

Teach-back

Prepared by Dr Alison Beauchamp
Health Systems Improvement Unit
Deakin University



The importance of understanding

- The health system places a significant burden on clients to ‘understand and use’ information, e.g.
 - Participation in decision-making
 - Medication adherence
 - Self-management of chronic disease
 - Informed consent



The challenge of effective communication in healthcare

- Effective communication in healthcare remains a challenge:
 - Up to 80% of healthcare information is forgotten immediately
 - 50% of information recalled is incorrect
 - 78% of patients discharged from the Emergency Department did not understand the information they were given
 - Nearly all of these did not realise that they had not understood

Instructions



What can you remember?

What did you understand?



Healthcare information

- Healthcare professionals provide the majority of health information to people
- The way in which we communicate health information affects adherence and health outcomes
- Clients must be able to understand, remember and act on that information.

But whose responsibility is it to ensure someone understands?

How do we know that someone understands

Healthcare workers mostly think they are doing a good job of communicating. In one study: ¹

- 77% of healthcare providers thought they had explained the patient's diagnosis clearly.
 - But only 57% of patients reported that they actually understood.
- 90% of patients said they were not told about medication side-effects
 - But 81% of doctors said they had explained

Teach-back

- Teach-back can help prevent gaps in understanding of health information
- Teach-back involves clients repeating back information *in their own words*
 - telling you what they are going to do
 - can be used at any time or in any context



Teach-back – what is the evidence?

- Improved knowledge and self-care ability in chronic disease. ^{1,2,3,4}
- Reduced medication errors after hospital discharge. ²
- Improvements in inhaler use in COPD. ⁵
- Reduced readmissions by 39% in heart failure. ^{6, 7, 8}
- Health care providers could more easily identify when people did not understand. ⁹

Benefits in healthcare

Benefits for clients

- Understand what they need to do and apply that information
- Become more engaged in self-managing their care
- Actively listen!

Benefits for health workers

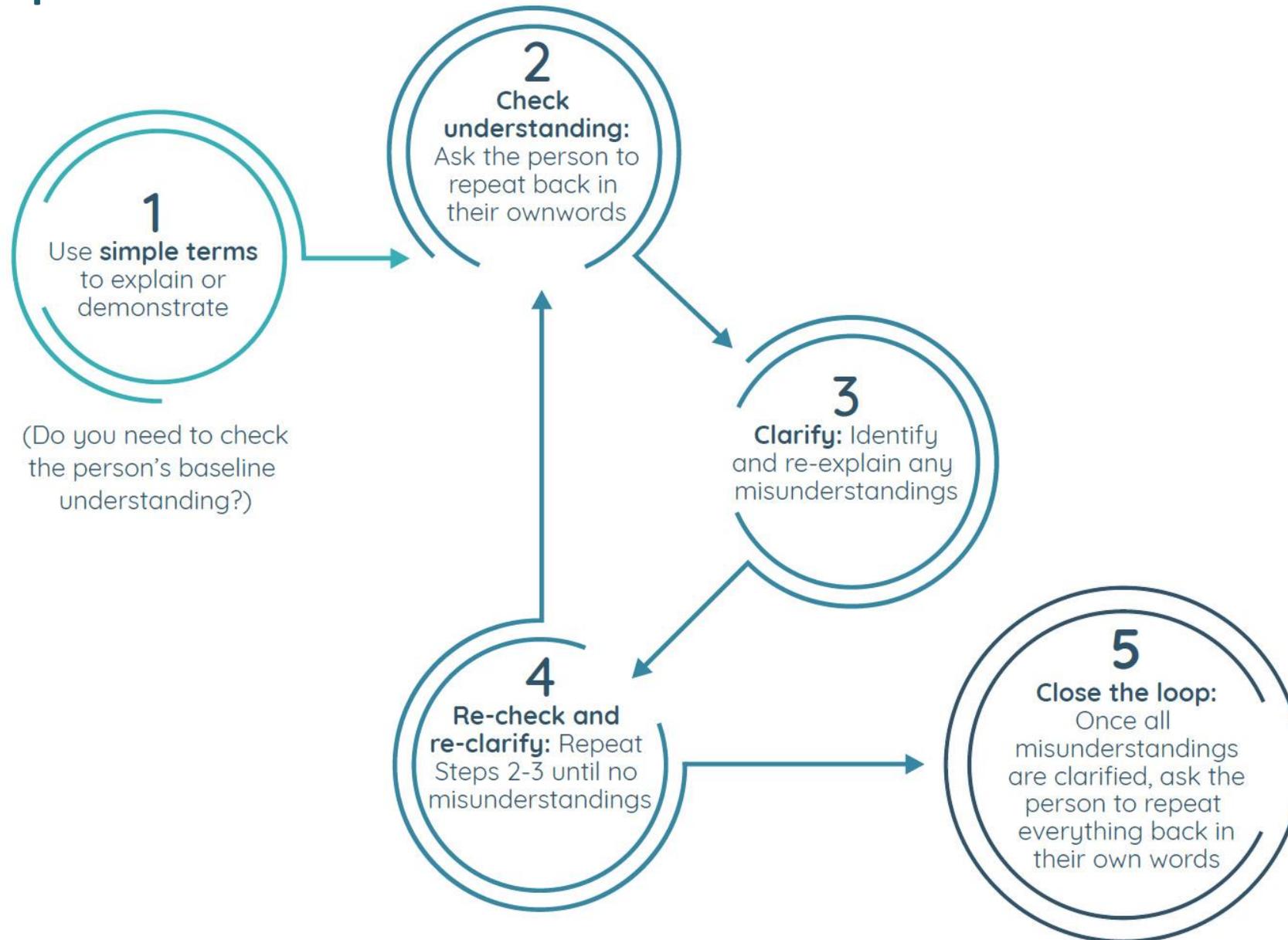
- Insight into how client understands and applies information
- Feedback on communication skills and assumptions

Benefits for the relationship

- Promotes conversation with the client....leads to greater rapport and trust

Teach-back steps in detail

The five steps of teach-back



Before using teach-back

Check the person's baseline understanding

- Do they already know this information
- Are you assuming they have more 'baseline' knowledge than they do?

Example questions:

- Can you tell me your understanding of why you're here today?
- Could you show me what you do?
- Has anyone been through this with you before....can you tell me what they talked about?

Step 1. Use simple terms to explain and/or demonstrate

Minimise medical or other jargon

- Clarify the meaning of words
- Avoid acronyms

Avoid words with multiple meanings

- dressing, needle-stick, negative, diet or stool

Break things down into short statements

Be specific and concrete, not abstract



Using simple terms

Medical Jargon

Simple Term

Benign

Not harmful

Chronic

Long term, ongoing

Hypertension

High blood pressure

Incision

Cut

Inflammation

Sore, swelling

Step 2. Check understanding: Ask the person to demonstrate understanding *in their own words*

- *Avoid making it feel like a test*
- The person becomes the teacher for a brief time
- Framing the question - How would you ask someone to explain back in their own words?



Step 2: Ask the person to demonstrate understanding *in their own words*

- “I want to make sure I explained things clearly. Can you please explain it back to me so I can see whether I did or not?”
- "I want to make sure I was clear about the side effects of taking this medicine. Can you explain back to me the things you need to watch out for?"
- “People often have trouble remembering how to do this. Could you just go through how it will work for you?”



Step 2: Ask the person to demonstrate understanding, *in their own words*:

- Avoid asking ‘yes/no’ questions like:
“Do you understand?”
- Instead, try to ask specific questions about how they will put this information into practice



Step 3: Identify and address any misunderstandings

Actively listen to what the person is 'teaching-back' to you

- Have they misunderstood anything?
- This step allows you to check your assumptions about the person's ability to understand

Provide feedback, focusing on what is not understood

e.g. I haven't been clear in regard to the part about....

- What I meant was that
- I might have confused you a little....



Step 3: Identify and address any misunderstandings

- When re-explaining, don't just repeat word for word what you said the first time around.
 - That may make the person feel uncomfortable that they didn't understand.
- Instead use a different approach.
 - Try a simple drawing,
 - show a model,
 - demonstrate the behaviour (such as showing what mix of food they should aim for on their plate)
- It might be helpful to assess the client's preferred learning style.



Identify your client's learning style

A discussion with a client about their preferred learning style can highlight that education is occurring and it is important to you that they understand

Why use Teach-back?

How do you prefer to learn? Please circle **YES** (I prefer this style) or **NO** (I do not prefer this style) for each learning style below.

Which do you prefer most? If you choose YES for more than one style, please rank those styles by writing a number in the boxes.

1 I prefer this most... **2** followed by this... **3** followed by this...

 Someone talks with you Yes No	 Someone writes the information for you Yes No	 Getting printed brochures Yes No
 Watching Videos Yes No	 Listening to audio recordings Yes No	 Pictures and diagrams Yes No
 Someone shows you how to do something Yes No	 Sharing stories and ideas with others Yes No	 Writing your own notes Yes No

Teach back Learning Preferences Tool for Health Communication
Authors: Pauline Hech, Alison Beuchamps, Sarah Dodson, Janette Burnes, and Michelle Wilson

DEAKIN UNIVERSITY
© 2017

Step 4: Repeat steps 2-3 until misunderstandings are clarified

- Once you have re-explained the information, ask the person to repeat back to you in their own words again.
 - Then provide feedback
 - Identify and address any misunderstandings
- Teach-back is not a 'one size fits all' approach. You will need to be flexible.
 - Some people will need you to use teach-back just once
 - Others will require a much gentler, tailored approach
- Repeat the process of re-checking and re-clarifying up to three times
 - If you have taken learning styles into account and teach-back doesn't seem to be working, consider other approaches

Approaches to support teach-back

What about if the person is still not able to understand?

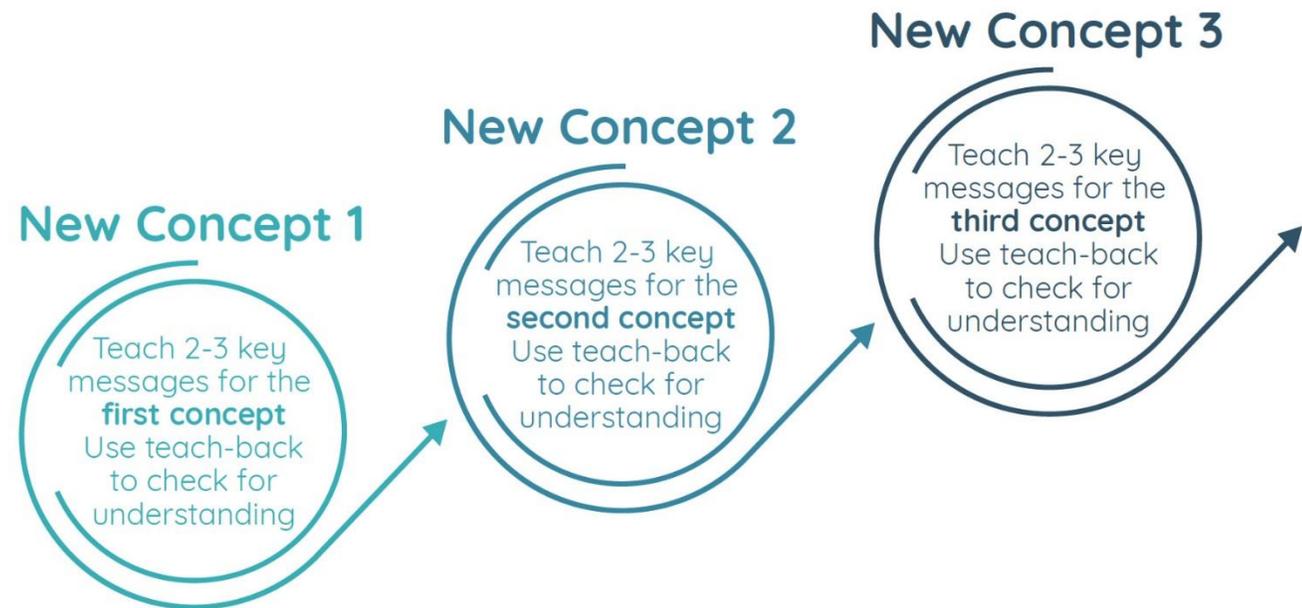
- Are other factors impacting on the exchange? These might include cultural expectations, embarrassment, health status, or cognitive state.
- Does another health worker/ family member need to do the teaching?
- Do they really need to know **all** the information you are providing?
- What resources does the person already have to help them learn about or manage their health? e.g. family, reliable websites, medication aids

Step 5. Close the loop: Ask the person to repeat everything back in their own words again

- To finalise the process of teach-back, ask the person to repeat the whole thing again in their own words.
- Ask them to tell you from the beginning. This helps people to remember everything in sequence.
- If they demonstrate understanding at this stage, provide positive feedback.
- Successful completion of this step can be referred to as **closing the loop** because it is closing off the gap in communication.
- Remember that even if someone 'gets it', this doesn't mean they will remember it. So re-checking next time you see them is a good idea.

Deliver information in bite-sized pieces. Use 'chunk and check'

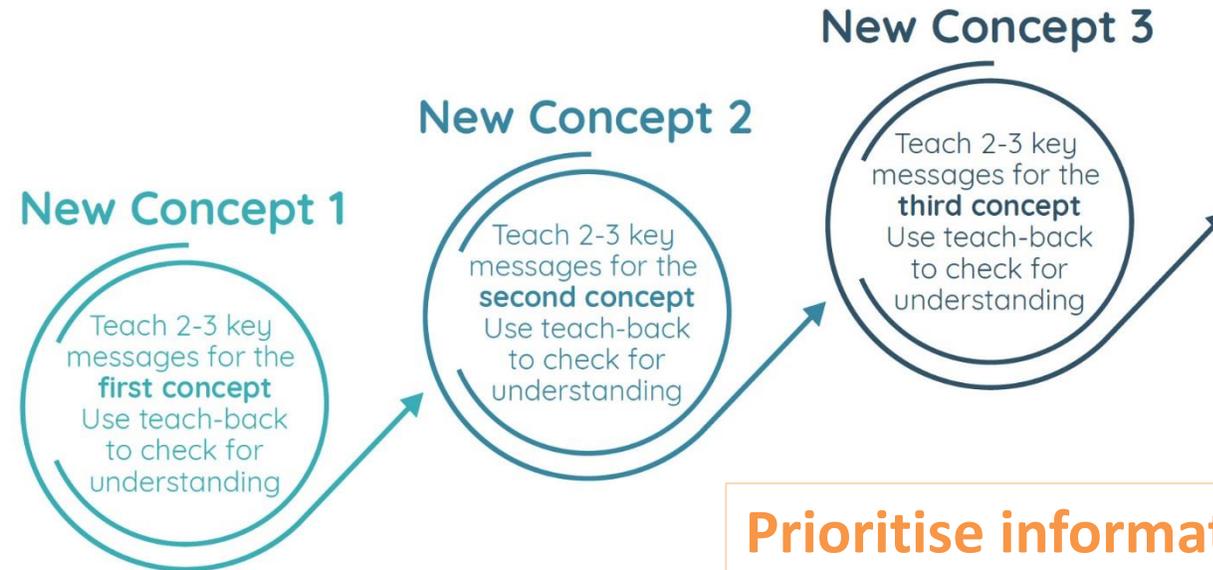
- Often, we try to teach too much at one time.
- Simplify your education by teaching 2-3 main points for the first concept & check for understanding using teach-back...
- Then go to the next concept



Tips when using chunk and check

- Think about what people **really need or want to know**. Most people only remember about three things at any one time.
- Move from points that are the most important for people to know to the least important.
- Be specific and concrete

Putting it all together



Effective client education:

- Don't assume baseline understanding
- Don't use jargon
- Consider learning styles

Prioritise information

- Focus on key concepts
- Most important information first
- Be specific and concrete

Teach-back practice

Find a partner to teach something to and practice 'teach-back'.

You should teach something you know well, but that they have little knowledge of. For example, how to get to your house from here or a favourite recipe

Swap roles so that everyone is able to practice teach-back.

Bibliography

1. Kemp EC, et al, Patients Prefer the Method of “Tell Back- Collaborative Inquiry” to Assess Understanding of Medical Information. The Journal of the American Board of Family Medicine. 2008 January 1, 2008;21(1):24-30.
2. Pigone M, et al. Interventions to improve health outcomes for patients with low health literacy: A systematic review. General Internal Medicine. 2005;20:185-92.
3. Sheridan S, et al. Interventions for Individuals with Low Health Literacy: A Systematic Review. Journal of Health Communication: International Perspectives. 2011;16 Supp 3,.
4. Schillinger D, K, et al. Closing the loop: Physician communication with diabetic patients who have low health literacy. Archives of Internal Medicine. 2003;163(1):83-90.
5. Negarandeh R, et al. Teach back and pictorial image educational strategies on knowledge about diabetes and medication/dietary adherence among low health literate patients with type 2 diabetes. Primary Care Diabetes. 2013 7//;7(2):111-8.
6. Kandula N et al. Literacy and retention of information after a multimedia diabetes education program and teach-back. Journal Of Health Communication. 2011;16 Suppl 3:89-102. PubMed PMID: 21951245.
7. White M, et al Is “Teach-Back” Associated With Knowledge Retention and Hospital Readmission in Hospitalized Heart Failure Patients? Journal of Cardiovascular Nursing. 2013;28(2):137-46.
8. Kornburger C, et al. Using “Teach-Back” to Promote a Safe Transition From Hospital to Home: An Evidence-Based Approach to Improving the Discharge Process. Journal of Pediatric Nursing. 2013 5//;28(3):282-91.
9. Always use teach back. Website accessed 26/4/14
10. Schillinger, D., et al. (2003). "Closing the loop: Physician communication with diabetic patients who have low health literacy." Archives of Internal Medicine 163(1): 83-90.

