



Teach-back

AHRQ

Guide to Improving Patient Safety in
Primary Care Settings by Engaging
Patients and Families



Agency for Healthcare Research and Quality
Advancing Excellence in Health Care • www.ahrq.gov

Speaker



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No financial conflicts of interest
to disclose.

Objectives

- Review patient safety issues in primary care settings and interventions to engage patients and families to improve safety
- Describe the role and value of the Teach-back strategy in improving patient safety
- Identify strategies for implementing the Teach-back strategy in primary care settings

Guide – Project Goals



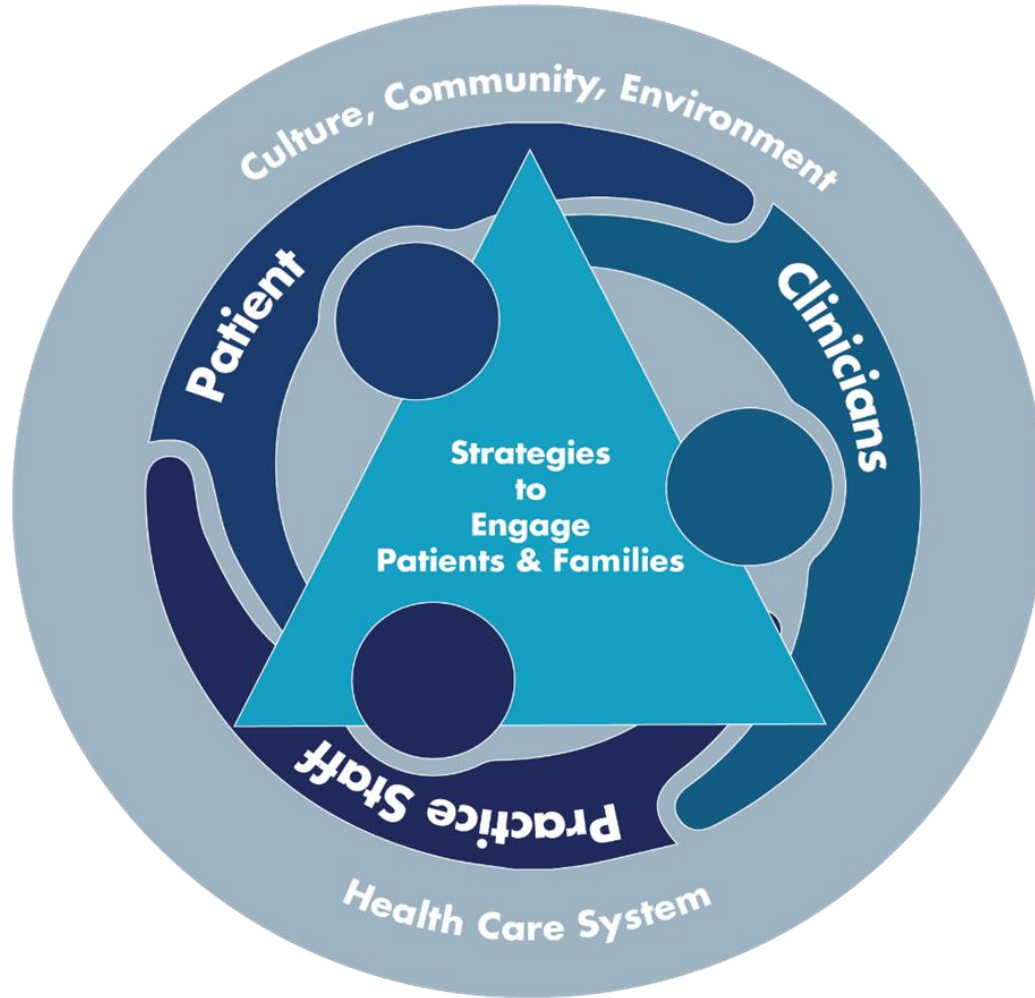
- Meaningful engagement with patients and families in ways that impact safety, not just quality
- Based on evidence
- Tools that are easy to use
- Tools for practices who have not done much in this area

Key Project Deliverables

- Environmental Scan
- Four Case Studies of Exemplar Practices
- Four Interventions to Improve Safety by PFE
- Final Guide



Patient & Family Engagement in Primary Care



Patient Safety in Primary Care

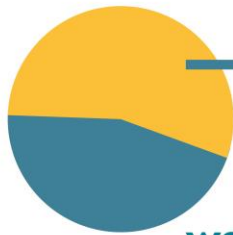
Did you know... Patient safety issues in primary care are real.

