

**PLANNED CARE:  
PATIENT  
SELF-MANAGEMENT  
SUPPORT**

**STAFF EDUCATION  
WORKBOOK**

**MASSPRO**

*Making an Impact.*

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I.

### **Exercise #1: Changing Behavior**

Think of a health-related goal that you have tried to achieve in the past, but were unsuccessful.

This goal was: \_\_\_\_\_

Was this goal one you chose or did someone else choose it for you?

\_\_\_\_\_

Why were you unable to achieve it?

\_\_\_\_\_

\_\_\_\_\_

What would have helped you achieve this goal?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## II.

### Interviewing Tips

1. Opening the interview: The tone, demeanor, and physical circumstances in which the interview is conducted can significantly impact the outcome.
2. Questioning style: The manner in which the information is obtained from the patient by the clinician can influence the quality of the information obtained.
  - ✓ Use open-ended questions
3. Using an active listening technique often leads to the clinician obtaining unexpected and important information.
4. Using summarizing and clarifying statements shows the patient that the clinician is listening and is interested in understanding the patient's concerns. These types of statements also ensure accurate information is obtained.
5. Responding to emotions aids in a mutual understanding of the patient's concerns.
6. Paying attention to nonverbal cues provides valuable information.
7. How the clinician closes the interview will greatly influence the patient's understanding of what has taken place during the interview and will influence his/her desire to change health behaviors.

### III.

## Turning Patient Education into Self-Management Support

Self-management support is a counseling technique based on the idea of creating a partnership between the clinician and the patient. One of the principles of self-management is that the patient needs to be actively involved in managing his/her health. Self-management strategies strive to help patients understand their disease, make informed decisions, participate in the management of care, and adapt to life with chronic illness. The ultimate goal is to enable patients to live as normal and full a life as possible.

The following are descriptions of techniques that can be used with patients:

### 1. Establish a Focus

Establishing a focus for the encounter is an important first step in ensuring effective self-management. This is an opportunity for the clinician to learn from the patient about his/her concerns about living with chronic illness. By asking open-ended questions, the clinician can learn about the patient's perceptions and concerns.

### 2. Share Information

Clinicians need to share information about the disease with the patient, emphasizing the concerns that involved healthcare providers may have. This will help the patient make informed decisions on where to focus their efforts. Information should be shared in a non-judgmental manner, reinforcing important issues that may have been raised during the initial discussion.

### 3. Develop Shared Goals

Shared goal setting is a collaborative process that incorporates both the clinician's and the patient's perspective. Using a few open-ended questions, the clinician can identify not only the patient's perceptions, but also the barriers the patient perceives in reaching those goals. For goals to be useful, they must be meaningful to the patient.

### 4. Develop an Action Plan

After collaborative goal setting, it is important to create an action plan with the patient. The action plan includes a discussion of how, what, when, where, and the frequency of the new behavior. It also includes a discussion of the likely barriers to success and some strategizing about how to overcome these barriers. An important step in self-management is rating the patient's confidence for success.

### 5. Use Problem-Solving Techniques

It is important to agree on a follow-up plan. It is usually as simple as setting a specific date to revisit or check-in. The key point is that the patient knows you will follow-up and that he/she will be expected to report on their progress toward the goals.

## IV.

### Agenda-Setting Dialogue

*Clinician:* Your hemoglobin A1c has gone up from 7.5 to 8.5.

*Patient:* That's not good; it is supposed to be less than 7.

*Clinician:* Would you like to spend a few minutes discussing what we might do?

*Patient:* Ok.

*Clinician:* Do you have any ideas about how you might bring your A1c back down?

*Patient:* Well, eating the right foods, getting some exercise, and taking my pills.

*Clinician:* That's right. Let's make a list of some of the choices you have for improving your A1c.

Is there anything on this list that you might like to focus on?

*Patient:* Maybe exercising more.

V.

### Exercise #2: Problem Solving

Pair up with someone next to you. Have one person act as the clinician, the other the patient.

Using this scenario, explore the potential/actual barriers the patient sees in reaching this goal (identified in the Agenda Setting Dialogue).

