



#### Educational Strategies: Best Practices in Adult Learning

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# Tell me and I forget; Teach me and I may remember;

#### Involve me and I learn

— Chinese Proverb

(also attributed to Benjamin Franklin)



#### Aim

The goal of these slides is for you to participate in, and learn about, adult education best-practices so that you can implement these strategies in your own everyday practice.



#### Agenda

- Examine current educational practices
- Strategies to improve practice
  - Patient centered approach
  - Improving patient participation
  - Good questioning techniques
- Review of practical suggestions that can be directly implemented into your practice

#### Assessing Current Practices

- Think about:
  - -What we are doing well in CKD education in BC?
  - -What you are doing well in your own educational practice?



#### Effective CKD Education

Research and Observations...





#### Effective Practices

#### Models of Care:

- Multidisciplinary Model (Dixon et al., 2011; Goldstein et al., 2004)
  - Reduces risk of death by 50% (Ronskley & Hemmelgarn, 2012)
  - Delays progression of CKD (Strand and Parker, 2012)
- Regular Care During Predialysis (Jungers et al., 2001).
  - Phone contact or personal visits increase self-care (Strand & Parker, 2012)
  - Proactive Care (Ronksley & Hemmelgarn, 2012)
- Caring Practitioners (Zubialde, Mold & Eubank, 2009)

#### Effective Practices

#### Educational Programming:

- Increases In Knowledge
  - Delayed progression of CKD linked to education and supportive contact (Strand and Parker, 2012)

#### Educational Components

- One-on-one Sessions (Gruman et al., 2010; Lingerfelt & Thorton, 2011)
- Classroom style presentations (Gruman et al., 2010)
- Patients talking to patients (Rygh, et al, 2012; Morton et al, 2006)
- Inclusion of family or social supports (Quinan, 2005, Richard 2005)

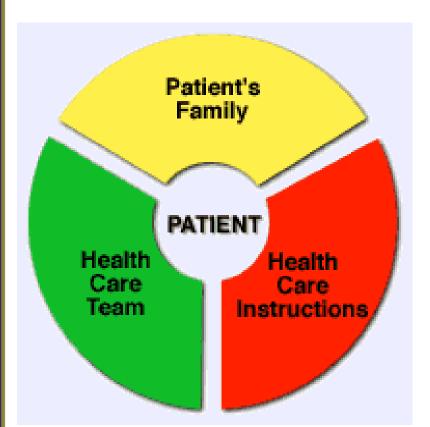
#### Implications

 The BC CKD educational program has many strengths

Building on these strengths is vital

 Educational theory can help to inform practice...

- -Increasing patient-centred education
  - What is "patient-centred"?





- -Increasing patient-centred education (LHIN, 2010)
  - What is "patient-centred"?



- Increasing patient-centred education (LHIN, 2010)
  - What is "patient-centred"?



Patient-centred education:

- -Focuses on collaboration
- -Increases opportunities for patient self-management
- -Increases patient confidence



Our visual for "patient-centered":



#### Expectations Activity

- On a piece of paper write down your expectations for these slides:
- Add a <u>wild</u> prediction of the best possible outcome should your expectations be met
  - e.g., I'm expecting to learn how to teach patients, and my <u>wildest</u> expectation is that if I knew how to teach well, patients would do everything they should. Always!



#### Expectations

(Lea, Stephenson & Troy, 2003; Schommer, 1990; White, 1995)

- What was the point of this activity?
  - Expectations are powerful -understanding them is key to the success of any learning experience
  - Understanding patients' expectations helps us design education that is tailored to their needs and thus improves outcomes—patient centered practice



## Doing Patient Centred Education

Understanding Patient Expectations→



#### Expectations

Answer the following questions:

- What do your patients expect from you?
  - How do you know this?
  - Ways to verify if what you believe is correct are



## I think you learn more if you're laughing at the same time."

- Mary Ann Shaffer



"OK, I'm now going to read out loud every single slide to you, word for word, until you all wish you'd just die."

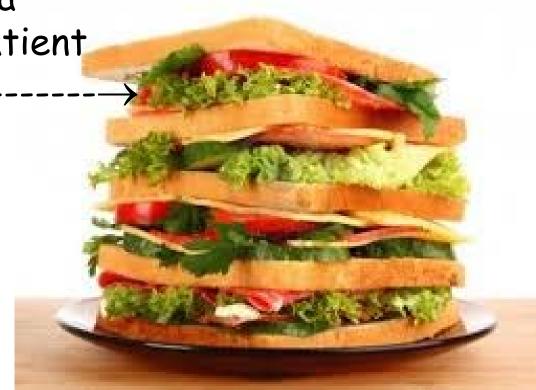


## Doing Patient Centred Education

Begin <u>Every</u> Educational Encounter with a

Discussion of Patient

Concerns-



How do we know what the concerns our patients have?

#### •ASK!



#### Patient Centered Education

- Increase learner participation:
  - -Focus on person not on content





#### Patient Centered Education

- Increase learner participation:
  - -Focus on person not on content
    - What does focusing on the person mean?



#### Patient Centered Education

- Increase learner participation:
  - -Focus on person not on content
    - Think about who is doing most of the talking
      - Some knowledge is key, more is not necessarily better
    - You can cover the content but what has the patient actually learned or retained?