Annually,

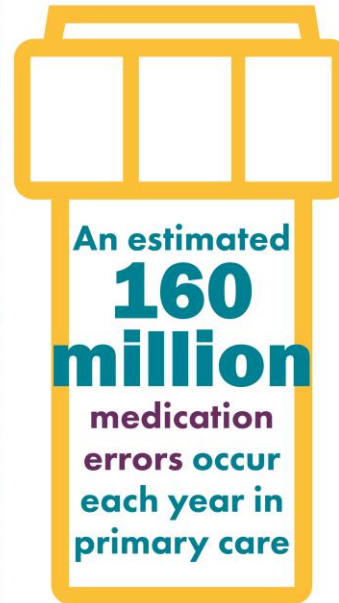
1 in 20



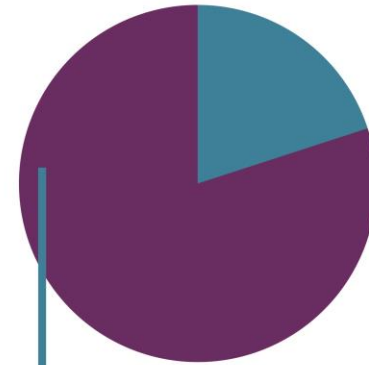
outpatients experiences a diagnostic error



55%
of patients said
diagnostic errors
were a chief concern
in outpatient visits



An estimated
160 million
medication
errors occur
each year in
primary care



up to
80%
of information shared
in a primary care visit is
immediately forgotten
by patients

1 in 9

ED admissions
are related to an
adverse drug event



Four Interventions

- Be Prepared to be Engaged
- Create a Safe Medicine List Together
- **Teach-Back**
- Warm Handoff Plus



Be Prepared To Be Engaged

- Facilitates visit agenda setting for patients and clinicians.
- Improves visit efficiency and safety and promotes effective communication.



Create a Safe Medicine List Together

- Creates a complete and accurate medicine list, which is the first line of defense against medication errors.
- Leads to improved patient outcomes, adherence, and safety.



Teach-Back

- Improves communication and health literacy.
- Ensures the effective transfer of information shared with patients.



Warm Handoff Plus

- Promotes collaborative communication, engaging the patient as part of the team.
- Supports handoff within the practice to reduce communication drops during transitions.

What is Teach-Back?

“I want to make sure we are on the same page. Can you tell me...”

“Can you show me how you would use your inhaler at home?”

“I want to make sure I explained things clearly. Can you explain to me...”

Why is it important?



Up to **80%**

A 3D pie chart with a blue base and a yellow slice representing 20%. The text is overlaid on the blue portion.

of information shared in a primary care visit is *immediately forgotten* by patients



50/50

A 3D pie chart split vertically into a blue left half and a yellow right half.

