

Teach-Back in Patient Self-Management

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### **Teach-Back in Patient Self-Management**

*James Banks is a 65-year-old white male who is newly diagnosed to have type II diabetes. Mr. Banks weighs 210 lbs, and has medical history of hypertension and hyperlipidemia. Today, he had an appointment to meet with nurse, Ann, who is doing patient/family teaching at his family physician's office to discuss how to manage his diabetes at home. Ann had teaching materials prepared for Mr. Banks, including the brochures "facts about diabetes" and "how to manage diabetes at home". She has some video clips to show Mr. Banks with basic information about diabetes management, such as using the blood sugar checking meter, and how to check blood sugar with the meter. After Ann explained and showed all the information to Mr. Banks, she asked, "Mr. Banks, do you have any questions about diabetes management?" Mr. Banks felt that he had so many questions, but he did not know how to ask since he was totally lost in the overwhelming amount of information on diabetes.*

Every nurse probably has experienced a similar situation in clinical practice when teaching patients about health related topics. The questions often asked of patients and their family are, "do you have any questions?" or "do you understand?" However, is it the best way to make sure patient understand what he has been taught?

Patient and family education is an important nursing role as well as a core competency of nursing practice. Evidence shows that successful patient and family education can improve health outcomes, such as reducing hospital readmission, saving health cost, and increase patient and family's satisfaction (Jack, Chetty, Anthony, Greenwald, Sanchez, & Johnson, et al., 2009; Tung & Chang, 2009). Patient education can occur in any health care settings, including outpatient, inpatient, and community settings. However, determining the best way to provide

patient and family education, and evaluating the teaching process is a challenge for nurses. The teach-back method is one strategy to help nurses to evaluate the teaching process.

### **Teach-Back Method**

Patient education as an integral aspect of communication between health care providers and patients plays an important role in patient health management. Effective communication between the health care provider and the patient requires that the health care provider uses different patient-centered communication approaches to explicitly assess patient's understanding of questions (Farrell, Kuruvilla, & Eskra, & Brienza, 2009). Using teach-back facilitates the assessment of patients' understanding.

Teach-back, also called "closing the loop" or "show-me", is a method to confirm that patients understand what they need to know after the clinicians have explained the information (NC Program on Health Literacy, 2011). This method has been used to close the gap of communication between clinicians and patients while enhancing patient's knowledge in repeating cycles (see Figure 1, Schillinger, Piette, Grumbach, Wang, Wilson, & Daher, et al., 2003). When patients explain what they have learned to clinicians, it indicates how much and how well they understand after the teaching process. This feedback helps clinicians to assess if other strategies are needed to help patients understand better. Teach-back provides valuable information for both the patient and clinician to improve the outcomes of patient education process. Using the teach-back technique not only improves patient's knowledge and understanding, but also increases patient's adherence to disease management. Over the long term, patients gain a sense of accountability for their own health status. Teach-back technique has been used to assess patient's understanding of important points covered in informed consent and the Health Insurance Portability and Accountability Act (HIPAA) documentation (Kripalani,

Bengtzen, Henderson, & Jaobson, 2008). It has showed using teach-back is effective in assessment of patient understanding during prostate or breast cancer screening, and improving low-income mother's understanding of childhood immunization (Ferrel, et al., 2009; Wilson, Baker, Nordstrom, & Legwand, 2008).