## Getting Caught-up in Content

- Medical knowledge does not necessarily lead to increased compliance and happiness (Katz et al., 2008).
- Compliers with dietary recommendations did not score higher on a CKD knowledge questionnaire (Katz et al., 2008).
- Awareness about CKD was NOT associated with improved outcomes (Tuot et al., 2011).

#### Caught-up in Content

- Too much information can be given in many ways
  - E.g., How many handouts are you sending home?



#### Participation

- Enhancing patient participation is key.
- What are some ways to do this?
  - The start of your session sets the tone—start well!
  - Make sure patients feel as relaxed and comfortable as possible
    - Ideas of how or what might get in the way?
  - Be sure patients know your name
    - Why might this be important?

#### Participation

#### Information

- Work at the level of the patient
  - Start with their questions/concerns
  - Assess what they are ready to learn by asking quality questions about what they already know
  - Watch your use of medical terminology that may "shut-down" the patient
- More is not always better—keep the amount of information manageable
  - Provide small amounts of information gradually over time (Campbell & Duddle, 2010). CRen

#### Key Participation Strategies

(Zimmerman & Schunk, 2001; 2008)

#### Have patients:

- reflect on what they already know, and generate questions about what they would like to know
- <u>articulate ways to transfer the</u>
   <u>knowledge they just learned</u> (e.g., how will they use this at home, or by doing a demonstration)
- set goals and monitor progress



### Research suggests that, in general, people retain:

- 10% of what they HEAR
- 20% of what they READ
- 30% of what they SEE
- 70% of what they SAY
- 90% of what they SAY AND DEMONSTRATE (Stice, 1987)



#### Participation

- Demonstrations
  - Model how and then get them to demonstrate
  - We learn best when doing or teaching
- Don't just talk, design activities for participation
  - e.g., tools for patients to record and monitor their own progress
  - Ask questions that get them to talk about their understanding of what you just taught (have conversations)

## Doing Patient Centred Education

Patient Participation throughout



#### Asking Good Questions





#### Quality of Questions

(Egan, 2002; Thompson, 2003)

 Ask questions that <u>start</u> <u>conversations</u>

• Not:



- · "Did you take your medication today?"
  - "Yes"



#### Quality of Questions

(Egan, 2002; Thompson, 2003)

- Poor question examples:
  - How are you feeling today?
  - Any questions?
  - Do you understand?

- Come up with a poorly constructed question.
  - Have you asked this questions before?

#### **Quality Questions**

(Egan, 2002; Thompson, 2003)

#### Good questions start conversations

- Examples:
  - What is the most important thing for you right now?
  - What do you know about....
  - What do you want to know about....
  - Remind me what you learned last time about....
  - Tell me about....



#### **Quality Questions**

(Egan, 2002; Thompson, 2003)

- Original:
  - "Did you take your medication today?"
- New:
  - "Can you explain how you manage all of the medications that are prescribed for you?"
- Change your poorly constructed question (that you wrote earlier) into a better one.



#### Frequency of Questions

(Beck, Daughtridge, & Sloane, 2002)

- There is a tendency to ask too many questions
- Too many questions reduces learning and takes the focus away from the patient

## Doing Patient Centred Education

Top and Bottom:

Top:

Start by asking patients about their concerns---

#### Participation

#### Start with open-ended questions

- Start by asking what they know and what they want to know
- Answer to their questions is what they will remember most—so try to illicit good questions from them



## Doing Patient Centred Education

Top and Bottom:

Bottom:

End by asking patients to review what they have learned----

#### Participation

#### End with a recapping question:

- What did you learn today?
- What are the three things you learned that you can do to...?
- What are your key take-aways from this session?
- Can you show me how you would....
- Explain how you will implement this at home



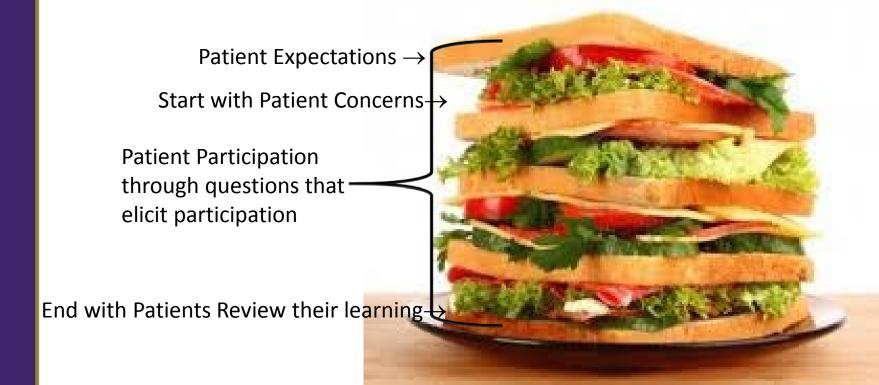
#### Putting it into Practice

Give 3 examples of how you can structure your interactions to increase patients' participation in your sessions



## Doing Patient Centred Education

The Sandwich Metaphor, what does it mean??



## Doing Patient Centred Education

#### What you add:

