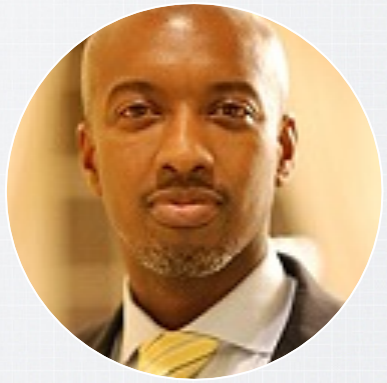
# Designing and Applying Best Practices for Patient Education in Underserved Communities

## TODAY'S PANEL

**Loretta Bush**
MSHA
President & Chief Executive Officer

AuthorityHealth



**Silas Norman**
MD
Transplant Nephrologist,
Clinical Professor of Medicine

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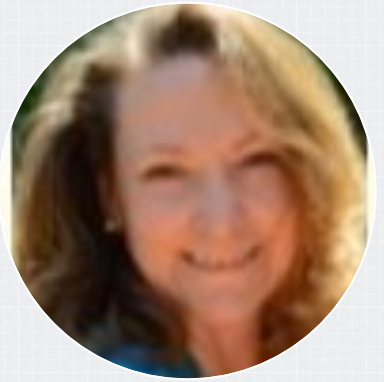


**Stacy Skelton**
PhD, RN
Assistant Professor and Student Success Coordinator

SOUTHERN ILLINOIS UNIVERSITY EDWARDSVILLE

THE Alliance | *Equipping a Modern Profession of Lifesavers in Organ Donation & Transplantation*

**Thursday, August 24, 2023, 2:00pm – 3:00pm ET**

# Continuing Education Information

## Evaluations & Certificates

### Nursing

The Organ Donation and Transplantation Alliance is offering **1.0 hours of continuing education credit** for this offering, approved by The California Board of Registered Nursing, Provider Number CEP17117. No partial credits will be awarded. CE credit will be issued upon request within 30 days post-webinar.

### CEPTC

The Organ Donation and Transplantation Alliance will be offering **1.0 Category I CEPTC credits** from the American Board for Transplant Certification. Certified clinical transplant and procurement coordinators and certified clinical transplant nurses seeking CEPTC credit must complete the evaluation form within 30 days of the event.

### Certificate of Attendance

Participants desiring CE's that are not being offered, should complete a certificate of attendance.

- Certificates should be claimed within 30 days of this webinar.
- We highly encourage you to provide us with your feedback through completion of the online evaluation tool.
- Detailed instructions will be emailed to you within the next 24 hours.
- You will receive a certificate via email upon completion of a certificate request or an evaluation
- Group leaders, please share the follow-up email with all group participants who attended the webinar.

**Deanna Fenton**

Senior Manager, Program Development and Operations

THE Alliance

## Need Assistance?

Contact Us via Zoom Chat, or
info@organdonationalliance.org
786-866-8730

# Meet Our Moderator


## Remonia Chapman

Director, Public Education and Community Relations

GIFT of LIFE MICHIGAN
ORGAN AND TISSUE DONATION

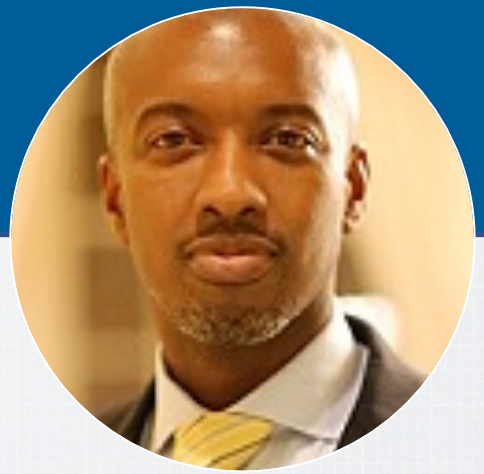
# Meet Our Presenters

**Loretta Bush**

MSHA

President & Chief Executive Officer

AuthorityHealth



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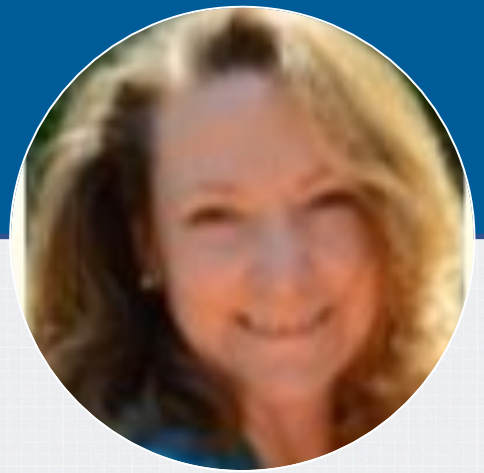

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SCHOOL OF **NURSING**

Dr. Stacy Skelton RN
Assistant professor
Student Success
Coordinator

SOUTHERN ILLINOIS UNIVERSITY
**EDWARDSVILLE**

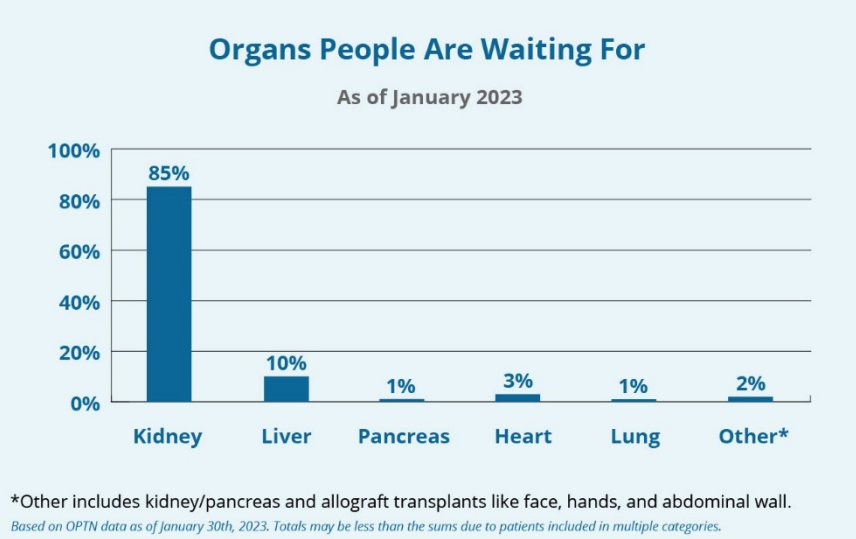
# Diversity, equity, and inclusion in the organ transplant system

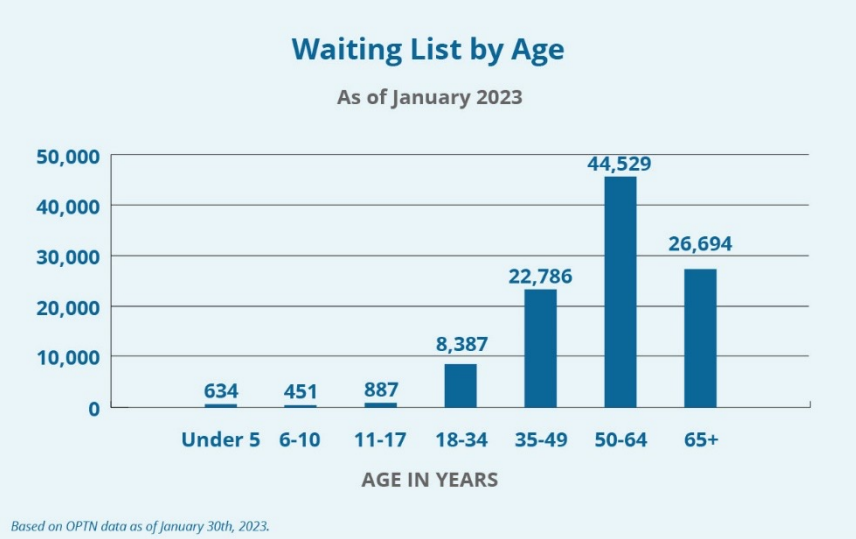
- Overview
  - Transplant data
  - Gaps
    - Who needs a transplant
    - Who is receiving transplants
- Challenges

104,234 the number of men, women and children on the national transplant list.

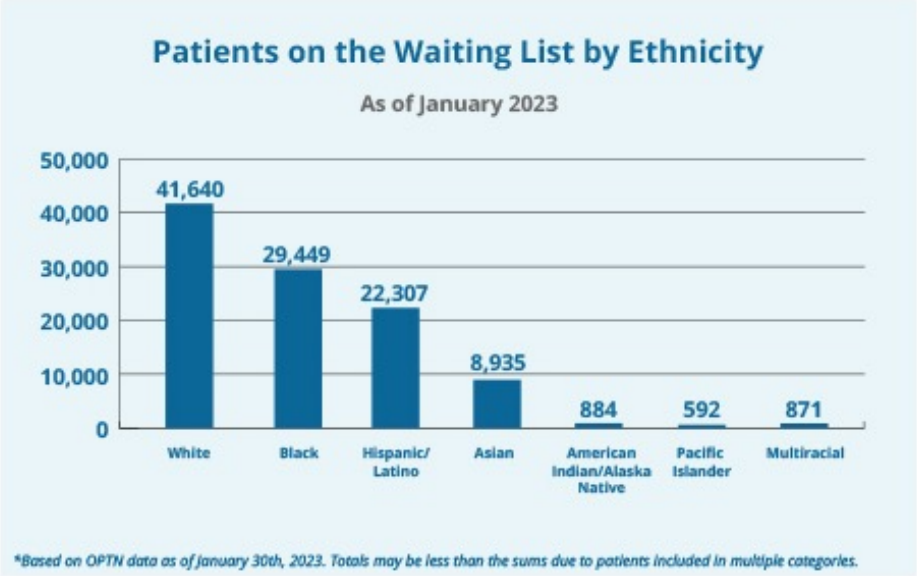
https://www.organdonor.gov/learn/organ-donation-statistics

# Waiting listing by Organs and age

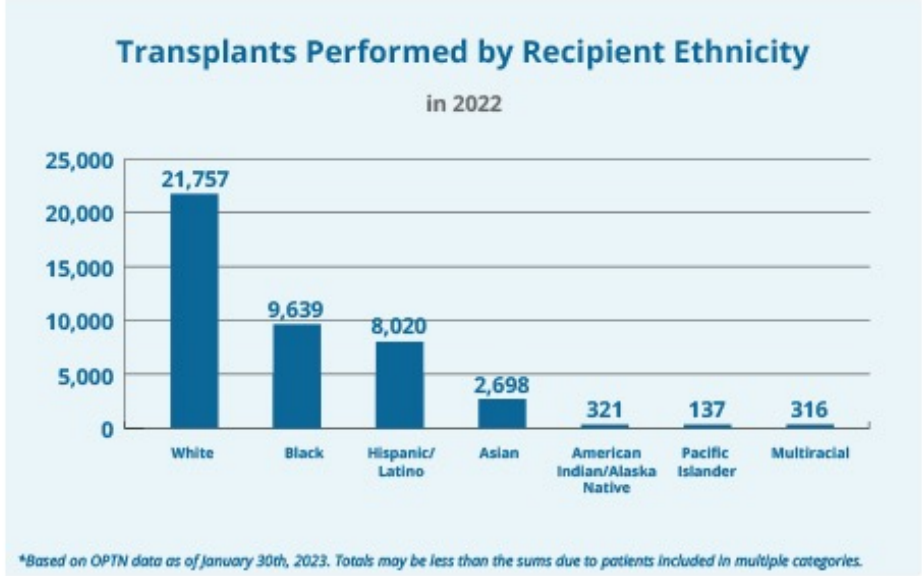


# The scope of the problem




Detailed description of Patients on the Waiting List by Ethnicity




Detailed description of Transplants Performed by Recipient Ethnicity

# Burden of disease by ethnicity

Blacks are 4 times more likely to have kidney failure

(Mullen, 2022, Yue-Harn et al 2020)

Black have higher rates of heart failure (Mullen, 2022, Yue-Harn et al 2020)

# Does the average wait time differ by ethnicity?

Yes, by year (Mullen, 2022)