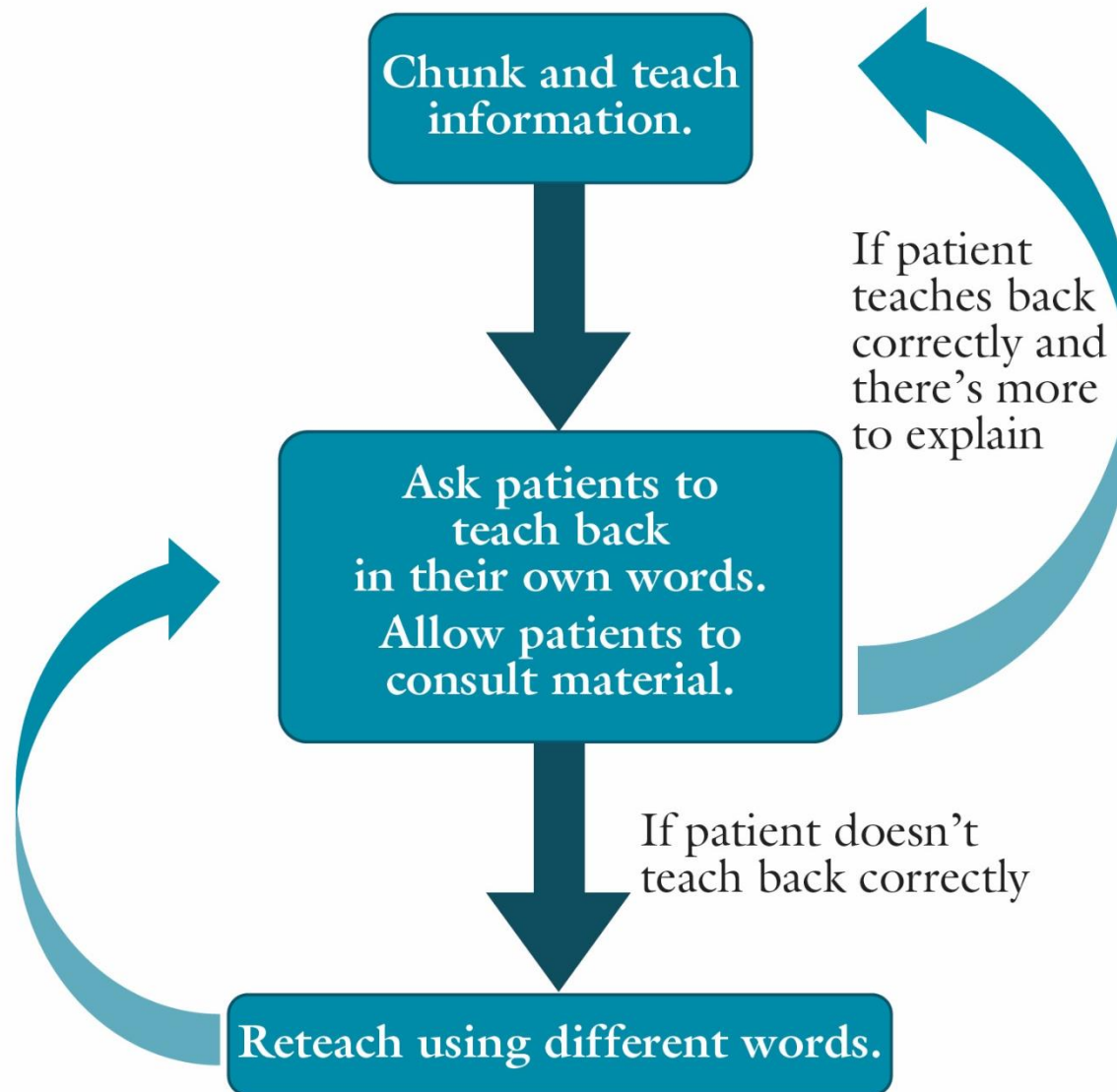
chance

that what is remembered is correct

How can it help me?

