No MORE biscuits and gravy
- Stop drinking sweet tea
- No more Mountain Dew
- Drink only DIET drinks
- Count your carbs
- Divide by 15....Math? crap, I am so bad at math!!
- Help me.....
- I can't do this
- Why even try??
- I wish things could just be normal again
- My family will NEVER eat this stuff

# Why DON'T people change?

- Knowledge?
- Time?
- Money?
- Truly caring for themselves?
- Past experiences?

# Tools

- There's an app for that!
- Online tools and support ([Quitnet.com](http://Quitnet.com))
  - Chat rooms, blogs, social networking
  - Some cost, some free
- [Behavior change contracts](#)
- Canned programs (Weight Watchers, Cooper-Clayton, Jenny Craig, etc.)
- [O.A.](#)

# So.....how do we start to solve it?

- Answer 1: Docs
- Answer 2: NPs, PAs
- Answer 3: RNs, LPNs
- Answer 4: CDEs
- Answer 5: Other???

- **“Under the Affordable Care Act**, you and your family may be eligible for some important preventive services—which can help you avoid illness and improve your health—at no additional cost to you.
- **What This Means for You:**
- If your plan is subject to these new requirements, you would not have to pay a copayment, co-insurance, or any deductible to receive preventive health services, such as recommended screenings, vaccinations, and counseling.
- For example, depending on your age, you may have free access to such preventive services as: Blood pressure, diabetes, and cholesterol tests; many cancer screenings, including mammograms and colonoscopies;
- **Counseling from your health care provider on such topics as quitting smoking, losing weight, eating healthfully, treating depression, and reducing alcohol use;”**

Source:

<http://www.healthcare.gov/law/provisions/preventive/index.html>

# So.....how do we start to solve it?

- PRIMARY PREVENTION (PP) is the answer
- PP takes LOTS of time and follow up
- PP takes space, supplies and know-how
- PP takes money (in the form of billable services)
- But WHO (you might be asking yourself) can provide this primary prevention??

# Introducing.....

- Certified Health Education Specialist
  - Must have at least a baccalaureate degree
  - A degree in Health Education, Health Promotion, Public Health, etc.
  - Must have 25 hours in health education
    - Content AND process courses
- Sit for and pass a national credentialing exam

Source: [www.nchec.org](http://www.nchec.org)

# Specializing in 7 areas

- **Assess** individual and community needs for health education
- **Plan** health education interventions and programs
- **Implement** interventions and programs
- Conduct **evaluation** and research related to health education
- **Administer** health education strategies, interventions, and programs
- Serve as a **resource** person
- **Communicate** and **advocate** in matters of health and health education

# In a nutshell

- Good news....this may be a billable service!
- Hire a health educator for providing primary prevention. Let the people who know secondary prevention do 'their thing'!
- You must involve patients in their own behavior change. ASK THEM what they *can* do!
- Involving patients takes time
- Behavior change takes time...one thing at a time
- Starting is the key...change begets change.
- Find the full presentation at <http://www.scribd.com/doc/38144297/PACE-Ohio-Web-Version>