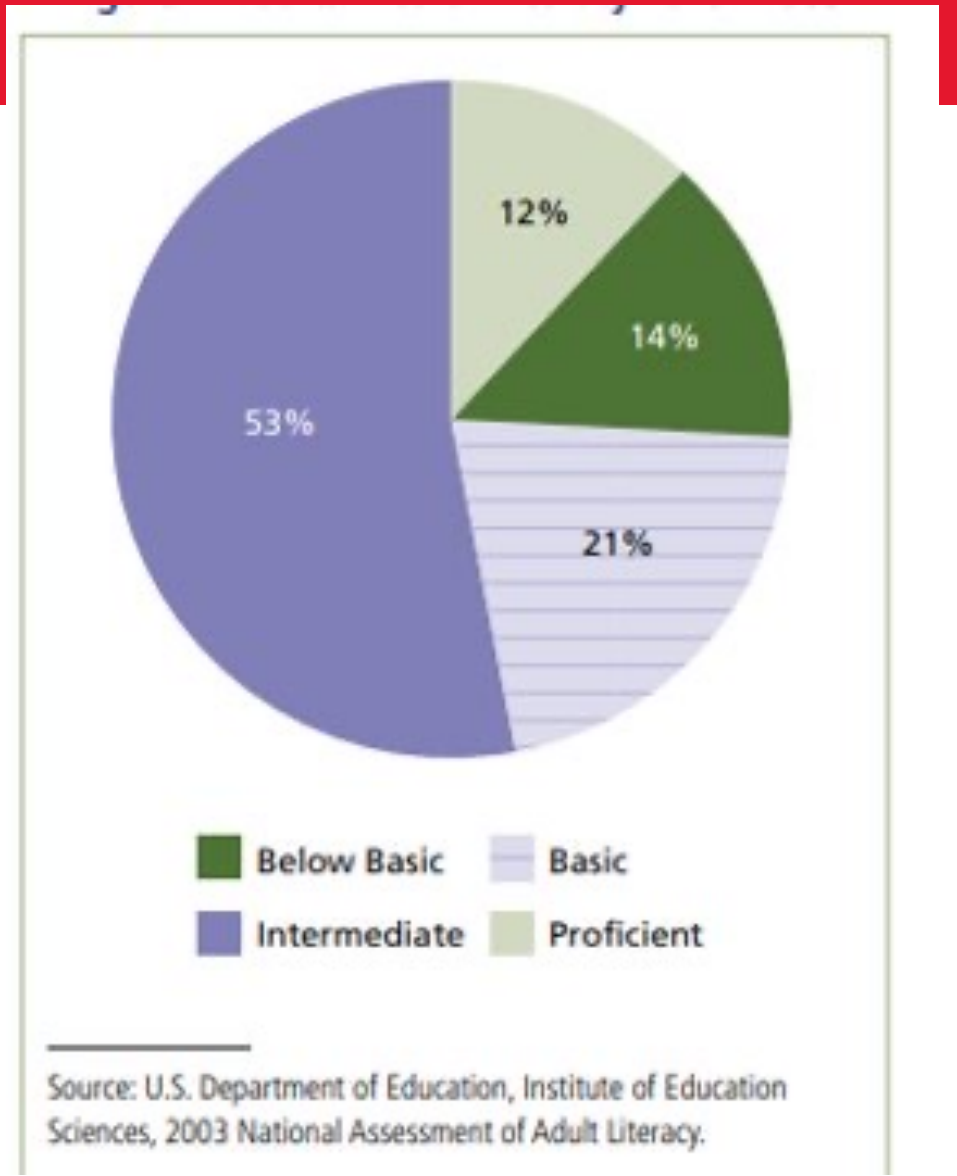
# Issues

- Less likely to be placed on the transplant list (Mullen, 2022, Yue-Harn et al 2020)
- Increased wait time(Mullen, 2022, Yue-Harn et al 2020)
- Decrease transplant rates (Mullen, 2022, Yue-Harn et al 2020)

# Challenges

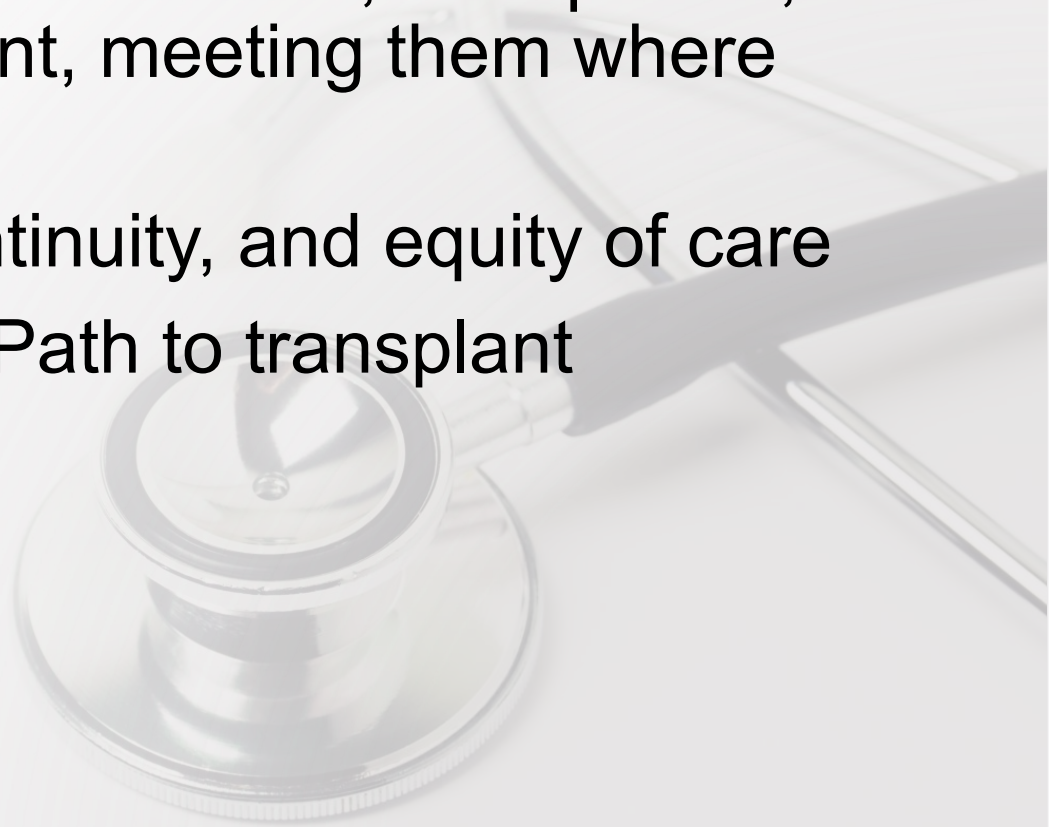
- Access to care and disease prevention
- Healthcare providers (continuity, care teams, communication in preferred language, convenient hours, biases, stereotypes and blame)
- Patient Education: Path to transplant – complicated, potholes/crevasses that lose people
- Quality improvement: collect and analyze own data – see outcomes that address disparities /social determinants of health