*Barriers:*

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*Identify Solutions:*

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*Rate confidence:*

How confident are you that you can reach this goal?											
Not											Very
Confident	1	2	3	4	5	6	7	8	9	10	Confident

Why did you choose # \_\_\_\_\_ instead of # \_\_\_\_\_?  
(understanding patient's perspective)

## VI.

### Principles of Motivational Interviewing

- ❑ Explore the person's thoughts and feelings about the good and not-so-good things about the issue (e.g., about being very overweight, about smoking, about drinking harmfully).
- ❑ Use reflective listening: Listen to what the person says, and then summarize it back: (e.g., "So, what you're saying is..." or "So, it seems that on the one hand it's... and on the other it's...").
- ❑ Show respect and willingness to understand the person's perspective. You do not have to agree, but it is important not to show any disapproval, or to blame.
- ❑ Give accurate health information that is relevant to him/her.
- ❑ Help the person clarify his/her personal goals or role in the community - what he/she wants to be, or what he/she wants to do in life. You could ask, "What's important to you?" Then help the person think about whether what he/she is doing now is helping to get there. The person needs to see the conflict or discrepancy within himself/herself.
- ❑ Avoid arguing - this will encourage the person to defend his/her opinion and behavior patterns.
- ❑ At times, the person may be unwilling to consider the effects of his/her behavior. Go with this and acknowledge the person's ambivalence or reluctance. Try another way to move forward with the intervention. It is important not to impose new views or goals, but rather to invite the person to consider new information or perspectives.
- ❑ Encourage the person to generate the proposed solution. This means he/she will be more likely to follow it through. Help the person to set realistic personal goals for making changes.
- ❑ Try to build the person's confidence. The person needs to believe he/she has the ability to achieve his/her goals and change behavior.
- ❑ Ask the person what things he/she may find difficult about changing.
- ❑ Offer your help and support. Encourage him/her to identify others in the community who may be able to offer support (e.g., "Are there other people who have changed too?").

*References:*  
*Miller & Rollnick, 2002*  
*Rollnick & Miller 1995*



**VIII.**

**Exercise #4: Goal Setting**

*After engaging the patient in a discussion about the pros and cons of continuing to eat chocolate, identify a goal to work on.*

This goal will be:

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*Now, set up an action plan in collaboration with the patient:*

How I will do this is: \_\_\_\_\_

I will do this (when): \_\_\_\_\_

I will do this (how often): \_\_\_\_\_

I will need (resources) to be successful in this goal: \_\_\_\_\_

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Follow-up plan: \_\_\_\_\_

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**Notes:**

**IX.**

# **SELF-MANAGEMENT SUPPORT TOOLS**

## IX- A.

### Key Points of Patient Self-Management

- The patient is responsible for day-to-day management. The question is how one manages.
- Every patient with a chronic illness is involved in self-management, whether or not it is improving his or her quality of life.
- “One cannot not manage.” (*Lorig, 2003*)
- Self-management is based on patient perceived problems and concerns.

#### Three Components:

Educating the patient about making good overall health-related decisions ...not just medical decisions. It also means educating patients in managing how the disease affects their roles in life as well as the emotional impact.

1. Medical Management: Taking medications, adhering to a special diet, keeping scheduled MD appointments, etc.
2. Role Management: Maintaining, changing, and/or creating new meaningful behaviors or life roles
3. Emotional Management: Dealing with the emotional impact of having a chronic condition- anger, fear, frustration and depression are commonly experienced.

#### Core Self-Management Skills Patients Need to Learn:

1. Problem Solving:  
Patients are taught basic problem-solving skills which include problem identification, thinking of possible solutions, and solution implementation.
2. Decision-Making:  
Patients make day-to-day decisions in response to changes in their condition. These decisions should be based on having enough and having appropriate information.
3. Utilization of Resources:  
Patients need to know more than just what resources are available. It is important to include how to access (i.e., how to use the phone book, internet, library, etc).
4. Forming Partnerships with Healthcare Providers:  
Patient must be able to report changes in their condition, make informed choices about their treatment, and discuss this information with their healthcare providers.
5. Taking Action:  
Putting together an action plan with short-term goals and helping the patient carry it out is a means to affecting behavior change. Patients should have a confidence level of at least “7”, on a scale of 1-10, in being able to accomplish the plan. Enhanced self-efficacy has a powerful impact on improvements in health status.

## IX- B.

### Talking with Your Healthcare Provider

When you talk with your healthcare provider, it's important to tell him/her what's happening. Use the tips below to talk with your provider.