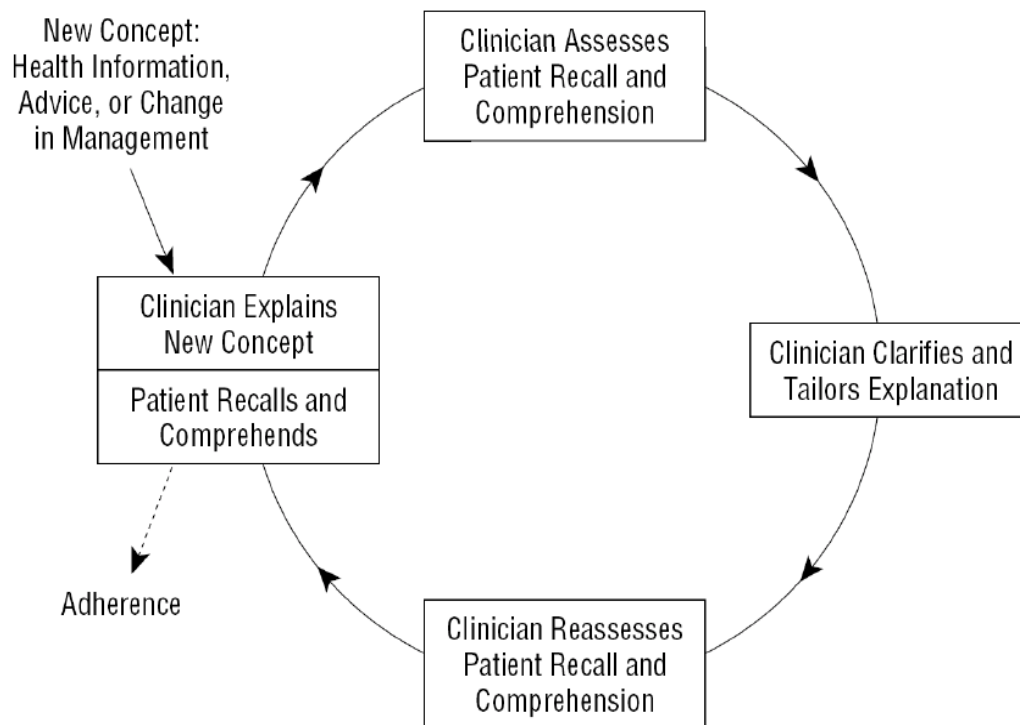


Figure 1: Teach-back: Closing the loop: the interactive communication loop in clinician-patient education (Schillinger, Pietter, & Grumbach, et al., 2003).

### **Teach-Back in Patient Self-management**

From above description, teach-back can be used in patient self-management to improve patient's understanding of his/her health status and to enhance the self-management skills. Self-

management becomes an essential part of health care management of people with chronic diseases. Self-management refers to behaviors and strategies that individuals take to maintain or improve their health status (Auduly, Asplund, & Norbergh, 2010). It is used in different ways for patients to manage their own health. First, self-management refers to an increase in patients' general confidence to manage their health conditions, and patients have the primary role to manage their conditions instead of the healthcare providers, such as physician, nurses, and other healthcare members (Jovici, Holroyd-Leduc, & Straus, 2006). On the other hand, self-management means to increase the individual patient's confidence to manage specific tasks related to their illness conditions, such as monitoring their symptoms, watching their diet, adjusting their medications based on some criteria, incorporation of exercise into the daily routine, and determining when they should seek medical advice or help (Jovici, et al., 2006). Self-management requires patients to have a good understanding of their health conditions; signs and symptoms; the rationales for the treatments (such as medications and medical equipments); and side effects of the medications; and when is the time to ask help from healthcare professionals.

The positive effects of self-management as an important part of management of patient's chronic condition have been widely studied in people with different health conditions, such as heart failure, arthritis, and diabetes (Albert, Musa, Kwoh, & Silverman, 2008; Ditewig, Blok, Havers, & van Veenendaal, 2010; Kluzer, Hermanns, Reinecker, & Haak, 2007). Patients with chronic disease, self-management plays a key role to increase involvement and control in their health conditions and to improve their overall well-being (Bourbeau, 2009).

To manage their own care in the community setting, patients with chronic health issues need to learn how to independently manage their chronic health conditions over the long term.

The self-management process requires that patients not only understand the chronic health condition(s), but also have the basic skills and knowledge for self-management. Basic knowledge and skills often include: signs and symptoms of disease, purpose of each medication and side effects of them, diet management, and how to increase exercise and activities.

To increase the ability of self-management, health care providers need to teach patients about their health conditions, and provide the skills to manage their chronic conditions. In this teaching process, the traditional teaching techniques are not the best way to assess patient's learning and understanding. For example, a study about patients' understanding of medications at discharge (total 100 patients) has showed that about 15% of patients were unaware that a new medication was prescribed, and only half of the patients understood specific information about their medications, including dosage, dosing schedule, and purpose (Maniaci, Heckman, & Dawson, 2008). Therefore, using an effective technique like teach-back to teach and evaluate patients' learning is needed to assure patients understand their conditions and have the skills to manage their condition at home.