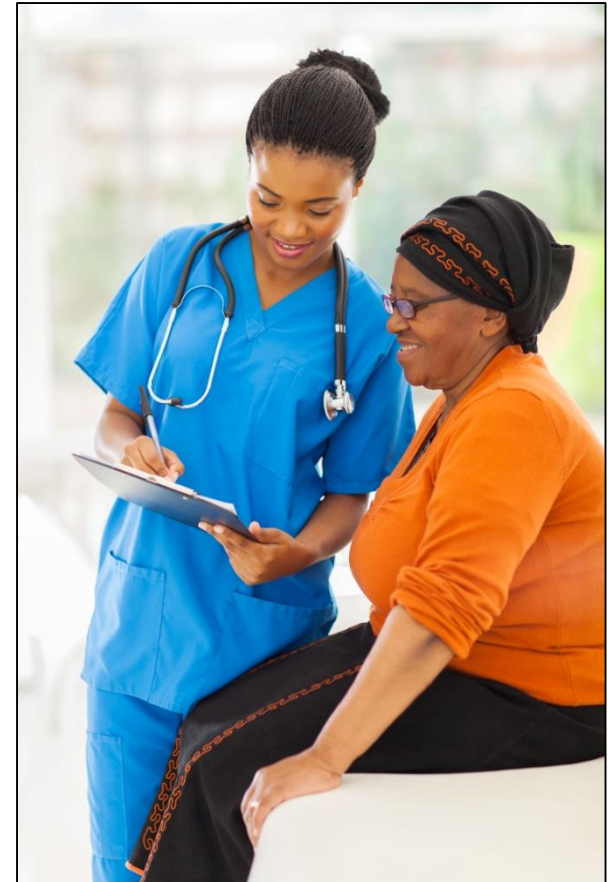
- Confirm that your patients have a **clear understanding** of what you have told them.
- Prevent misunderstandings that would affect **treatment adherence**.
- **Minimize** post-visit clarifying phone calls and emails.

How do I use it?



When should I use it?

- A new diagnosis
- Medication need and proper use
- Home care instructions
- Recommended behavior changes
- Treatment options
- Treatment plan
- Use of a new device
- Next steps



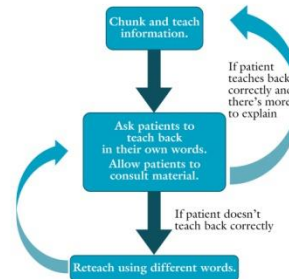
What tools are available?



Teach-Back Tips

All patients can benefit from teach-back.

- Ask patients to teach information back to you in their own words, not just repeat your words.
- Use plain language (blood thinner for anticoagulant, heart doctor for cardiologist).
- Rephrase your message until the patient understands.



Examples of Teach-Back Starters

- “I want to make sure we are on the same page. Can you tell me...?”
- “I want to make sure that I explained things clearly. Can you explain...?”
- “Can you show me how you would use your inhaler at home?”



Teach-back

Role Play Scenario 1

Facilitator Instructions

1. As facilitator, play the role of the patient.
2. Request a volunteer to play the role of the clinician. The clinician will engage in Teach-back with the patient.
3. Provide the volunteer and the training group with information about the scenario. Page 2 contains the basic patient information.
4. Read silently the additional patient information (page 3) to be able to respond to the volunteer during the role play.
5. Role play the scenario with the volunteer. Assume that the clinician has told the patient the plan of care and the visit is now ending. Ask the volunteer to engage in Teach-back to ensure the patient understands.
6. As the patient, react to the clinician's tone, message, and body language in the same way you might if you were the patient.
7. Using the discussion prompts (page 3), engage the training group in a learning discussion on what went well and what could be improved.


Role Play Scenario

- Mr. Thomas – 78-year-old male with uncontrolled hypertension and knee pain
- Visiting for knee pain, which is keeping him from exercising
- Takes hydrochlorothiazide, atorvastatin, and low-dose adult aspirin
- Not taking hydrochlorothiazide as prescribed because it makes him pee a lot
- Positive PHQ 9 depression screening
- Plan of care for Mr. Thomas:
 - Stop the hydrochlorothiazide and start metoprolol (50 mg PO QD).
 - Start fluoxetine (20 mg PO QD).
 - Follow up with an orthopedist for a possible knee replacement.
 - Continue atorvastatin (20 mg PO QD).
 - Continue low-dose adult aspirin (81 mg PO QD).