Before making the call, have the following information with you:

- Your personal health record
- List of your medications
- Pharmacy name and telephone number
- Your current problems/illnesses/diagnoses

#### **S** SITUATION

I am having:

- Pain (explain where pain is felt): \_\_\_\_\_
- Unexplained weight gain
- Difficulty sleeping
- Vomiting
- Harder time breathing
- Other (explain): \_\_\_\_\_
- Weight loss
- Nausea
- Bleeding
- Foul drainage from my wound

#### **B** BACKGROUND

I began to feel this way: \_\_\_\_\_  
(When did it start?)

What makes it better is: \_\_\_\_\_

What makes it worse is: \_\_\_\_\_

How long it lasts: \_\_\_\_\_

It prevents me from doing my usual activities:  Yes  No

My last: Weight \_\_\_\_\_ Blood sugar \_\_\_\_\_  
Temperature \_\_\_\_\_ Blood pressure/pulse \_\_\_\_\_

#### **A** ASSESSMENT

I think I feel this way because (Include any other possible reasons: emotional, stress, finances, new medication): \_\_\_\_\_  
\_\_\_\_\_

#### **R** RECOMMENDATION (by your doctor) Write down your doctor's instructions: \_\_\_\_\_

\_\_\_\_\_

## IX- C.

### Self-Management: Healthy Changes Plan

Are you ready to make changes? Your short-term goals, or self-management goals, are the small changes you can make over a short period of time that will help you reach your long-term goals for managing \_\_\_\_\_.

You and your home health team can work together better and plan the best ways to reach your health goals when you both know your plan for behavior change.

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The healthy change I want to make is: \_\_\_\_\_

I will do this (how):	
When:	
How often:	

The goal I will work on between now and my next visit is:

The steps I will take to achieve my goals are:

The things that could make it difficult to reach my goal are:

This is how I plan to overcome this barrier:

Support and resources I will need to reach my goal are:

How confident are you that you can reach this goal?

Not Confident   1   2   3   4   5   6   7   8   9   10   Very Confident

## IX- D.

### Confidence Scales

We would like to know how confident you are in doing certain activities. For each of the following questions, please choose the number that corresponds to your confidence that you can do the tasks regularly.

#### Exercise Regularly

1. How confident are you that you can exercise without making symptoms worse?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

#### Get Information About Your Disease

1. How confident are you that you can get information about your disease from community resources?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

#### Obtain Help from Community, Family, Friends

1. How confident are you that you can get family and friends to help you with the things you need (such as household chores like shopping, cooking, or transportation)?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

2. How confident are you that you can get emotional support from friends and family (such as listening or talking over your problems)?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

3. How confident are you that you can get help with your daily tasks (such as housecleaning, yard work, meals, or personal hygiene) from resources other than friends or family, if needed?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

## **Confidence Scales cont'd (page 2 of 4)**

### **Communicate With Physician**

1. How confident are you that you can ask your doctor things about your illness that concern you?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

2. How confident are you that you can discuss openly with your doctor any personal problems that may be related to your illness?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

### **Manage Disease in General**

1. How confident are you that you can do all the things necessary to manage your condition on a regular basis?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

2. How confident are you that you can judge when the changes in your illness mean you should visit a doctor?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

3. How confident are you that you can do the different tasks and activities needed to manage your health condition so as to reduce your need to see a doctor?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

4. How confident are you that you can reduce the emotional distress caused by your health condition so that it does not affect your everyday life?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

**Confidence Scales cont'd (page 3 of 4)**

5. How confident are you that you can do things other than just taking medication to reduce how much your illness affects your everyday life?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

**Social/Recreational Activities**

1. How confident are you that you can continue to do your hobbies and recreation?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

2. How confident are you that you can continue to do the things you like to do with friends and family (such as social visits and recreation)?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

**Manage Symptoms Scale**

1. How confident are you that you can reduce your physical discomfort or pain?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

2. How confident are you that you can keep your shortness of breath from interfering with what you want to do?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

3. How confident are you that you can control any symptoms or health problems you have so that they don't interfere with the things you want to do?

Not at all confident    1   2   3   4   5   6   7   8   9   10    Totally confident

**Confidence Scales cont'd (page 4 of 4)**

**Control/Manage Depression**

1. How confident are you that you can do something to make yourself feel better when you are feeling discouraged?

Not at all confident    1    2    3    4    5    6    7    8    9    10    Totally confident

**X.**

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