Using the case study as an example to show how teach back can make a difference in Mr. Banks learning process. In many circumstances (such as this case study), there are many complex issues to consider and they can be overwhelming. Therefore, it is helpful to use the Toolkit provided at end of this paper for the complex situations. In order to start to manage his diabetes at home, Mr. Banks needs to understand what type II diabetes is and what the possible cause(s) of the condition. He also needs to learn how to check his blood sugar with meter, and understand the schedule to check his blood sugar. If he starts insulin for his blood sugar management, he needs to learn how to calculate the insulin dose based on the blood sugar reading, and also learn how to give himself insulin injection. He needs to have the knowledge of

extreme high and low blood sugar reading, and how to handle those situations at home, and when to seek for help from health care providers. From the description, we know that Mr. Banks has some other health issues, including hypertension, obesity, and increased cholesterol. He needs to identify his risk factors (such as diet choice, exercise and other possible social factors), and work with health care professionals to address those risk factors.

Since there is so much “new” information for Mr. Banks, the teach-back process should be divided into three different sessions. During the first session, the nurse can introduce what is diabetes and what the major causes of diabetes. After teaching this session, the nurse can ask Mr. Banks “I have talked about diabetes with my patients many times. One thing that I always do is to make sure I have explained everything clearly. Could you please explain back to me using your own words what diabetes is and what are the major causes”? After this session, the nurse can always connect Mr. Banks’ other risk factors (high blood pressure, high cholesterol, and obesity) with the causes of diabetes to help him understand the importance of adjusting his life style. During the next session the nurse addresses risk factors using the teach-back technique to assess the teaching and patient’s learning process. Mr. Bank is asked to describe how to adjust his diet (lower salt, low fat), increase exercise, and lose weight to improve his outcome of diabetes and overall health outcomes. The next teaching session is about medication management. The same teach-back technique is used to assess Mr. Bank’s learning process by asking him to verbally “teach back” information that he is received. By repeating the teaching and teach-back process, patients will enhance their learning, understand their conditions, and improve self-management skills.

### **Nurse Can Make a Difference**

With the increasing incidence of chronic disease, patient self-management becomes an important part of health management. Nurses have advantages to incorporate the teach-back technique into their daily nursing practice to improve patients' knowledge and self-management skills.

During the teach-back process, patients undergo a transition from care management by the health care providers to self-management (Bourbeau, 2009). Nurses can assess patients' basic knowledge, identify their learning needs, and incorporate those needs into individualized plans of care. By using the teach-back technique, nurses can re-enforce what patients already know and teach patients about what they do not know. By repeating this process again and again, it will increase patients' self-care capacity, increase their confidence to manage their chronic condition, and eventually help them to self-manage their own conditions successfully.

As Benjamin Franklin says "Tell me and I forget. Teach me and I remember. Involve me and I learn" (BrainyQuote, 2011). In the process of patient's self-management, nurses need to actively involve patients into this process, and let them learn the knowledge and skills of self-management of their conditions successfully. Teach-back is the technique to facilitate patient's active involvement in the learning process towards a successful self-management journey.



## Teach-Back Tool Kit

**What Is Teach-Back:** A health literacy tool to ensure the patient's understanding. It is used to confirm that the patients understand what you have explained to them using their own words.

**Do Ask:**

- To make sure that I have explained everything clearly, can you tell me what medication(s) you are taking to control your blood sugar?
- We have gone over a lot of information today. In your own words, can you tell me what are you going to do when your blood sugar is low?

**Do Not Ask:**

- Do you understand?
- Do you have any questions?

**Other Tips:**

- Use simple/plain language when explaining new materials to the patient.
- Start slow, and break down information into simple, short pieces.
- For more than one concepts, use “chunk and check” method: teach the major points of the first concept and check patient's understanding using teach-back, then go to the next concept.
- Ask the patient to use their own words.
- Encourage the patient to ask question.
- If family is available, involve the family into the process of learning and teaching back.
- Document use of teach-back and patient's response.

**Things Should Keep in Mind:**

- This is NOT a test of the patient's learning, but of how well YOU explained the information to the patient.
- Assess patient's health literacy level, and come up with a proper strategy for teaching.
- Adjust your teaching style based on the results of teach-back from patient.

Adapted from NL Health Literacy  
<http://www.nhealthliteracy.org>

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