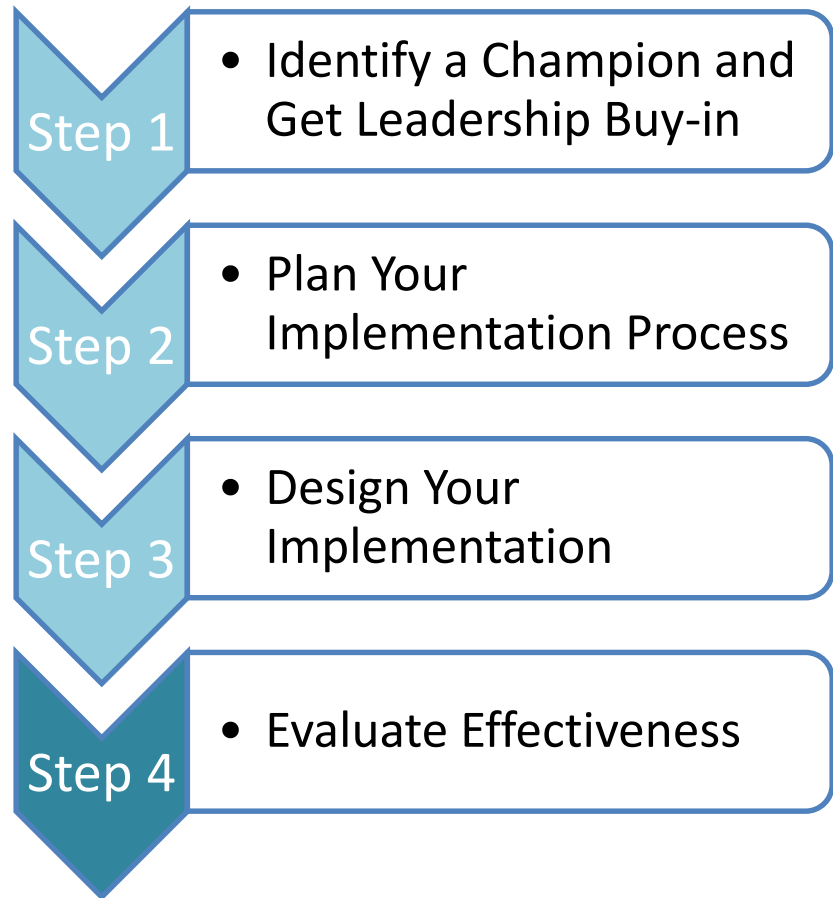
Getting Started with Teach-back

Implementation Quick Start Guide
Teach-Back



- 1—Review intervention and training materials**
 - Understand the purpose, use, and benefits of teach-back.
 - Review the training toolkit.
 - Complete the interactive learning module.
- 2—Make decisions for your implementation**
 - Set scope**
 - Who will use teach-back?
 - If you're not ready to use teach-back with all patients, who will your initial focus be? Patients with new medications? Patients with necessary followup? Patients with certain diagnoses, such as asthma or diabetes?
 - Establish workflow**
 - Where will you document teach-back in the EHR?
 - Identify champions**
 - Who will champion the strategy within each role on the team?
- 3—Customize training for your practice**
 - Customize the training materials to reflect your decisions.
 - Select and/or customize role play scenarios.
- 4—Train team members**
 - Use staff meetings and huddles.
 - Strive for training meetings of at least 15 minutes.
 - Encourage the review of the interactive learning module.
 - Conduct role play sessions.
- 5—Go live with implementation**
 - Inform staff of timeline.
 - Go live.
 - Identify good implementors and use them as peer coaches.
 - Continue to promote teach-back and encourage its use.

 The Guide to Improving Patient Safety in Primary Care Settings by Engaging Patients and Families



Step 1. Identify a Champion and Get Leadership Buy-in



- Identify a Teach-back practice champion
- Obtain leadership buy-in and support


Step 2. Plan Your Implementation Process

- Identify your team
- Set a reasonable timeline
- Determine a standardized implementation process




Step 3. Design Your Implementation

Implementation Quick Start Guide
Teach-Back



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 The Guide to Improving Patient Safety in Primary Care Settings by Engaging Patients and Families

- Use the Implementation Quick Start Guide
- Make implementation decisions
- Train team members

Step 4. Evaluate Effectiveness

- Recognize your team's efforts and successes
- Establish evaluation measures
- Monitor the impact on patient safety and patient engagement activities

How can we evaluate it?

- Number of follow-up questions
- Satisfaction
- Quality outcome measure
- Reported use
 - By clinicians
 - From patients

Get Started Today!

- Visit the AHRQ Website
- <http://bit.ly/PrimaryCareGuide>



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QUESTIONS?



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