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Patient Education Council: Enhancing the Quality of Patient Education Through the Development of a Patient Education Council

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# Enhancing the Quality of Patient Education Through the Development of a Patient Education Council

by Ayelet Ruppín-Pham MN, RN

Patient education has always been an important nursing skill. More and more research shows the importance of patient education to a patient's health. Readmission rates are greatly decreased the more engaged a patient is in their healthcare, and costs go down if a patient is properly educated. Research also shows that over eighty percent of the United States' population has poor health literacy, or the ability to understand health information. With all of our challenges in keeping our patients healthy and out of the hospital, it is increasingly clear that we, as nurses, must have the skills and resources to effectively teach our patients.

Patient education is embedded into our daily nursing practice at all levels of care. From educating the patient about the risks of having surgery, to teaching how to test blood sugar or why a patient has to take a new medication, the nurse is responsible for giving the patient and their family a whole host of information. We say nurses are teachers, but in nursing school we do not teach nurses how to be an effective teacher. Patient education is a skill just the same as taking vital signs or doing a head to toe assessment.

In 2010, we did an assessment of all of the patient education resources and handouts available in the entire Health System. The results were grim: while most staff recognized the need to provide our patients with information, we did not have an organized system to know what resources were available to our patients or where to get them. Our ambulatory areas had fifty different brochures and handouts, and our inpatient areas had just a handful. We did not have any resources other than reading material (some of which had been copied from a copy ten times over). In short, while we had many staff

at the Health System who were passionate about educating our patients, we were short on resources and organization.

Also in 2010, our Acute Care floors in Hillcrest were embarking on a journey towards improving discharge education through the use of teach-back. Part of a quality improvement project, this teach-back project spurred increasing interest in improving patient education, and a small group of patient education champions came together from 6 East and 6 West to meet monthly. From this group, we determined that patient education standardization was needed throughout the health system, not just on a unit-by-unit basis.

The Patient Education Council in its current incarnation was formed on January, 2012. An interdisciplinary group from its inception, its members include representatives from pharmacy, respiratory therapy, ambulatory services, forms management, marketing, and of course, nursing. The mission of the Patient Education Council is to promote best practice, culturally competent patient education that empowers patients and families to actively engage in their health processes in the hospital and at home. To accomplish this mission, our goals include creating a formalized review and approval process for patient education material, improving patient education documentation, and encouraging teach-back at every patient encounter. In addition to these goals, we have been working on promoting the use of Emmi patient education videos throughout the hospital, to great success.

We encourage anyone who has a passion for educating patients to join our council – we need dedicated nurses with great ideas! The Patient Education Council meets the third Thursday of every month in the Hillcrest 3rd floor classroom from 8:30-9:30AM. Interested patient education champions can contact Ayelet Ruppín-Pham, council chair and Patient Education Coordinator at [aruppín@ucsd.edu](mailto:aruppín@ucsd.edu).



**Ayelet Ruppín-Pham, MN, RN**, is the Patient Education Coordinator for the UC San Diego Health System. In addition to her role as chair of the Patient Education Committee, she also oversees the development of Patient Handouts, assists with management of the Emmi program. Coordinates other patient education resources staff may need to help provide quality education to our patients. She has been with the Health System since 2009. Her background includes a Master's in Nursing in Community Health from the University of Washington.

Future projects for the council include educating staff on our newly developed clinical practice guidelines for Patient Education, continuing to train staff on using Emmi videos, mentoring nurses who pursue patient education projects and teaming up with our quality and clinical practice groups to help improve outcomes through the delivery of effective patient education.

# Emmi Teach Back Questions: Warfarin

**Nurses: These teach back questions are guides to assess your patient's learning. This information corresponds to the content in PH115 and the EMMI Module for Warfarin. This is not a patient handout.**

Teach Back Question	Answer Guide
1. What is warfarin?	Warfarin (also called coumadin) is a blood thinner or anticoagulant ("anti" means against and "coagulation" means clotting.) It slows down the clotting process of blood. It is used to treat or prevent clots in your blood vessels, lungs or heart.
2. How do you take warfarin?	Warfarin is a pill that you usually take once a day. You should take it at the same time every day. It is very important to never skip a dose or take a double dose. If you are unsure when to take a pill or how often, it is best to ask your doctor instead of guessing
3. Why do you need to have blood tests on warfarin?	The blood test is called an INR. INR tells your doctor how long it takes your blood to clot. You do not want your blood to clot too much or too little. The blood test is called an INR. INR tells your doctor how long it takes your blood to clot. You do not want your blood to clot too much or too little. The INR is used to see if you are taking the right amount of warfarin to reach your target range.
4. What should your diet be on warfarin?	Your diet needs to be consistent. You do not need to change what foods you are eating or how much. Make sure to eat a consistent amount of Vitamin K. Vitamin K balances your warfarin dose. Vitamin K is found in high amounts in green leafy vegetables. You don't have to stop eating foods with vitamin K or eat a larger amount than before, eat your normal and regular amount of vitamin K. Alcohol can affect how warfarin works. Do not drink more than 1 alcohol drink per day such as one beer or one glass of wine.
5. How does warfarin interact other medications?	Warfarin can change the way other medicines work and other medicines can also change the way warfarin works. Tell your doctor or pharmacist about the other medications you are taking.
6. Can you tell me three signs of major bleeding?  What would you do if you had any of these signs?	Changes in the color of urine or stool. Vomit that looks red or like coffee grounds Coughing up red secretions Severe headache or stomach ache A lot of bleeding from the gums, nose or menstrual bleeding  Call the Anticoagulation Clinic or your doctor or go to the emergency room immediately.
7. What will you do after discharge?	Notify all healthcare providers that you are taking warfarin. It is very important you attend all your follow up appointments. Make sure to have your INR checked within 5-7 days of discharge either at a clinic or with your primary care provider.
What questions do you have?	

## Emmi

Since partnering with Emmi in 2009, usage has dramatically increased from less than 200 videos assigned monthly to over 1000 in June 2013! Emmi videos let us offer education beyond just written handouts, and helps ensure our patients understand the risks and benefits of surgeries, or new medications, or what to expect when they stay in the hospital. The web-based video system is very user-friendly, with all education delivered at a low health literacy level so all patients can feel confident that they understand information without too much medical jargon.

The picture shows a picture from one of the Emmi videos, with an explanation of what makes these videos useful to our patients.

**FOCUSED ON ENGAGING PATIENTS**

**Interactive:** Ask Questions at any time for follow up with a nurse

**Visual learning:** Preferred by all patients, critical for those with low health literacy

**Narrated:** An empathetic voice guides the member through the experience

**Intuitive navigation:** Simple to use for all levels of computer experience

**Plain language:** Targeting a 4th to 5th grade reading level

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