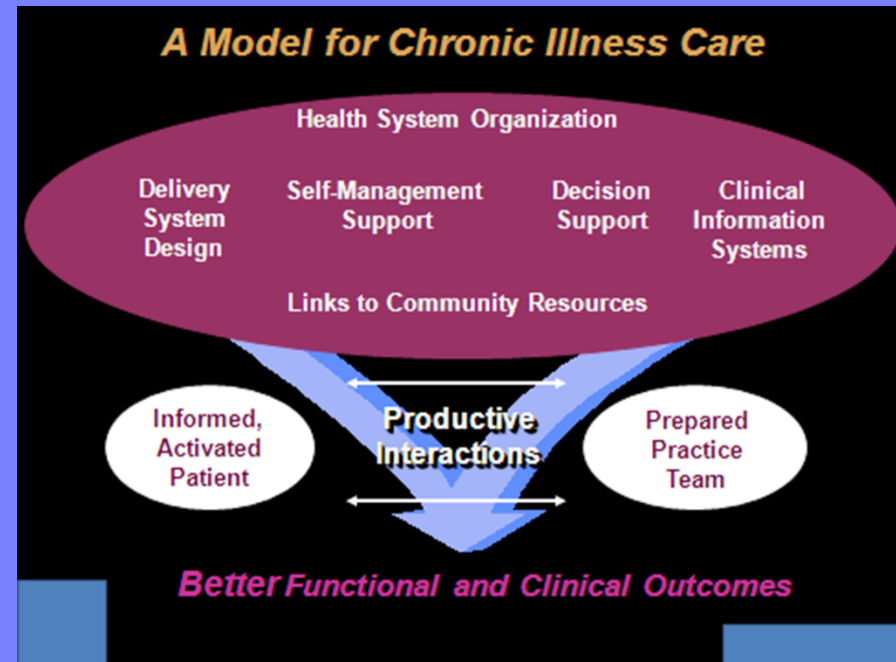


Asking Questions: The effect of a brief intervention on measures of patient activation in community health center settings

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- Patient-Centered Medical Home
 - Care is facilitated by . . . **health information exchange** and other means to ensure that patients get the indicated care when and where they need and want it in a culturally and linguistically appropriate manner
 - Quality and safety are hallmarks of a medical home for which **patients actively participate** in decision-making



Developing patient capacity for participating in decision making

- To be a participant in care patients need to have the necessary knowledge, skills, and confidence
- **Activation** is a process of gaining knowledge, skills, and confidence by
 - Understanding the need to care of one's health
 - Understanding that one's actions are linked to one's health outcomes

Activated Patients...

- have more healthful behaviors,
- have more effective chronic disease self-management skills,
- engage in more successful information gathering from the health system
- have improved provider-patient communication, and
- have better health outcomes