# Health Literacy – adults



# Insights – room for improvement

- Health providers – accountable, transparent, see & hear the patient, meeting them where they are
- Increase quality, continuity, and equity of care
- Patient education – Path to transplant



**Thank you for your time!**

# References


- Health Resources and Services Administration. (2023, March). *Organ Donation Statistics.* https://www.organdonor.gov/learn/organ-donation-statistics
- Mullen, J. (2022, November 29) *How our organ transplant system fails people of color.* Association of American Medical Colleges. https://www.aamc.org/news/how-our-organ-transplant-system-fails-people-color
- Yue-Harn, N. et al. (2020, July) *Does Racial disparity in Kidney Transplant Waiting Listing persist after Accounting for Social Determinants of Health?* Transplantation. https://pubmed.ncbi.nlm.nih.gov/31651719/

# Vulnerable Populations and the Kidney Transplant Process

**Silas P. Norman, MD, MPH**

**Alliance Webinar**

**Minority Health Awareness Month**

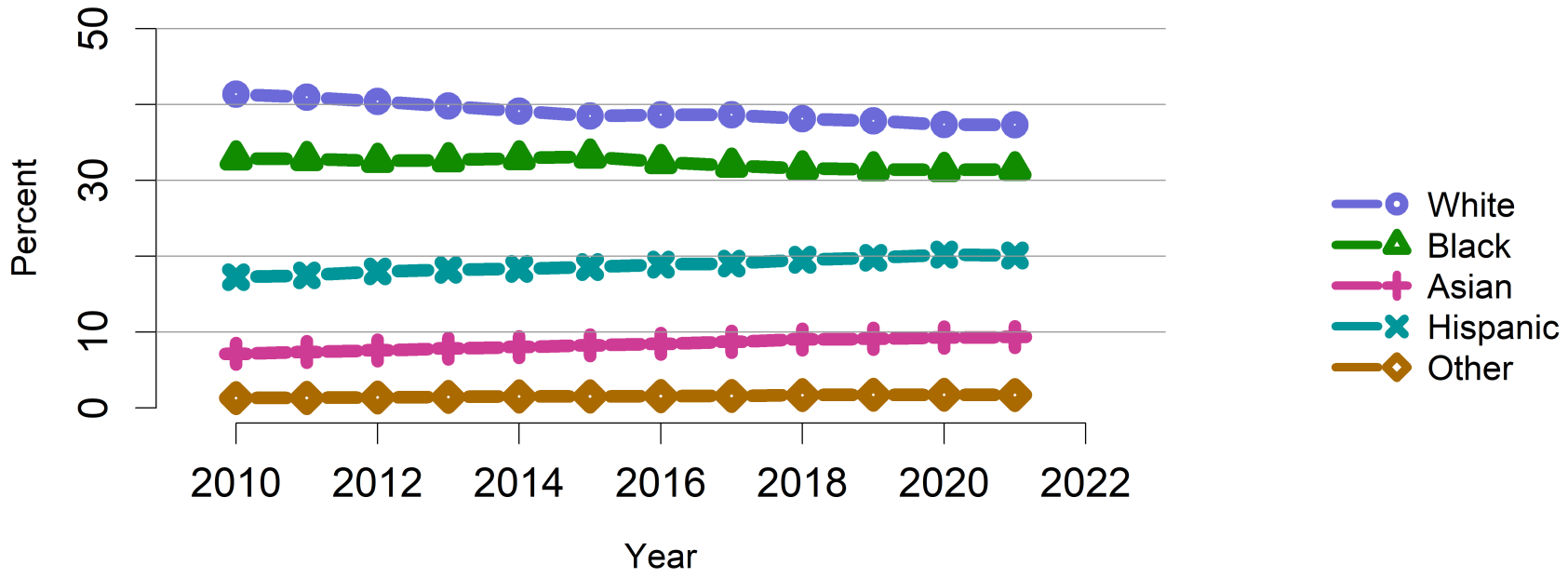
**August 24, 2023**

# Disclosures

- Nothing to disclose

# Kidney Transplant Waitlist by Race/Ethnicity

**Figure KI 5: Distribution of adults waiting for kidney transplant by race**



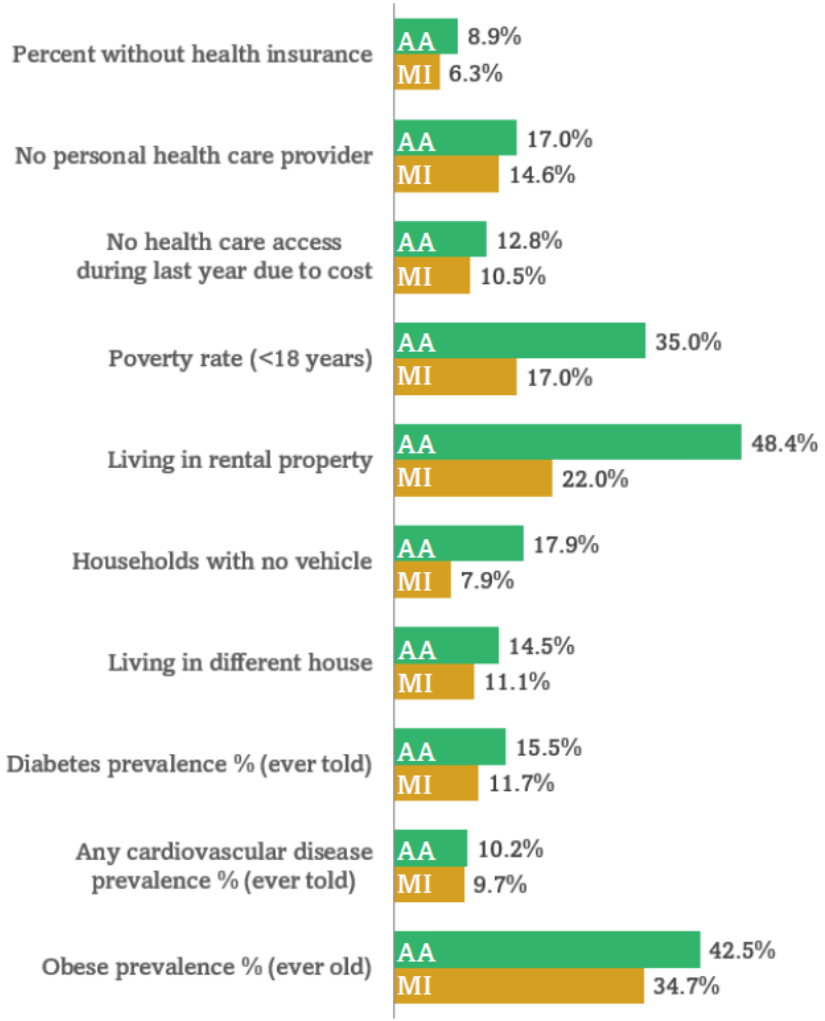

*OPTN/SRTR 2021 Annual Data Report*

# Social Determinants of Health

- The conditions in which people are born, grow, live, work and age that affect a wide range of health, functioning and quality-of-life outcomes and risks
- Resources that can impact quality of life and health outcomes include:
  - Safe and affordable housing
  - Access to education
  - Public safety
  - Availability of healthy foods
  - Local/emergency health services
  - Toxin free environments

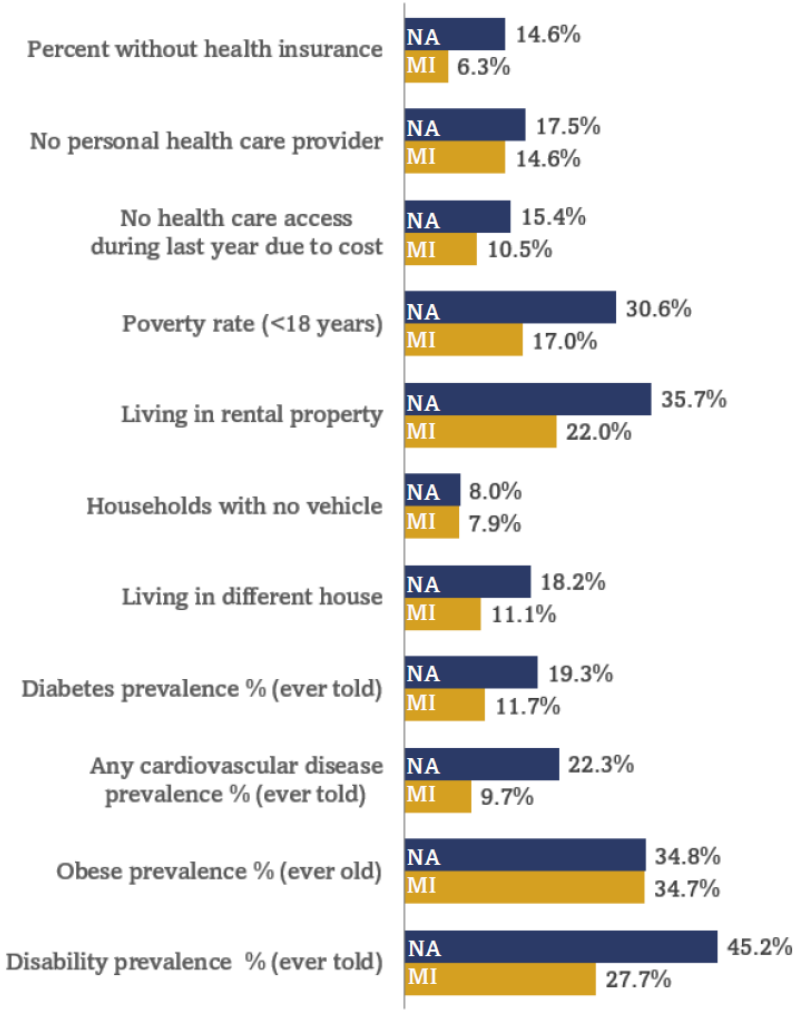
## SELECTED HEALTH DISAPRITIES 2018-2020

