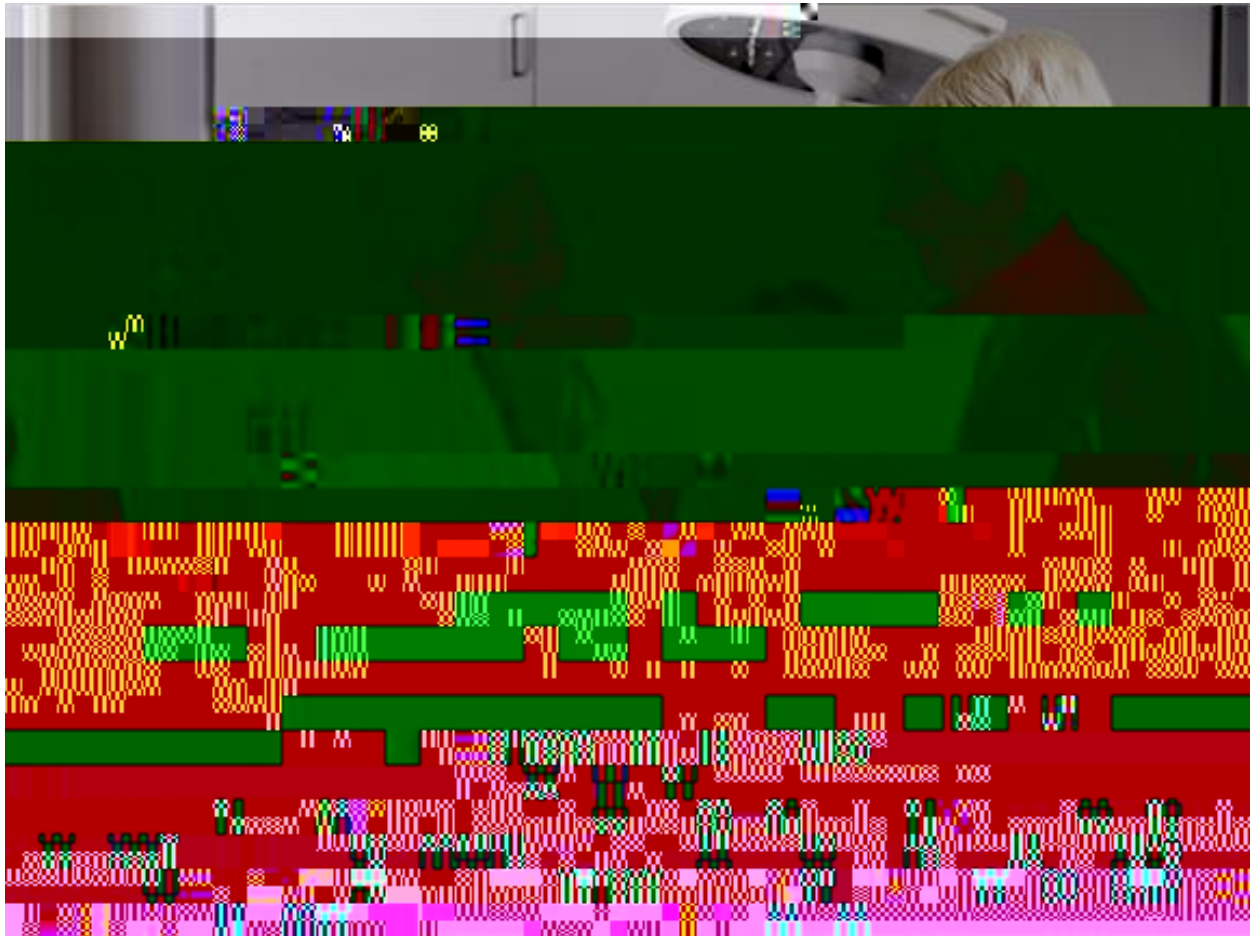


Teach-back

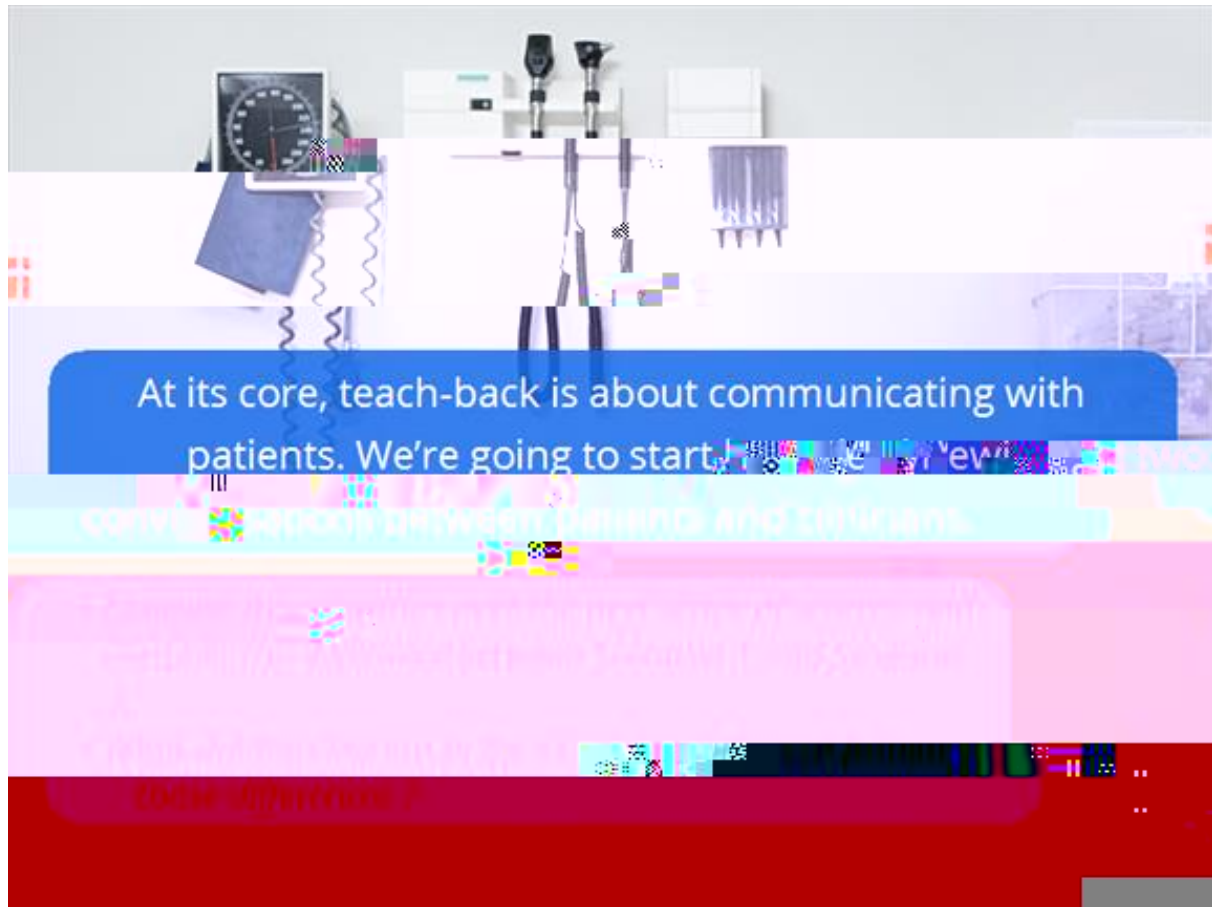
1.1 Title



Teach-Back

Improving Patient Safety by Engaging Patients and Families in Effective Clinician-Patient Communication

1.3 Introduction



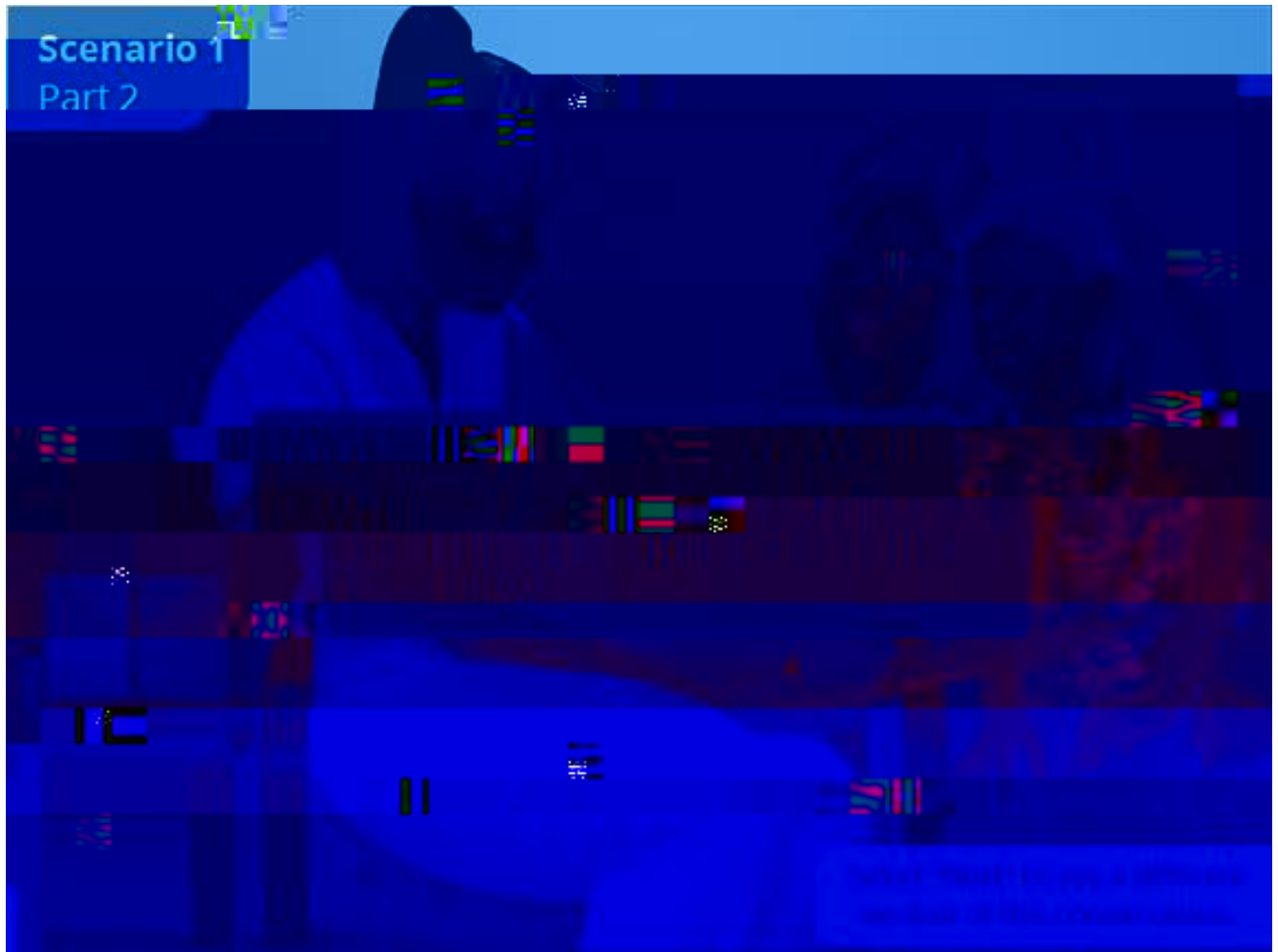
At its core, teach-back is about communicating with patients. We're going to start by reviewing two conversations between patients and clinicians.

Examine the scenarios over the next series of screens and consider the difference between Scenario 1 and Scenario 2.

What did the clinician in the scenarios do to produce those differences?

1.4 Scenario 1, Part 1

1.5 Scenario 1, Part 2



Scenario 1, Part 2

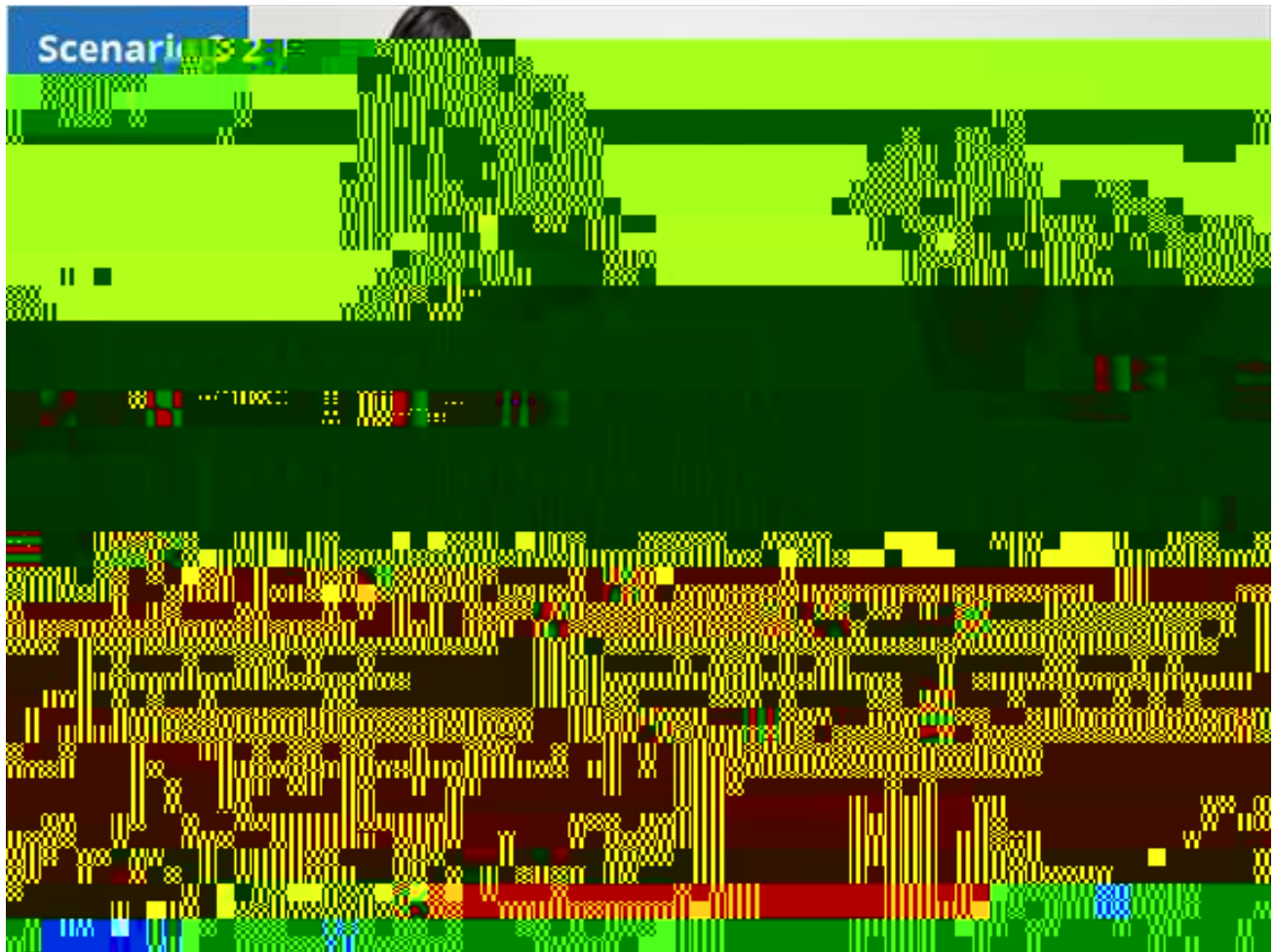
"If Anna develops a rash or does not feel better, please give our office a call. We want to make **sure** that she gets better soon. Okay?"

