Using Self-Management Support In Your Coaching Approach

Mike Hindmarsh Hindsight Healthcare Strategies

QIIP Practice Facilitator Training May 12-13, 2008 Toronto, ON

Chronic Care Model

Community

Health System

Resources and Policies

Health Care Organization

Self-Management Support Delivery System Design

Decision Support Clinical Information Systems

Informed, Activated Patient Productive Interactions

Prepared,
Proactive
Practice Team

Improved Outcomes



Self-Management Support

- Emphasize the patient's central role in managing their illness
- Use effective self-management strategies that include assessment, goal-setting, action planning problem-solving and follow-up.
- Organize internal and community resources to provide ongoing self-management support to patients.



What is self-management?

"The individual's ability to manage the symptoms, treatment, physical and social consequences and lifestyle changes inherent in living with a chronic condition."

Barlow et al, Patient Educ Couns 2002;48:177



Patient educ. vs. SMS

- Information and skills are taught
- Usually disease-specific
- Assumes that knowledge creates behavior change
- Goal is compliance
- Health care professionals are the teachers

- Skills to solve pt. Identified problems are taught
- Skills are generalizable
- Assumes that confidence yields better outcomes
- Goal is increased selfefficacy
- Teachers can be professionals or peers



Self-Management Tasks in Chronic Illness

- To take care of the illness
- To carry out normal activities
- To manage emotional changes

Based on work by Corbin and Straus



Collaborative care

"If physicians view themselves as experts whose job is to get patients to behave in ways that reflect that expertise, both will continue to be frustrated...Once physicians recognize patients as experts on their own lives, they can add their medical expertise to what patients know about themselves to create a plan that will help patients achieve their goals."

Funnell & Anderson JAMA 2000;284:1709



What self-management support isn't...

- Didactic interaction
- Sage on the stage
- You should...
- Finger wagging
- Lecturing
- Waiting for patients to ask for help



Self-Management in CCM

ASSESS:

Beliefs, Behavior & Knowledge

ARRANGE:

<u>AD</u>VISE:

Information about

health risks and

benefits of change

e specific

follow-up (e.g., visits, phone calls, mailed reminders

Personal Action Plan

1. List specific goals in behavioral terms

- 2. List barriers and strategies to address barriers
- 3. Specify Follow-up Plan
- 4. Share plan with practice team and patient's social support

ASSIST:

Identify personal
barriers, strategies, problem-solving
techniques and
social/environmental
support

AGREE:

Collaboratively set goals based on patient's interest and confidence in their ability to change the behavior

Glasgow RE, et al (2002) Ann Beh Med 24(2):80-87

Using the Five A's as a Facilitator



ASSESS

Risk factors, Beliefs, Behavior and Knowledge



Tips on assessing your practice team

- Ask questions about them....get to "know" them
- Provide feedback to team when appropriate
- Assess their view of QI progress and how easy/difficult it is to get things done.



ADVISE

Provide specific information about the benefits of practice change



Tips on providing advice

- Make the source of advice clear (medical knowledge or best practice)
- Personalize advice to the FHT/CHC environment
- Listen more than you talk
- Have a key message for each idea you present
- Don't overwhelm them with information



AGREE

Foster collaboration in selecting ideas for change.



Tips to create agreement

- Base goals and measures and team's priorities
- Let then start where they want
- Do not judge ideas for change
- Do not make them agree with you
- Team consensus on testing ideas is not critical unless there is obvious opposition or discomfort



ASSIST

Using behavior change techniques (problem solving, counseling) to aid the team in acquiring skills, confidence to test ideas quickly.

Tips on assisting patients

- Use other teams as examples
- Address helplessness
- Learn and use a problem-solving approach
- Link to the assessment of barriers and environment
- Avoid telling them what to do
- Avoid speeches
- Avoid cheerleading



Problem Solving

- 1. Identify the problem.
- 2. List all possible solutions.
- 3. Pick one.
- 4. Try it in the next testing cycle.
- 5. If it doesn't work, try another.
- 6. If that doesn't work, find a resource for ideas.
- 7. If that doesn't work, accept that the problem may not be solvable now.



Thoughts on Team QI Literacy

- People can read and function above their cognitive level on topics that interest them
- People are very sensitive about being talked down to.
- Be cognizant of power inequities among team members



ARRANGE

Schedule follow-up contacts to provide ongoing assistance and support as needed.



Tips for follow-up

- Try a wide variety of methods, whichever team prefers (in person, phone, email)
- Make sure follow-up happens, team trust can be destroyed by missed follow-up
- Determine follow-up based on team preference



Personal Action Plan

- 1. Something you WANT to do
- 2. Describe

How

Where

What

Frequency

- When
- 3. Barriers
- 4. Plans to overcome barriers
- 5. Confidence rating (1-10)
- 6. Follow-Up plan

Source: Lorig et al, 2001



Confidence Ruler

1 2 3 4 5 6 7 8 9 10

Not Unsure Somewhat Very

Confident Confident Confident

For More Information on Self-management Support

www.improvingchroniccare.org

thanks