### AFRICAN AMERICAN POPULATION OF MICHIGAN COMPARED TO OVERALL STATE POPULATION



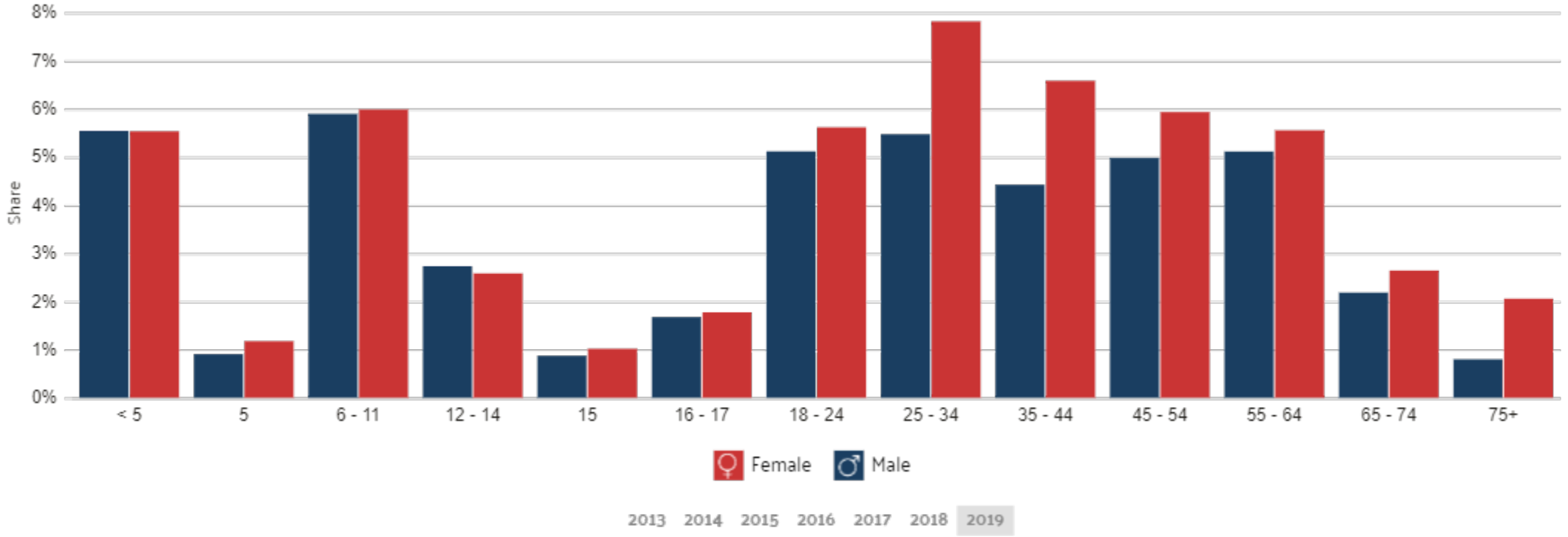

## SELECTED HEALTH DISAPRITIES 2018-2020

### NATIVE AMERICAN POPULATION OF MICHIGAN COMPARED TO OVERALL STATE POPULATION




Michigan families below poverty level 12.9% and 27.5% pay > 30% of income on housing

# Detroit Income and Poverty


DataUSA.IO.

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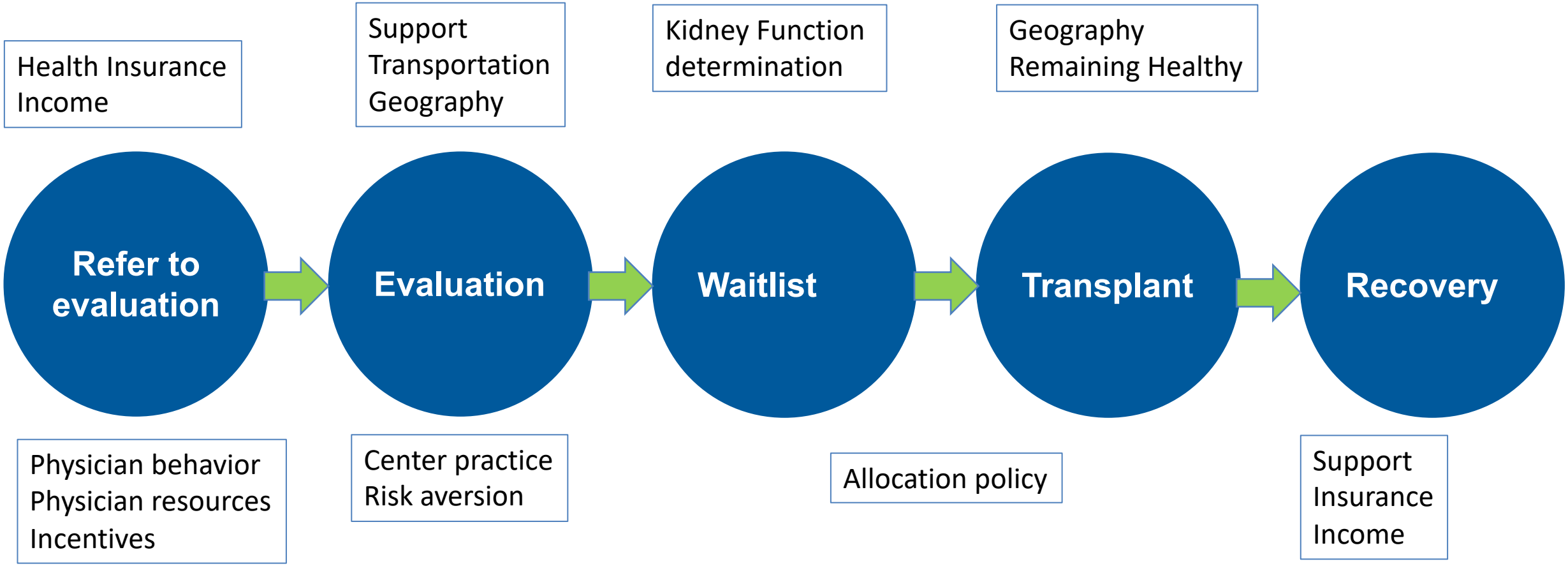
# Differences in Kidney Transplant Access

- Race
  - Compared to their white counterparts, AA are less likely to:
    - Be referred for transplant evaluation
    - Be approved as a potential candidate
    - Complete the transplant evaluation and be waitlisted
- Urban/rural
- Income
- College educated/high school
- Proximity to transplant center

# Steps to Transplantation



# Getting to Transplant Can Be Complicated

- Referral to transplant center

- Assessment by referring provider
  - Interest in transplant
  - Social situation
  - Transportation
  - Medical compliance

- Kidney transplant evaluation
  - Completion of testing
  - Looking for living donors
  - Ensuring support network

**Active on Waiting list**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**Loretta V. Bush,** President & CEO

# Elements of Successful Patient Education Materials

# Three Elements of Successful Patient Education Materials

## 1. Targeting your patient demographic.

To make sure your patient education materials are understood by as many people as possible, you need to understand your target audience and tailor your materials to them. Beyond the medical facts, think about how people will respond to the information.

# Three Elements of Successful Patient Education Materials

## 2. Your Use Of Technology, Or Lack Thereof

- "We physicians often think that we have explained a pathology or treatment very clearly, and inevitably, there will be patients that did not understand or ask questions," writes Marguerite B. McDonald, MD, in her *Ophthalmology Times* piece, "Patient education key to dry eye disease compliance."