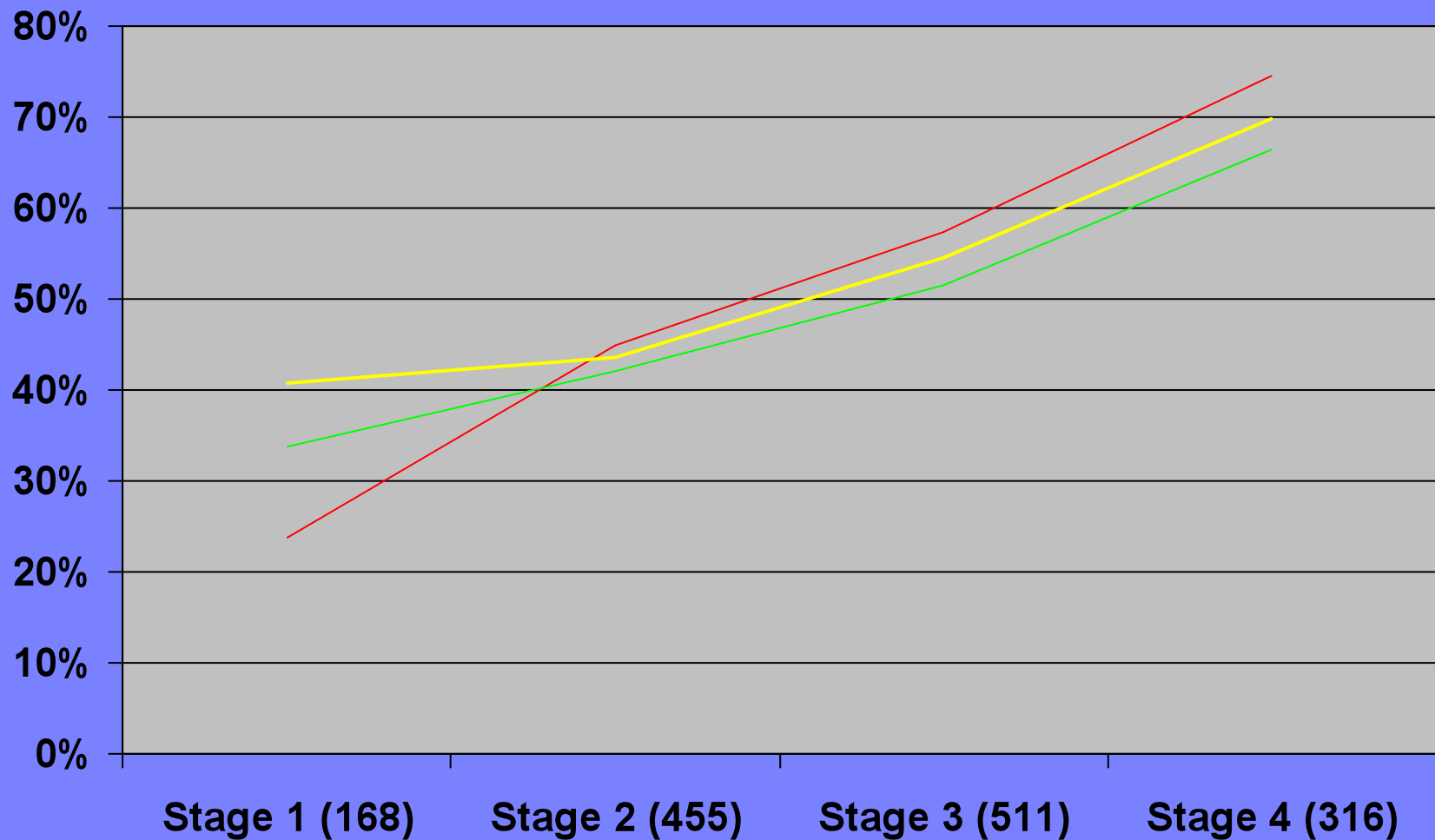
Stages of Patient Activation

Hibbard, et al 2004

- **Stage 1:** May not yet believe that the patient role is important, may still believe that patients are passive recipients of care.
- **Stage 2:** Lack the basic facts or have not connected the facts into a larger understanding about their health or recommended health regimens.
- **Stage 3:** Have the key facts and are beginning to take action but may lack confidence and skill to support new behaviors.
- **Stage 4:** Adopted new behaviors but may not be able to maintain them in the face of life stress or health crisis.

