Title: Assessing Clinicians’ Endorsement of Patient Activation in Health Management

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Session Title: Clinical Posters Session 2

Keywords: Clinical training module for behavior change, Patient Activation and Primary care providers and patient health care outcomes

References:


Hibbard, J. H., Greene, J., & Overton, V. (2013). Patients with lower activation associated with higher costs; delivery systems should know their patients’ ‘scores’. *Health Affairs (Project Hope), 32*(2), 216.

Abstract Summary: A poster presentation that will explore what relationships exist between the beliefs and behaviors of primary care providers and their ability to galvanize their patients for improved healthcare outcomes through Patient Activation.

Learning Activity:

<table>
<thead>
<tr>
<th>LEARNING OBJECTIVES</th>
<th>EXPANDED CONTENT OUTLINE</th>
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<tr>
<td>To describe patient activation and illustrate its importance in improving patient healthcare outcomes.</td>
<td>To present a synthesis of the literature, focusing on the development of the patient activation measure and the clinician-support patient activation measure focusing on clinical and fiscal outcomes in healthcare.</td>
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<td>To report the development of a CME approved educational training module for primary care clinicians and its impact on clinician's self-</td>
<td>To describe the key components of the training (strategies and case studies) and report the impact of the training on clinicians' behavior.</td>
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Abstract Text:

Purposes/Aims

To conduct a quality improvement project to determine the impact that a tailored training will have on influencing a clinician’s role in patient activation.

Rationale/Background

Living and managing chronic medical conditions presents a multitude of challenges to the afflicted individuals, as well as the health care delivery system they have to navigate. The consequences are burdens that impact our nation’s emotional, social, physical and fiscal health. The management of chronic conditions in the U.S. requires new strategies to more efficiently mobilize patients to be active partners in their health. While not a new concept, the struggle continues with ways to actually enhance patient activation. There is one such validated psychometric tool developed in 2004, known as the Patient Activation Measure (PAM). This tool has demonstrated positive predictive properties, thus becoming advantageous for clinicians, as a participant’s score can serve as a guide for tailoring disease specific interventions. It has been demonstrated that departures from traditional patient-clinician roles are positively correlated with higher patient activation, but the success of this dynamic relies on the initial clinician’s motivation for patient engagement. However, traditional training does not incorporate these notions or strategies for partnering with patients. A relatively new and reliable measure to assess and differentiate between clinicians who support patient self-management, and therefore activation, is called the Clinician Support for Patient Activation Measure (CS-PAM). Few studies have examined actual clinician beliefs concerning patient self-management and the degree a clinician’s belief in supporting patient activation has on the patient.

Undertaking/best practice/approach/methods/process

The process included the development of a training educational module for primary care providers through a complete review of the literature, attending PAM conference(s), and developing a training module that was reviewed by content and education experts. The deployment of the developed training module is currently underway, with a goal of 50 participants. A pre and post-test will be conducted to assess knowledge readiness and then acquisition. Clinician readiness for the role of patient activation will be measured before the training with the CS-PAM and then at one-month post intervention for evaluation to determine if there is a change in clinician attitude and behavior.

Outcomes achieved/documeted

Expert review of the developed clinician-training module and of the pre and post-tests has been successfully obtained. As the implementation of the training is currently underway, it is anticipated that by the time for presentation, the expected outcomes will include numeric findings about clinician’s value of patient activation and impact of the training. To best display the findings, tables and figures will be used accordingly.

Conclusions

Although clinical use of PAM is well supported through the research, there are still gaps in the research literature to demonstrate that clinicians can reliably assess patient activation and then engage the patient within the time constraints of a clinical encounter. Additionally, there have been minimal published reports
on CS-PAM training via key strategies and assessing what links exists between PCP behavior, patient activation and patient outcomes. Herein lies the gap this project is attempting to fill.