- Though for years physicians have walked patients through printed materials, Dr. McDonald says, "we have found the higher-tech options to be a great option that lends our practice an image of advanced technology" while increasing patients' understanding and compliance.

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# Three Elements of Successful Patient Education Materials

## 3. The “Share-ability” Of Your Materials

Successful patient education materials are easy to access after the appointment and easy to share with others. Knowing that high-quality, easy-to-understand information from their doctor is a click away keeps patients from Googling their condition and having to wade through the mixed — or even incorrect — results on their own.

Access to medical information is not the same thing as interpreting, understanding – and most importantly, complying with – quality information and recommendations specific to a patient’s condition. And isn’t that what successful patient education is all about?

# Ways to Improve Patient Education

## 1. Keep It Simple

Avoid using medical terminology and abbreviations. Keeping it simple also means not waiting till discharge to educate your patient. Patient education should begin during the initial assessment and continue until discharge.

Providing education in bite-sized pieces also helps your patient retain more information. Retaining information can be challenging during stressful times but is especially important during these times in a patient's life.


# Ways to Improve Patient Education

## 2. Provide Educational Paperwork in Patient's Native Language

Health literacy rates are not linked with literacy rates. A person may have excellent comprehension skills yet still have difficulty understanding healthcare information to make informed decisions.

Here are a few ways to make patient education easily understood.

1. Relay the information and instructions for the patient clearly.
2. Do not go in-depth into disease processes with a patient who is just learning about the disease.
3. Make sure the information is written down so the patient can review it later as needed.
4. Remember that the patient may be feeling overwhelmed by receiving too much information at once, so keep it simple.

# Ways to Improve Patient Education

3. **Consider a Patient's Communication Differences**

   In addition to patients whose native language is not English, you may have patients with other communication differences. Your patient education strategies should include teaching patients who have sensory impairments.

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# Ways to Improve Patient Education

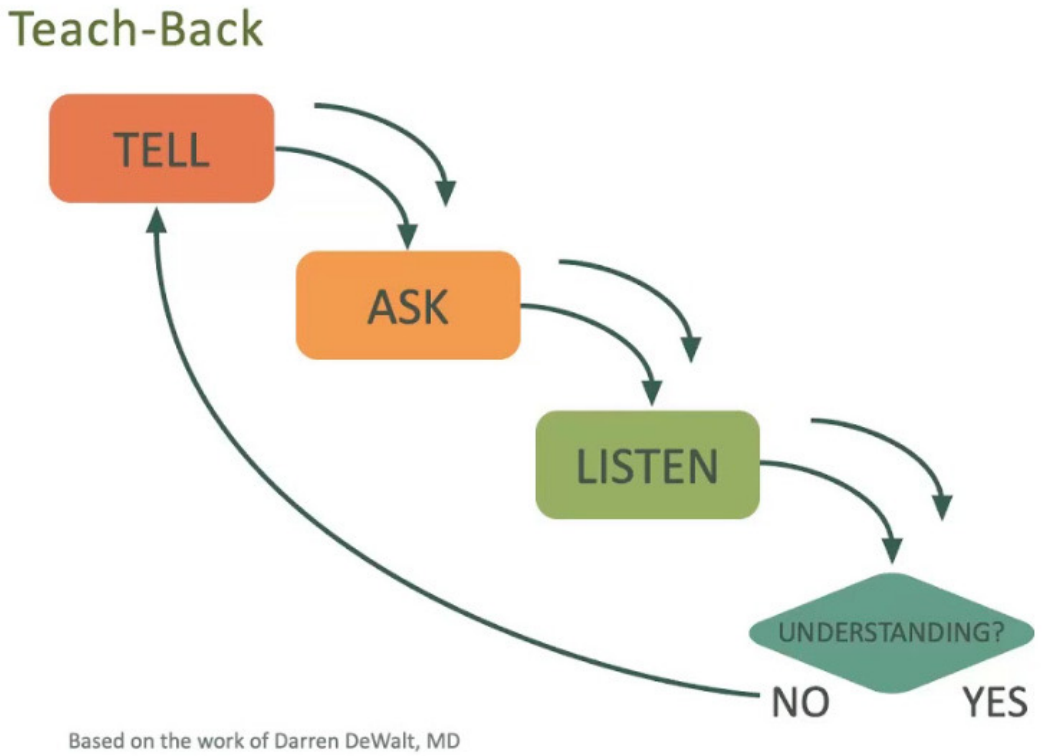
## 4. Use the Teach-Back Method

Despite evidence that the method is effective, many physicians do not use it. They cite time constraints or that patients may take offense as their reasons.

"Make sure the patient understands that you are not trying to test them, but want to understand whether you have explained things so that they understand," Kriebel-Gasparro advises.

Another name for this method is "closing the loop."

Making sure your patient repeats back accurate information ensures they understand and allows you to fill any gaps in communication.




# Ways to Improve Patient Education

## 5. Write Down Important Information

When a patient struggles with pain, nausea, or breathing, they will have difficulty learning new concepts or remembering details. This is how the body responds to distress.

Staff should also give patients phone numbers of people they can contact if they have questions.

It can also be helpful if patients have a family member with them, so someone else can help re-educate the patient if needed.

# Ways to Improve Patient Education

## 6. Promote Health by Continuously Educating Patients

Some of the lifestyle changes patients must make that promote health are challenging. Eating a healthier diet, quitting tobacco products, or reducing or eliminating alcohol will likely not change unless the patient is aware of how these behaviors affect their health and wellness.

Patients may be in a precontemplative stage of change.

During this time, patients are often unaware or poorly understand how their behavior affects their health.

# Ways to Improve Patient Education

## 7. Telehealth Increases Education Opportunities

The role of telehealth grew significantly during the pandemic, and it is here to stay. Clinical staff should develop solutions to promote the use of technology.

Telehealth can increase access to care and patient education. Telehealth offers the opportunity to provide health screenings, patient education, and discuss the importance of vaccinations.

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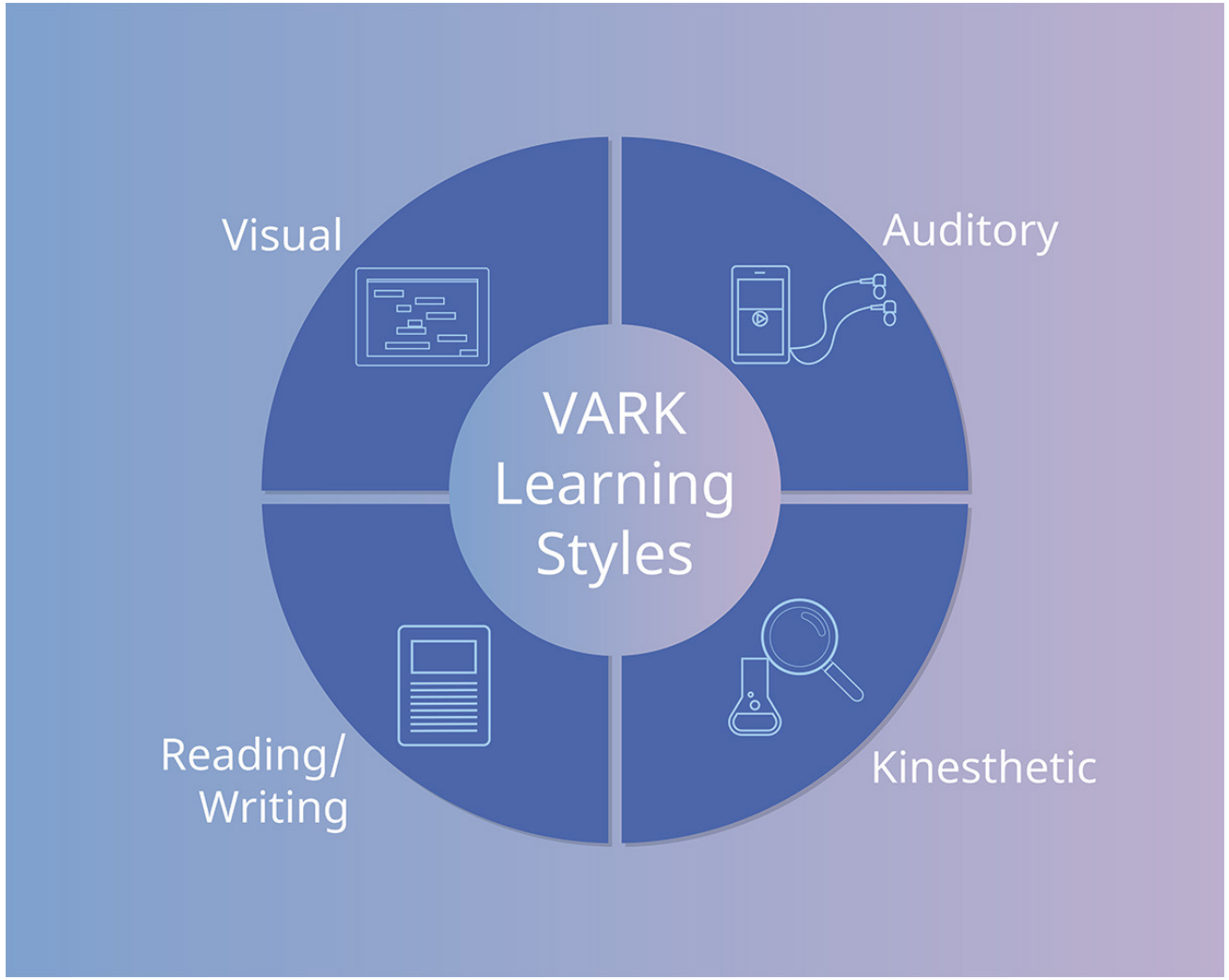
# Ways to Improve Patient Education




8. **Provide Educational Content in Various Forms**

Every person has a learning style. Your learning style increases the amount of information you can absorb and use in your decision-making.

There are four basic learning styles.

1. Visual Learners
   - Absorb by seeing and observing
   - Do best with diagrams, flow charts, pictures, and written instruction
2. Auditory Learners
   - Retain more information from speaking than from written information
   - Can reinforce the information by saying it out loud
   - Benefit from the "teach-back" method
3. Kinesthetic/Tactile Learners
   - Experience things through touch, like handling equipment
   - Might struggle to sit through demonstrations
4. Reading and Writing Learners
   - Can be similar to visual learners
   - Understand content best when expressed with words

# A Special Thanks to Our Presenters

**Loretta Bush**

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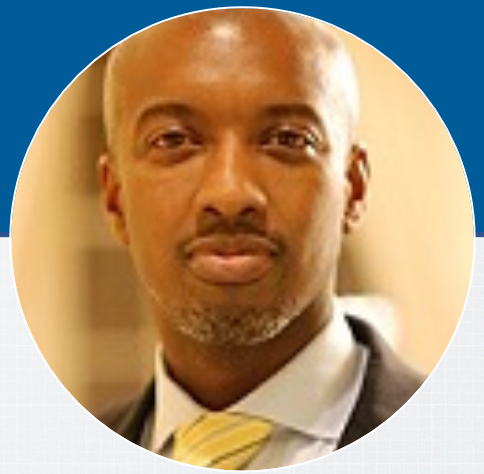

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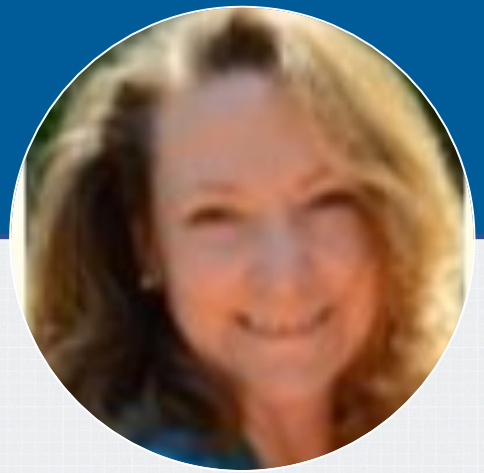

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Q&A
QUESTIONS & ANSWERS