[• D } š Z Œ

"Okay."

[SELECT NEXT TO SEE A DIFFERENT VERSION OF THIS CONVERSATION](#)

1.6 ScenaTio 2, PaTt 1



ScenaTio 2, PaTt 1

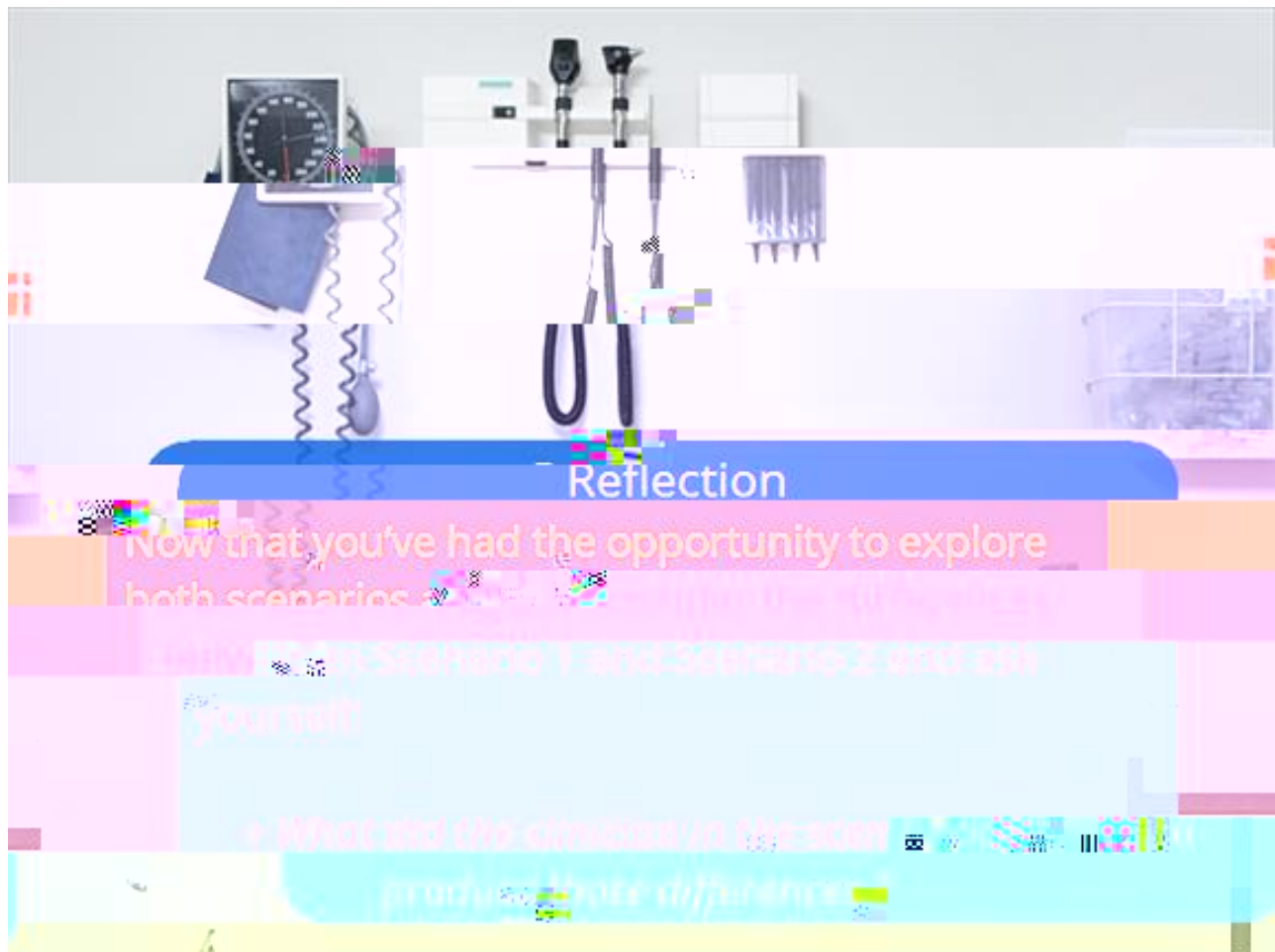
"I am prescribing an antibiotic called amoxicillin for Anna's ear infection. It needs to be given 3 times a day- at breakfast, lunch and dinner. Most children like the taste of this antibiotic, which is important because Anna will need to take this medication for 10 days. I want to make sure I am being clear and to answer any questions you may have. In your own words, can you tell me what you need to do at home for Anna's ear infection?"

[• D } š Z Œ

"You want me to give antibiotics to Anna at every meal for 10 days. But Anna is at school during the day, and they don't like to give medications. Does she have to take it at lunch time?"

[SELECT NEXT TO SEE THE SECOND PART OF THE CONVERSATION](#)

1.8 Scenario 1 Reflection



Now that you've had the opportunity to explore both scenarios again, consider the differences