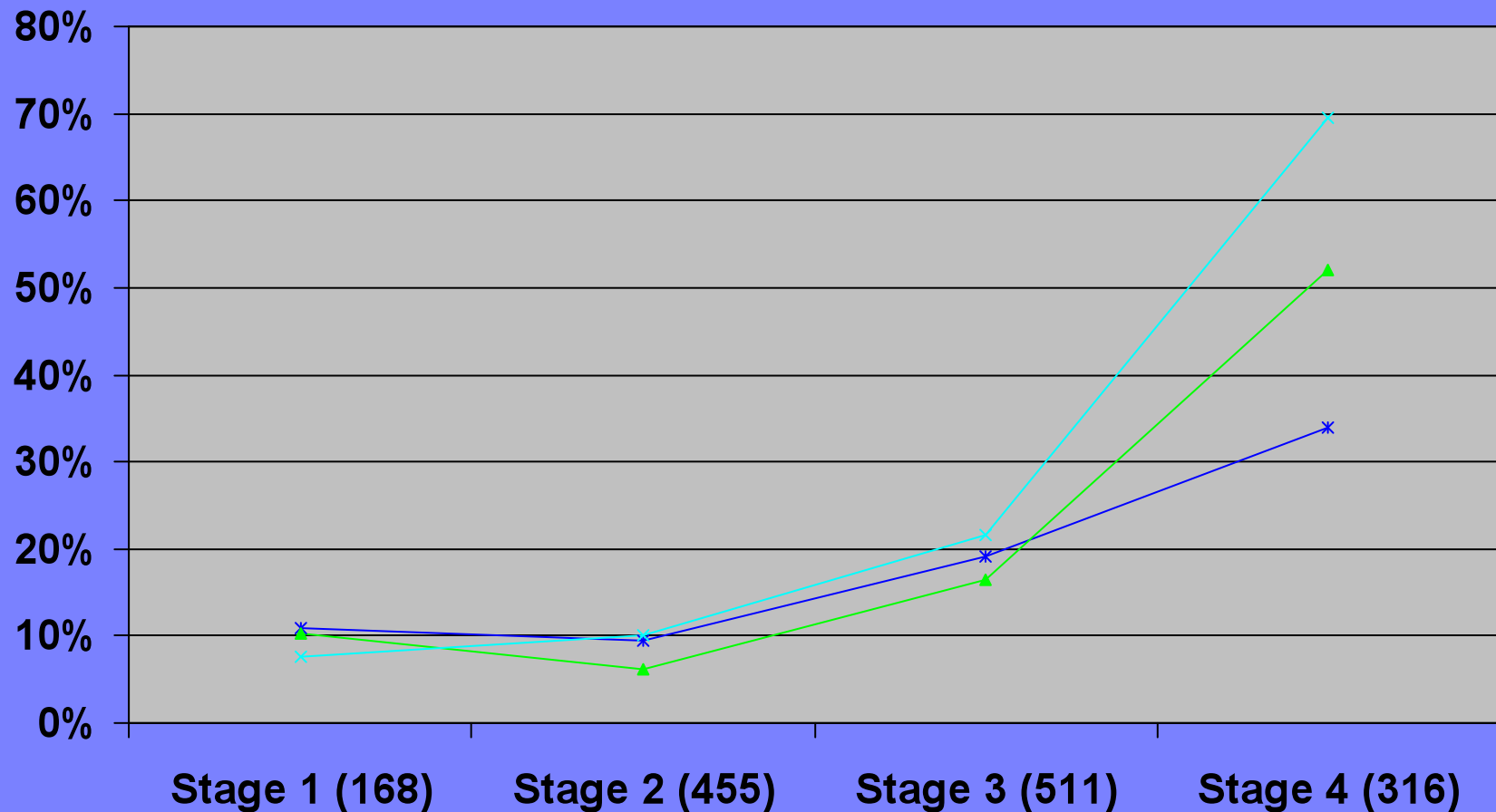
Regular exercise, low fat diet, fruits & vegetables and PAM Stages

— Exercise — Low fat diet — 5 fruits or vegetable



Consumeristic Behaviors and PAM Stages

—*— Bring Dr. Newspaper Information —▲— Look up Dr.'s Qualifications
—x— Persistence in Asking



Study Context

- Effective provider-patient communication has been shown to be less successful for under-represented minority (URM) and lower SES population (Willems et al, 2005 *Patient Educ Couns*)
- Patients who ask more questions are reported to obtain more relevant information from providers, be more engaged in their care, and feel more empowered in their office visits
- URM and lower SES individuals have been found to ask fewer questions and to receive less information from their health care encounters (Johnson et al, 2004 *Am J Public Health*; Cooper et al 2006 *J Gen Intern Med*)

Context (cont)

- Generic strategies for increasing patient question-asking have been typically built on providing prepared questions that individuals bring into their encounters
- However, questions that do not arise from patient generated concerns may fail to provide the questioner with information of greatest import to them
- In addition, providing prescribed questions carries an implicit message that the questioner lacks the ability to determine the information they most need
- We sought to develop a skill-building question development intervention method that would promote patient confidence and empowerment

Study Objectives

- To design a simple, low-intensity patient activation intervention (PAI) that could be delivered in a waiting room setting based on experiences of the ***Right Question Project***
- To evaluate the impact of that intervention on patient activation as measured by the Patient Activation Measure and post visit interviews

Methods

- **Setting: Five community health centers in NYC, summer 2009**
- **Participant Eligibility: 18 years or older/ speaks English and/or Spanish**
- **Patients were approached in health center waiting rooms by interviewers (medical students)**
- **Those consenting to participate filled out surveys including PAM, Patient Preference for Control (PPC), sociodemographic and health status information**
- **Participants underwent PAI**
- **Post visit, participants resurveyed with PAM and open-ended questions about their experience of the PAI**

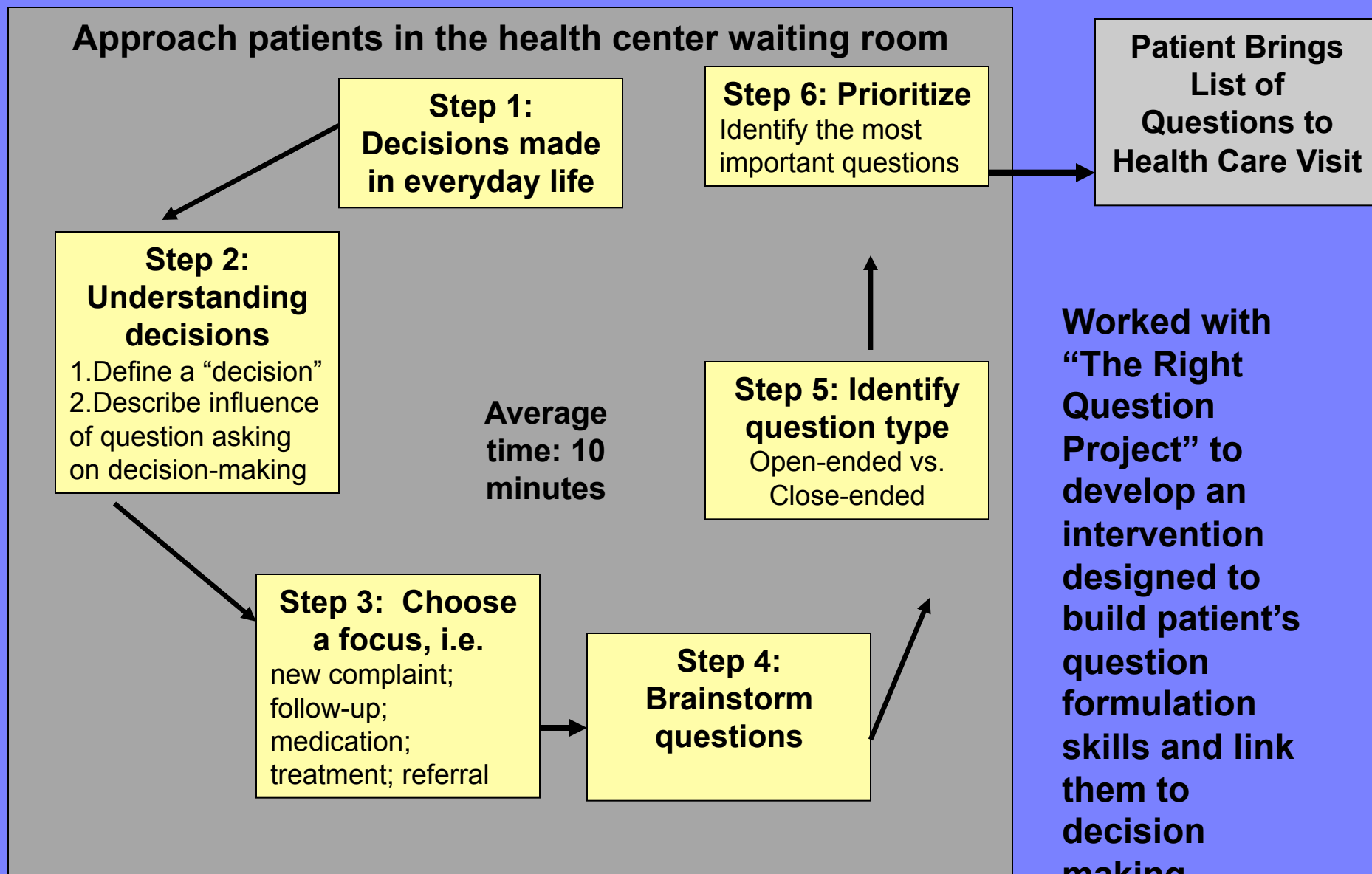
Goal of Activation

- Assist patients, through information gathering, to gain an active role in health encounters and participate in decision making

Process of the Patient Activation Intervention

- help patients understand why questions are important
- help patients relate question-asking to decisions about medical care
- help patients be more comfortable asking questions of their health care providers

The Patient Activation Intervention (PAI)



Results: Pre-PAI

Patient Socio-Demographic Characteristics by Patient Activation Level (before intervention)						
	<u>Total</u> (n =252)	<u>Stage 1</u>	<u>Stage 2</u>	<u>Stage 3</u>	<u>Stage 4</u>	<u>Activation Score Mean</u> (SD)
All Participants (%)	100	31.0%	19.0%	18.3%	31.7%	58.92 (17.69)
Age in years: Mean (SD) *	39.85 (16.04)	43.14 (17.85)	41.19 (15.70)	34.43 (14.22)	38.94 (14.66)	--
Gender (%)						
Male	16.7	38.1	14.3	16.7	18.6	58.40 (18.49)
Female	83.3	29.5	20.0	18.6	31.9	59.03 (17.57)
Race/Ethnicity (%)						
African American/Black	34.1	30.2	18.6	22.1	29.1	58.48 (17.38)
Latino/Hispanic	56.0	30.5	19.9	18.4	31.2	58.65 (16.82)
Other	9.9	36.0	16.0	4.0	44.0	61.96 (23.26)
Educational Attainment (%)						
Less than High School	17.9	40.0	22.2	13.3	24.4	54.94 (16.34)
High School Graduate or GED	36.3	29.7	25.3	19.8	25.3	57.89 (17.32)
Some college or above	45.8	27.8	13.0	19.1	40.0	61.43 (18.26)
Preference for Control (%) **						
Passive Role	35.9	35.6	28.9	16.7	18.9	55.20 (16.79)
Collaborative Role	22.3	33.9	16.1	17.9	32.1	58.30 (17.13)
Active Role'	41.8	24.8	12.4	20.0	42.9	62.63 (18.15)
Note: Variables reported as percentages were tested with chi-square analyses and variables reported as means and standard deviations were tested with ANOVA. * P < .05, ** P < .01						

Crosstabulation table of patient activation level pre & post intervention				
Pre- Intervention Activation Level	Post-Intervention Activation Level			
	Level 1 (least activated)	Level 2	Level 3	Level 4 (most activated)
Level 1	16 (20.5%)	17 (21.8%)	34 (43.6%)	11 (14.1%)
Level 2	6 (12.5%)	11 (22.9%)	17 (35.4%)	14 (29.2%)
Level 3	1 (2.2%)	3 (6.5%)	23 (50.0%)	19 (41.3%)
Level 4	0 (0.0%)	2 (2.5%)	7 (8.8%)	71 (88.8%)

112 (44%) patients moved to a higher level of activation post intervention

121 (48%) patients were at the same level of activation pre and post intervention

Impact of Patient Activation Intervention on PAM Scores (stratified by *Patient Preference for Control* in decision making)

Impact of PAI on PAM Score by Baseline PPC			
Patients Preference for Control	Pre PAM Score	Post PAM Score	Change in PAM Score
Passive	55.20	64.93	9.73
Collaborative	58.30	67.01	8.71
Active	62.63	69.83	7.2

**The PAI improved PAM scores regardless of baseline PPC.
Improvement was statistically and clinically significant**

Questions: Patient Activation Measure

(Likert Scaled 1-4)

1. When all is said and done, I am the person who is responsible for managing my health.
2. Taking an active role in my own health care is the most important factor in determining my health and ability to function.
3. I am confident that I can take actions that will help prevent or minimize some symptoms or problems associated with my health.
4. I know what each of my prescribed medications does.
5. I am confident that I can tell when I need to go get medical care and when I can handle a health problem myself.
6. I am confident I can tell a doctor concerns I have even when he or she does not ask.
7. I am confident that I can follow through on medical treatments I need to do at home.
8. I understand the nature and causes of my health problems.
9. I know the different medical treatment options available for my health conditions.
10. I have been able to maintain the lifestyle changes for my health condition that I have made.
11. I know how to prevent problems with my health.
12. I am confident I can figure out solutions when new situations or problems arise with my health.
13. I am confident that I can maintain lifestyle changes, like diet and exercise, even during times of stress.

Discussion

- PAM scores increased post-intervention suggesting that PAI may have had an impact
 - But: no control group
 - Could be an effect of PAM/PCC administration
- PAI may have more impact on individuals who are less likely to envision an active role in their health and health care
 - Sensible on its face, but PPC not well validated
- If PAI is effective, how potent/sustainable is its impact?
 - Can it lead to changes in patient-provider interactions?
 - Can it lead to changes in behaviors/health outcomes?

Current and Future Directions

- Studying the impact of PAI v. Decision Aid, v. both in a health center setting with English and Spanish Speakers (funding from Foundation for Informed Medical Decision Making)
- What is the best way to measure activation and its changes in less advantaged populations?
 - Measurement strategies: instruments
 - Patient behavior changes (within and outside of medical care setting)
 - Provider behavior change (interactions; test ordering; referrals)
 - Patient Outcomes: Satisfaction; change in physiologic indicators