

PROVIDER TIPS FOR ENHANCED PATIENT COMMUNICATION

Communication barriers often exist between provider and patient

- Patients retain about 50% of information by health care providers, and approximately 50% of those who do remember the information accurately.¹
- Sometimes patients are unaware that they do not understand what is being taught to them.
 - In a study of patients who sought care in the ED, about 20% of patients self-reported comprehension difficulties, but 78% demonstrated a comprehension deficiency in at least one area of their visit as assessed by the provider.²
- Here are some suggested provider tips and techniques taken from the literature to use when educating patients on diabetic retinopathy, annual vision screenings, and beyond

Provider language is key

- Use presumptive language rather than suggestive language regarding the requirement for annual dilated vision screenings. In a study looking at vaccine hesitancy, providers who used presumptive language (“We have to do some shots”) rather than suggestive (“What are you planning to do about vaccines”) were 17.5 times more successful at having parents agree to vaccines.³
- Minimize medical jargon – remember that patients come from all different educational/ cultural backgrounds. Explain concepts in layman’s terms
- Ask for patient feedback/questions throughout. Be conscious of how you phrase concepts to allow for open communication:
 - For example, instead of saying “What questions do you have for me?” you can use “Are there any questions I can answer for you?”
 - Although the wording is slightly different, it shifts responsibility from the patient to provider

Utilize the Teach-Back Method

- One way to assess patient understanding is by asking them to “teach-back” what was discussed
- This allows the provider to see where lapses in understanding exist that warrant further explanation
- Potential prompts:
 - “Tell me in your own words what your understanding of diabetic retinopathy is”
 - “To make sure we are on the same page, can you tell me what the next steps are to check your eyes for diabetic retinopathy?”
 - “I understand that I might have given you a lot of information and want to make sure I explained everything clearly. Would you mind walking me through what we talked about today?”
- AVOID asking patient questions that require only a yes/ no answer
 - “Do you understand?” “Do you have any questions?” “Are we clear on the next steps?”

Verbal & Written Information

- Studies have found that compared to verbal information alone, patient’s retain information (and appreciate) verbal + written material better
- Providers can include printouts on diabetic retinopathy/ annual vision screenings (such as the one available in the toolkit)

Aim to E.D.U.C.A.T.E

- **E**nhance comprehension and retention
- **D**eliver patient-centered education
- **U**nderstand the learner and what they already know
- **C**ommunicate clearly/ effectively
- **A**ddress health literacy and cultural competence (written and visual materials)
- **T**eaching and **E**ducation goals for the provider should be planned out in advance

**Further tips to enhance each of the components of this acronym can be found here⁴:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4346059/pdf/rhpb-2-482.pdf>

References

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2. Engel, K. G., Heisler, M., Smith, D. M., Robinson, C. H., Forman, J. H., & Ubel, P. A. (2009). Patient comprehension of emergency department care and instructions: Are patients aware of when they do not understand? *Annals of Emergency Medicine*, 53(4), 454–461.
3. Marcus C. Strategies for improving the quality of verbal patient and family education: a review of the literature and creation of the EDUCATE model. *Health Psychol Behav Med*. 2014 Jan 1;2(1):482-495. doi: 10.1080/21642850.2014.900450. Epub 2014 Apr 28.
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