



Group 2 network

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E m p o w e r i n g t r a i n e e s t o e m p o w e r p a t i e n t s

A m o d u l e f o r G P / F I
s p e c i a l i s t t r a i n i n g



Target group

GP / FM TRAINEES in the second half
of
their training

One-to-one teaching

A continuing process over a period of time

A i m s

At the end of the programme the trainee should:

- know the theoretical principles of patient empowerment (knowledge)
- be able to develop an individual plan to increase patients' abilities (autonomy, concordance....) to deal with health problem(s) (skill)
- involve patients in decision-making and self-care (attitude)

O b j e c t i v e s



Knowledge

At the end of the programme the trainee should be able to:

- define empowerment
- list the benefits and disadvantages of empowerment
- list different means of assessing empowerment
- identify the ethical aspects of empowerment
- list areas of health care where empowerment is more important
- recognise patient's empowerment as a continuing process requiring multiple interventions

S k i l l s

At the end of the programme the trainee should be able to:

- interpret patients ' preferences and needs
- reach shared decisions using different communication skills
- recognise patients ' abilities
- assist patients in the search for answers

Attitude

At the end of the programme the trainee should be

able to:

- gain a positive critical approach to patients' health problems
- be willing to accept patients' autonomy and self-determination
- feel comfortable with patients' expression of choices and preferences
- respond to psychological aspects of patients' health problems

M e t h o d s

- Interview with patients, raising questions on patient empowerment
 - patients with one or more chronic problems
- The trainer should provide background information (articles, websites) to increase the trainee's knowledge on the subject
- First feedback (2 weeks later)
 - video recorded consultation, reviewed, using an assessment tool, discussion on trainee's performance, feedback to trainee
- Trainee's individual structured plan of patient follow-up
- Subsequent sessions, interviews, home visits, video recordings
- Sessions, assessing trainee's performance

M e a n s

- A r t i c l e s
- I n d i v i d u a l i n t e r v i e w s
- V i d e o
- D i s c u s s i o n s t r a i n e r - t r a i n e e
- I n d i v i d u a l p l a n s

Tools

- Video camera, TV or data show
- Special room
- Assessment tool/rating scale
- Patient's informed consent statement
- Checklists
- Transportation to field work

Content



D A Y 1 in the second half of specialist G P / F M training

Individual discussion trainee-trainer to
a s s e s s :

- trainee's knowledge
- skills
- attitude on patient empowerment

According to this assessment the trainer
provides literature and websites on patient
e m p o w e r m e n t .

DAY 14:

- The trainer chooses some of his/her (well known) patients with health problem(s) and introduces them to the trainee.

PS: At least one patient requiring home visit.

- Trainee has an interview with the patient /video recorded, sitting in
- Analysing video, feedback (trainee-trainer session)

P W P

1. Informing patient on his/her health problem (s) and solutions
2. Check patient's understanding of information
3. Check patient's attitudes, feelings
4. Check patient's (social) support and/or barriers
5. Build a partnership in decision-making and follow-up plan, according to patient's health problem (s), health state and level of empowerment
6. Delegate tasks, involve other HC professionals

F o l l o w - u p

F r o m d a y 1 4 t o t h e 6 t h m o n t h

P a t i e n t f o l l o w - u p p l a n

- F i r s t c o n s u l t a t i o n , v i d e o + p a t i e n t e n a b l e m e n t i n s t r u m e n t (P E I) + c o n s u l t a t i o n r a t i n g s c a l e (C R S)
- S e l f e d u c a t i o n , l i f e s t y l e c h a n g e s , s e l f - c o n t r o l s , d i a r y k e e p i n g
- C o n t r o l v i s i t s , d e p e n d i n g o n p a t i e n t ' s h e a l t h p r o b l e m (s) , h e a l t h s t a t e a n d l e v e l o f e m p o w e r m e n t , p a t i e n t (s a t i s f a c t i o n) r a t i n g s c a l e
- H o m e v i s i t (s) , d e p e n d i n g o n p a t i e n t ' s h e a l t h p r o b l e m (s) , h e a l t h s t a t e a n d l e v e l o f e m p o w e r m e n t
- L a s t v i s i t , v i d e o + P E I + C R S

A s s e s s m e n t

- P a t i e n t r a t i n g s c a l e (P R S)
- P a t i e n t e n a b l e m e n t i n s t r u m e n t
(P E I)
- H a y s c o n s u l t a t i o n r a t i n g s c a l e
(C R S)

The Patient Enablement Instrument (PEI)

| As a result of your visit to the doctor today, do you feel you are... | MUCH BETTER | BETTER | SAME OR LESS | NOT APPLICABLE |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| able to cope with life | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| able to understand your illness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| able to cope with your illness | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| able to keep yourself healthy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | MUCH MORE | MORE | SAME OR LESS | NOT APPLICABLE |
| confident about your health | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| able to help yourself | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Scoring of the PEI

"same or less" – score 0

"better" or "more" – score 1

"much better" or "much more" – score 2

A comparison of a Patient Enablement Instrument (PEI) against two established satisfaction scales as an outcome measure of primary care consultations. (Howie et al, 1998)

C o n s u l t a t i o n r a t i n g s c a l e

| | Disagree strongly | | | Agree strongly | |
|--|----------------------|---|---|-------------------|---|
| | 1 | 2 | 3 | 4 | 5 |
| Introductory phase | | | | | |
| (1) The doctor introduced self appropriately | 1 | 2 | 3 | 4 | 5 |
| (2) The patient was placed at ease | 1 | 2 | 3 | 4 | 5 |
| (3) The consultation room layout as appropriate | 1 | 2 | 3 | 4 | 5 |
| History-taking phase | | | | | |
| (4) The doctor listened attentively to the patient | 1 | 2 | 3 | 4 | 5 |
| (5) Verbal cues were appropriately followed up | 1 | 2 | 3 | 4 | 5 |
| (6) Non-verbal cues were appropriately followed up | 1 | 2 | 3 | 4 | 5 |
| (7) Appropriate question style was used | 1 | 2 | 3 | 4 | 5 |
| (8) The doctor avoided medical jargon | 1 | 2 | 3 | 4 | 5 |
| (9) The doctor made appropriate eye contact | 1 | 2 | 3 | 4 | 5 |
| (10) Psychosocial factors were considered | 1 | 2 | 3 | 4 | 5 |
| (11) An appropriate history was obtained | 1 | 2 | 3 | 4 | 5 |

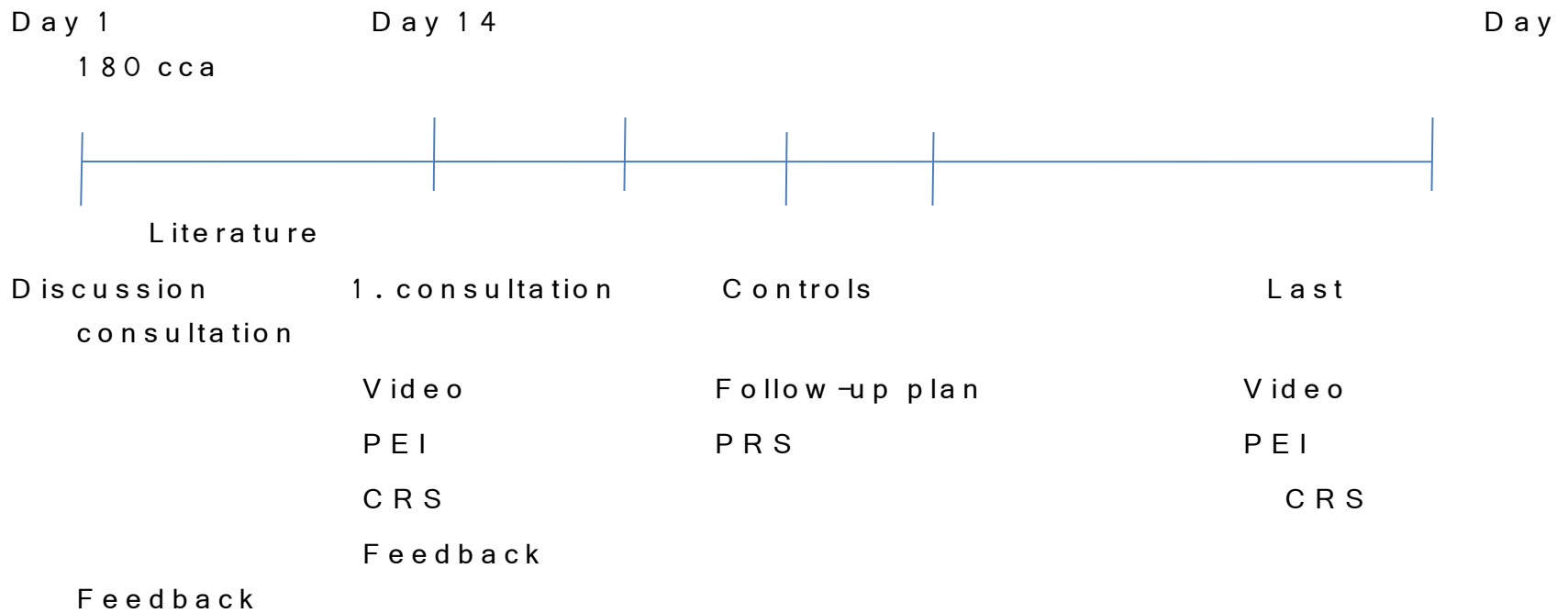
C o n s u l t a t i o n r a t i n g s c a l e

| | 1 | 2 | 3 | 4 | 5 |
|--|----------------------|---|---|---|-------------------|
| | Disagree strongly | | | | Agree strongly |
| Examination phase | | | | | |
| (12) The examination was appropriate to the history | 1 | 2 | 3 | 4 | 5 |
| Diagnostic phase | | | | | |
| (13) Appropriate hypotheses were formulated and problems defined | 1 | 2 | 3 | 4 | 5 |
| (14) The reasons for coming were adequately defined | 1 | 2 | 3 | 4 | 5 |
| (15) Other relevant problems were defined | 1 | 2 | 3 | 4 | 5 |
| Management phase | | | | | |
| (16) Appropriate action for each defined problem was taken | 1 | 2 | 3 | 4 | 5 |
| (17) Correct use of time and resources was made | 1 | 2 | 3 | 4 | 5 |
| (18) Explanation to the patient was adequate | 1 | 2 | 3 | 4 | 5 |
| (19) The patient was involved in decision-making where appropriate | 1 | 2 | 3 | 4 | 5 |
| (20) The doctor provided illness prevention/health promotion | 1 | 2 | 3 | 4 | 5 |
| Closing phase | | | | | |
| (21) The time of closure was appropriate | 1 | 2 | 3 | 4 | 5 |
| (22) Appropriate follow-up arrangements were made | 1 | 2 | 3 | 4 | 5 |

B u d g e t

- 3 0 0 0 E U , 1 5 0 p e r w e e k
- 7 0 % p r o v i d e d b y M i n i s t r y o f H e a l t h , 3 0 % b y P H c e n t r e (n o n f i n a n c i a l m e a n s : v i d e o , P C)
- 1 0 % a d d i t i o n a l (s p o n s o r e d) b u d g e t
 - T r a i n e r , r e c e p t i o n i s t , n u r s e
 - E x p e n d a b l e m a t e r i a l , p r i n t i n g
 - T r a n s p o r t a t i o n t o p a t i e n t ' s h o m e
 - C e l e b r a t o r y f a r e w e l l d i n n e r

Timetable



The Group 2

thank you for your
attention!