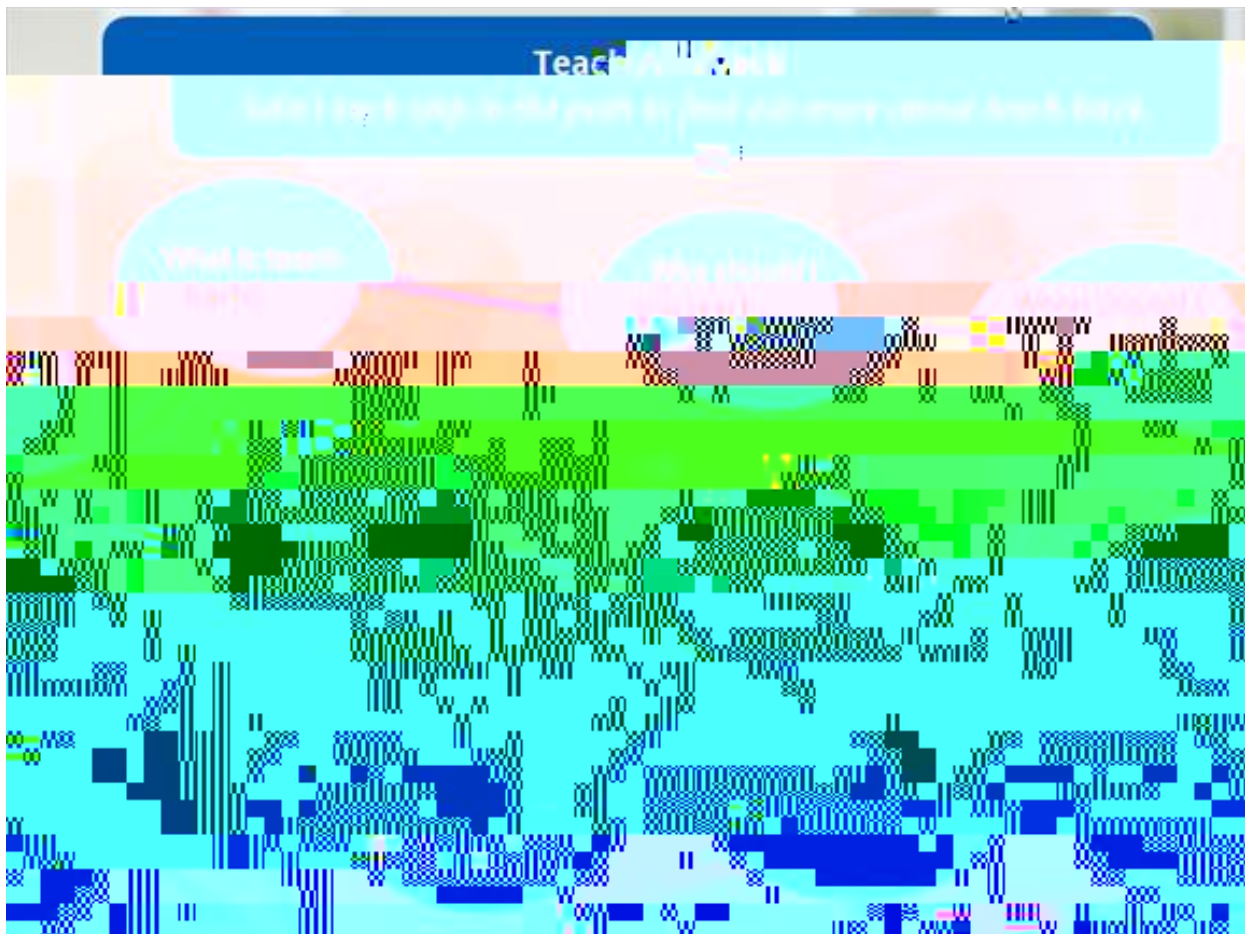
1.9 Learning Objectives



By the end of this lesson you should be able to:

- Understand and describe the steps of the teach back process.
- Describe the role and value of teach back in improving patient safety.
- Identify strategies for implementing the teach back process.

1.10 Pathway Menu



TeachBack

Select each step in the path to find out more about teachback.

What is teachback?

Why should I use teachback?

When should I use teachback?

How is teachback different?

What are some teachback examples?

How can I make teachback successful?

Which patients benefit from teachback?

Are there other considerations?

Are there other important tips?

1.11 What is teach-back?



What is teachback?

A method of ensuring that patients understand what you've told them.

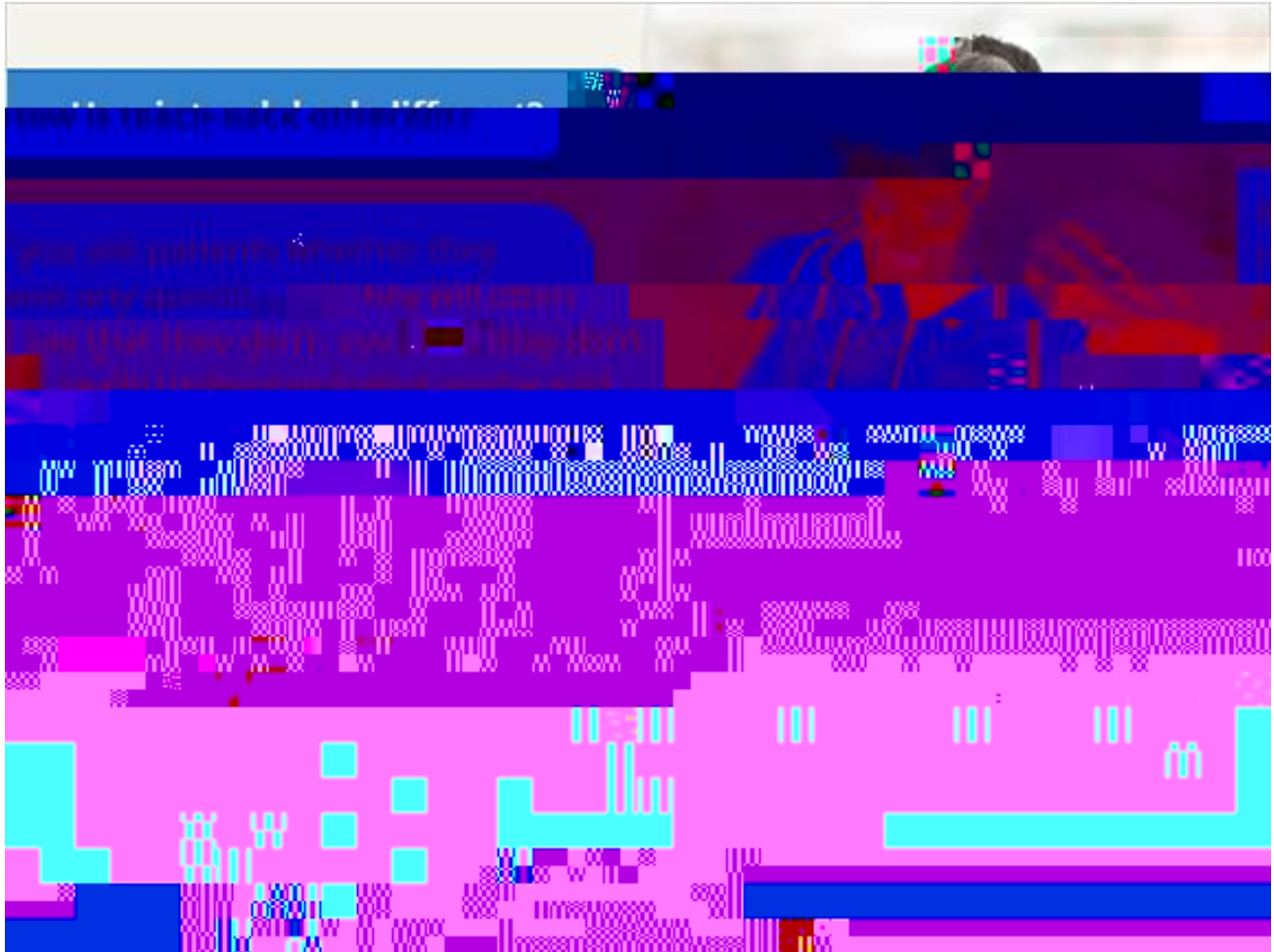
During **teachback**, you ask patients to explain in **their** own words what they need to know or do to take care of their health. You ask them to **teach back** to you what you have told them.

[BACK TO PATHWAY MENU](#)

1.12 Why should I use teach-back?



1.14 How is teach-back different?



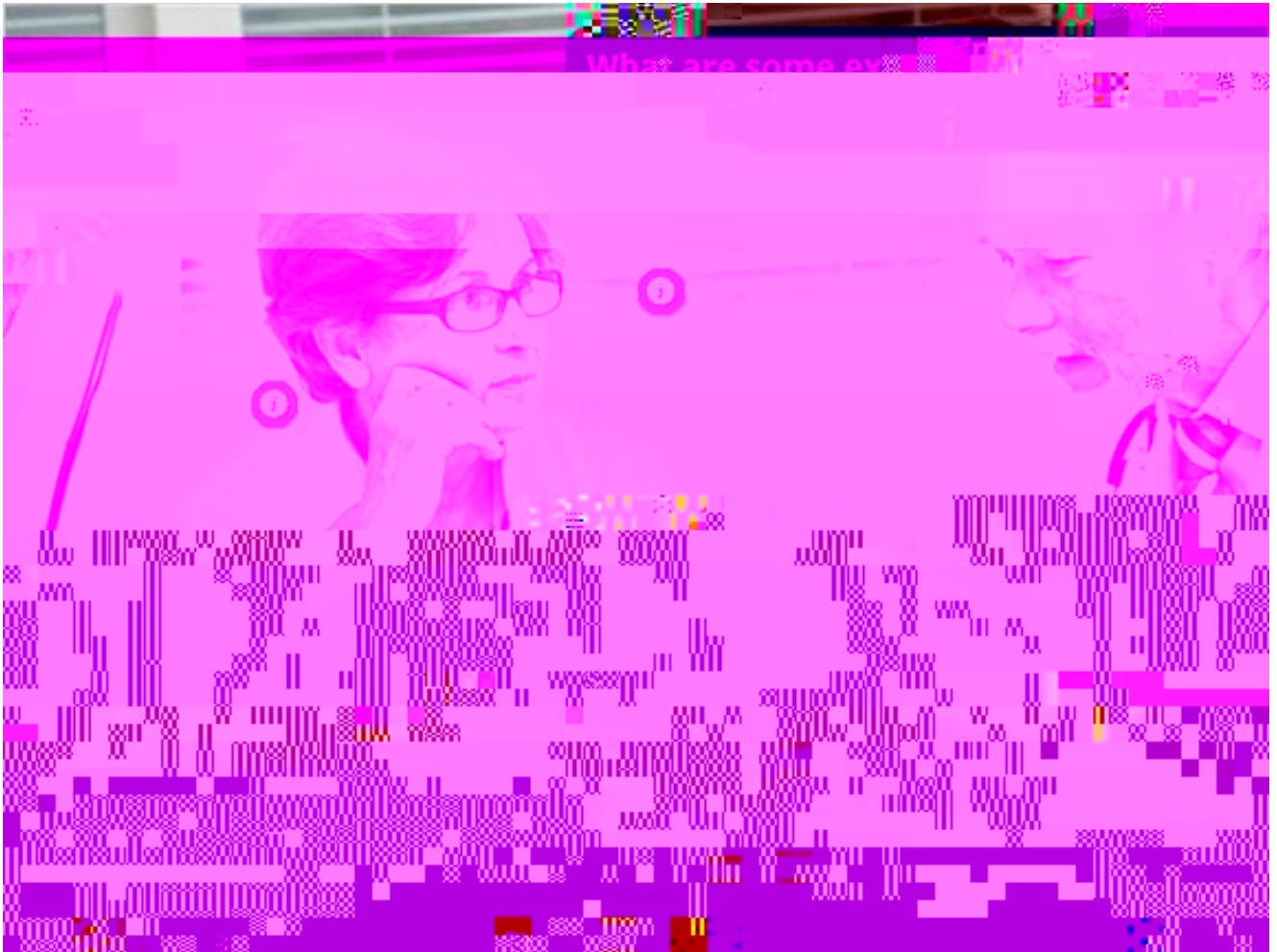
How is teachback different?

If you ask patients whether they have any questions, they will often say they don't, **even if they** don't really understand what you've told them. They may be embarrassed or intimidated, or they may think they understand.

Using **teachback** helps you more accurately determine your patient's level of understanding so you can adapt your communication as needed.

B

1.15 What are some examples of teach-back?



What are some examples of teach-back? (hover over icons below for examples)

↑ Just to be safe, I want to make sure we are on the same page. Can you tell me...

↑ Your inhaler is important for your health. Can you show me how you would use it at home?"

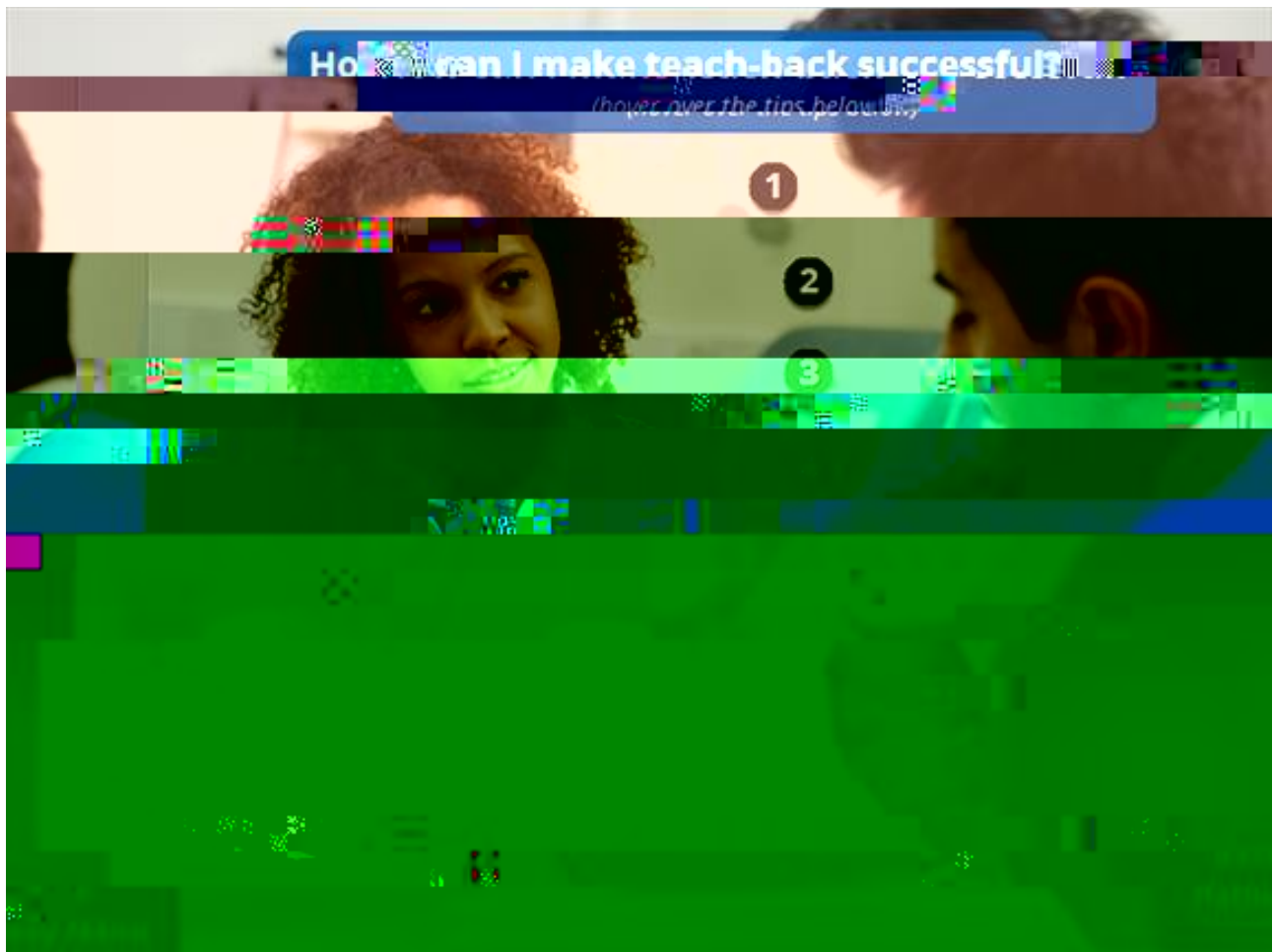
↑ I want to make sure that I explained things clearly. Can you explain to me..."

↑ : "We have discussed some important information about your medication. As a safety check, can you tell me warning signs to look for with this medication?"

There are many ways to approach teach-back with your patients and their families

[BACK TO PATHWAY MENU](#)

1.16 How can I make teach-back successful?

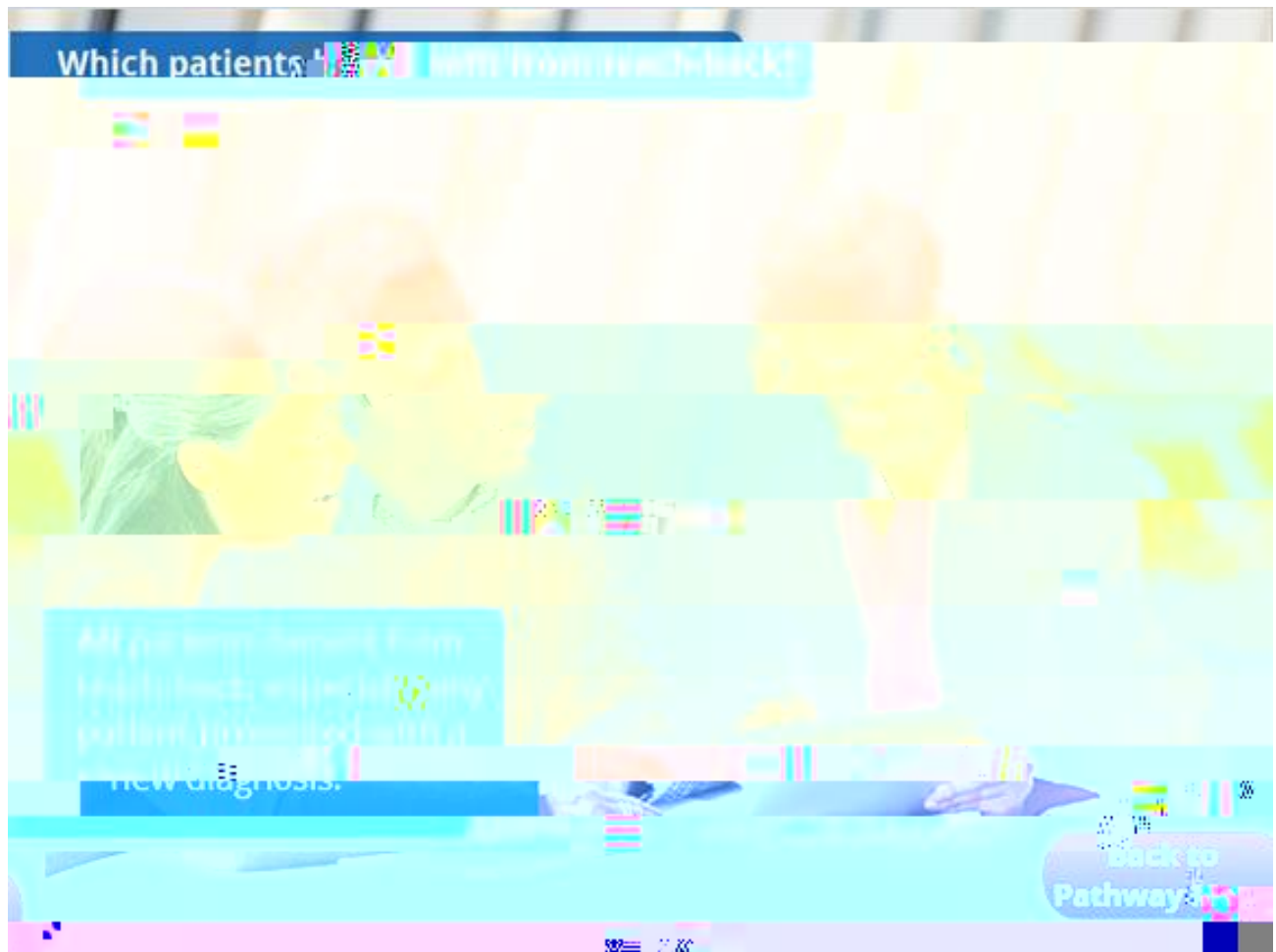


How can I make teach-back successful?
(hover over the tips below)

Use teach

:

1.17 Which patients benefit from teach-back?



Which patients benefit from teach-back?

All patients benefit from teach-back, especially any patient presented with a new diagnosis.

[BACK TO PATHWAY MENU](#)

1.18 Are there other considerations when using teach-back?

Are there other considerations when using teach-back?
(click the buttons below for examples)

Information processing speed declines with age

Limit the amount of new information delivered during each visit.

Slow down the rate of delivery

Children

When using teach-back with children, consider the following:

The conversation with the child should be age and developmentally appropriate.

Both the patient and the caregiver should understand the information being shared.

Visual aids can support communication of new diagnoses and new therapies (such as the use of an inhaler).

Language Diversity

When using teach-back with patients who speak a different first language, consider the following:

Medical translation services are beneficial if available.

Both verbal and nonverbal cues can help with communication.

Visual aids can support communication.

[BACK TO PATHWAY MENU](#)

1.19 What are other important tips for teach-back?



What are other important tips for teach-back? (hover over icons below for examples)

It is important to be approachable, making your patient and his or her family members feel confident when engaging in teach-back.

Emphasize to your patient and his or her family that teach-back is a part of a safety check to ensure that you are communicating clearly.

Do not appear rushed. It is important for your patient and his or her family to understand your instructions clearly so that they can adhere and be safe.

: Remove physical barriers between you and the patient (e.g., desk, computer, crossed arms), and position yourself at your patient's eye level.

:

1.20 Scenario 2 Review, Part 1



Scenario 2 Review

(hover over the blue text to identify key teachback strategies in use)

"I am prescribing an antibiotic called amoxicillin for Anna's ear infection. It needs to be given 3 times a day- at breakfast, lunch and dinner. Most children like the taste of this antibiotic, which is important because Anna will need to take this medication for 10 days. I want to make sure I am being clear and to answer any questions you may have in your own words, can you tell me what you need to do at home for Anna's ear infection?"

Starts with most important message.

Gives an additional point.

Gives a third key point.

Explains that she is trying to make sure her message is clear so the patient doesn't feel quizzed.

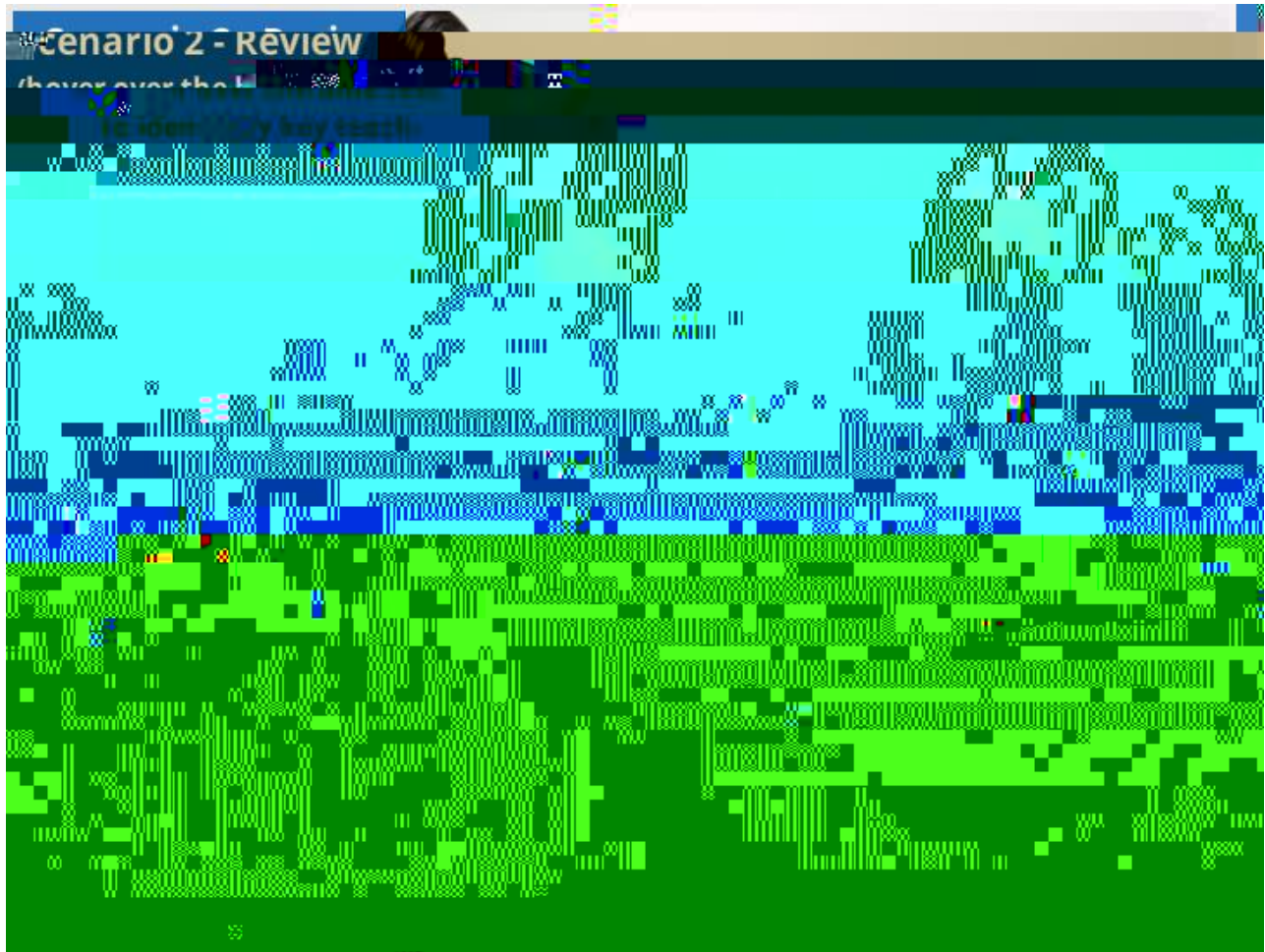
Engages the family/patient.

Uses an effective teachback phrase to ensure the message was clearly understood.

[• D } š Z Œ

"You want me to give antibiotics 52>-2<0044>2f1>BDC q 0 0 612 792 re W* n BT 0.129 0.345 0.408

1.21 Scenario 2 Review, Part 2



Scenario 2 Review

(hover over the blue text to identify key teachback strategies in use)

"I'm glad you told me that. I can adjust the dose so that Anna only takes the antibiotic at breakfast and dinner. Now if Anna develops red spots on her body, continues to have a fever, or is not acting like herself please call me. Even if you are not certain if you should call, call me any time. As a final safety check when is it important for you to call me?"

The clinician is able to adapt her recommendation to better suit the patient's needs and constraints.

Gives a key point.

Uses an effective teachback phrase.

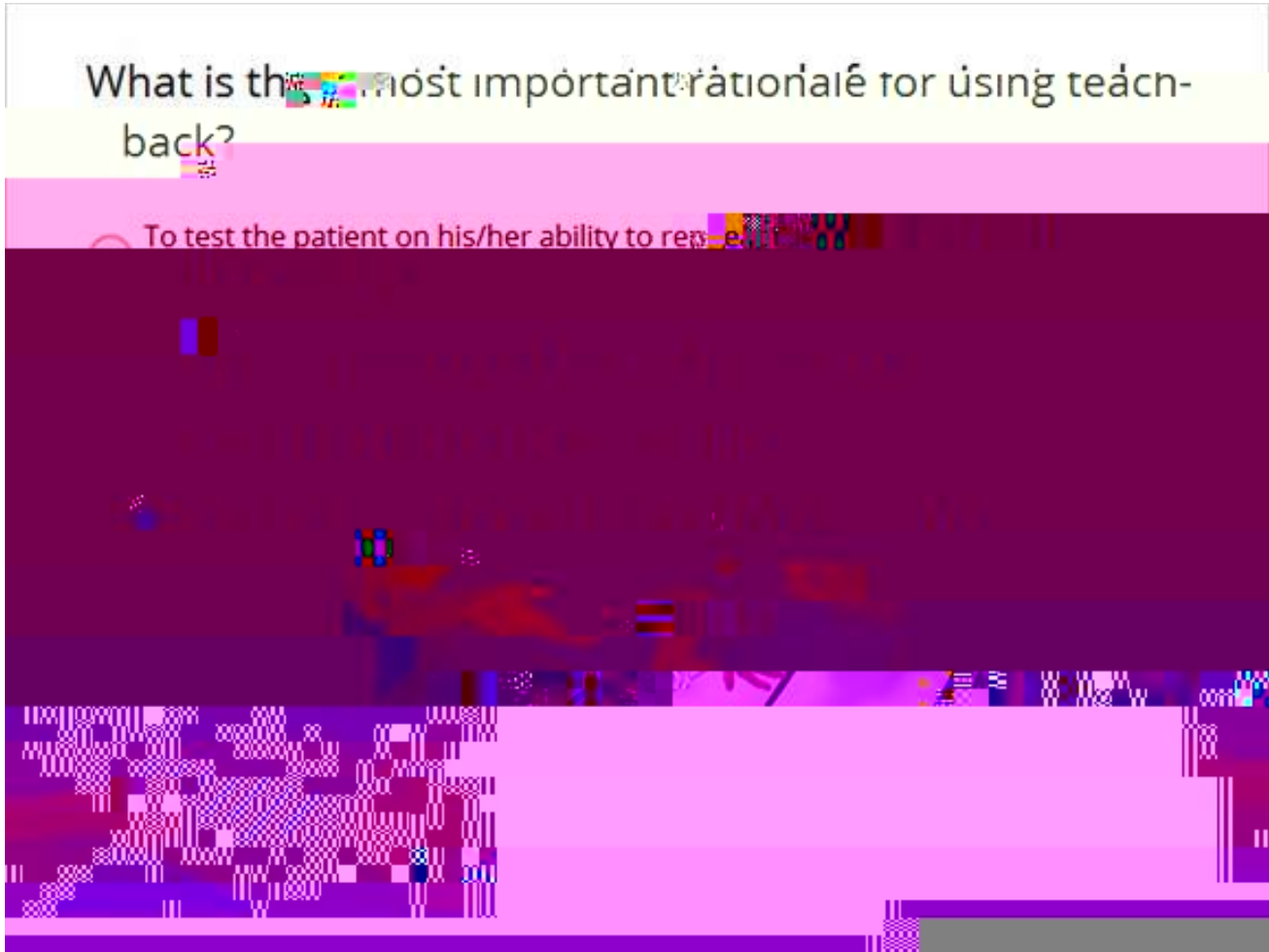
[• D} š Z Œ

"If Anna is not feeling better, she gets a rash, or I am concerned, I should call you.

Demonstrates understanding.

~~SELECT PREVIOUS TO REVIEW THIS CONCEPT AGAIN~~ ~~PREVIOUS~~

1.22 Question: Rationale for using teach-back



What is the most important rationale for using teachback?

Correct?	Choice	Feedback
No	To test the patient on his/her ability to repeat the important health information given	Incorrect. Teachback should not be mere repetition, nor should it be a quiz. It is a check on the clinician's ability to clearly communicate information.
No	To give the patient time and opportunity to talk to you	Incorrect. While teach-back does allow patients to talk to you, the purpose of teach-back is to ensure your message understood. Most clinicians state once they master teachback, it takes just about a minute to complete.

Correct?	Choice	Feedback
No	To meet the requirements of Meaningful Use	Incorrect. Meaningful Use does not include any requirements related to teach-back.
Yes	To alert you to whether or not your communication was clear	Correct. Teach-back serves as a check to see how well the patient understood what you told him or her.

You did not select the correct responses. Please try again.

1.25 Question: Effective Teach-back Phrases?



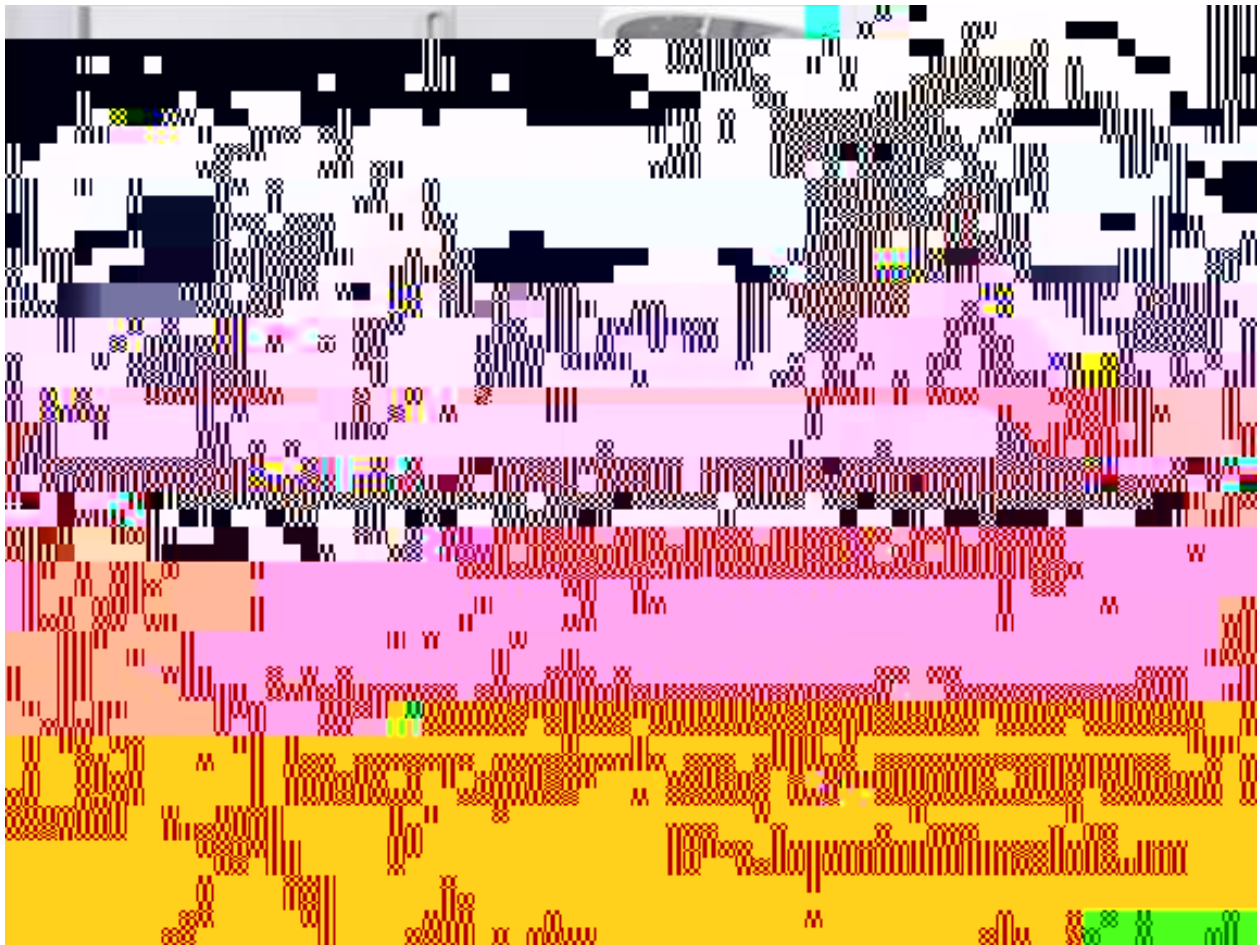
Scroll down to select

all that are appropriate.

Correct Choice

Yes

1.26 Congratulations



Congratulations! You have completed the teachback training.

"Tell me and I forget, teach me and I may remember, involve me and I learn."

Benjamin Franklin

1.27 References

1. Anderson JL, Dodman S, Kopelman M, et al. Patient information recall in a rheumatology clinic. *Rheumatology* 1979 18(1):218.
2. Britten N, Stevenson FA, Barry CA, et al. Misunderstandings in prescribing decisions in general practice: qualitative study. *BMJ* 2000 Feb 19;320(7233):484.
3. Calkins DR, Davis RB, Reiley P, et al. Physician communication at hospital discharge and patients' understanding of the postdischarge treatment plan. *Arch Intern Med* 1997 May 12;157(9):1020.
4. Coran JJ, Koropeczyk Cox T, Arnold CL. Are physicians and patients in agreement? Exploring dyadic concordance. *Health Educ Behav* 2013 40(5):1103.
5. Hancock K, Clayton JM, Parker SM, et al. Discrepant perceptions about end-of-life communication: a systematic review. *J Pain Symptom Manag* 2007 Aug 31;34(2):190-200.
6. Zolnierok KB, DiMatteo MR. Physician communication and patient adherence to treatment: a metaanalysis. *Medical Care* 2009 Aug;47(8):826.
7. Hibbard JH, Greene J. What the evidence shows about patient activation: better health outcomes and care experiences; fewer data on costs. *Health Aff* 2013 Feb 1;32(2):207-14.
8. Keulers BJ, Scheltinga MR, Houterman S, et al. Surgeons underestimate their patients' desire for preoperative information. *World Surg* 2008 Jun 1;32(6):970.
9. Kessels RP. Patients' memory for medical information. *J Roy Soc Med* 2003 May 1;96(5):2193 May