

Patient Education:

The Informed Patient is an Involved Patient

Develop a comprehensive menu of educational materials to enlighten your patients.

BY ALLAN WALKER

Developing and incorporating a purposeful, comprehensive patient education program to enlighten patients about their medical care is a cornerstone of most successful practices. The availability of meaningful tools and resources to help patients understand their condition and make informed choices related to treatment options and follow-up care is essential to successfully meeting the overall goals and objectives of any professional patient/practice relationship. Creating a complete patient education program is not a small undertaking that can be signed, sealed, and delivered in a short period of time. To the contrary, it is a relatively major task that requires a significant investment of time and effort.

Patient Education Components

A practice that wants to ensure its patients have all the information necessary to making intelligent, informed health care decisions will likely need to incorporate most of the following elements in its patient education program. While every piece of the program puzzle may not fit every practice, a vast majority of the components listed here are fundamental, nuts-and-bolts offerings which should be staples in any successful practice.

Practice Binder: The practice binder should be a mainstay in all practice reception/waiting areas. Although patients will ideally spend minimal time in the reception/waiting area, an attractive, professional binder containing detailed information about the practice, staff, and offerings will garner a great deal of attention from both new and returning patients. This is a perfect opportunity to engage patients in the education process. A convenient, easy-to-use practice binder is a great way to present a wide-range of material, including:

- *A General Introduction/Welcome:* Use this section to proudly announce your mission statement, complete with practice goals, objectives, and philosophy. Say hello and welcome the patient into your practice/family.

- *Specific Practice Information:* Use this document as an opportunity to tell patients all about your practice; to tell your story. Provide a little historical perspective and bring patients up to date. Tell them how long you've been in practice; how long you've served the local area; how many satellite office you have; where they are located; how the practice/service area has grown over the years; what new services and technology you've added; how many employees you have; what they do; how you support the local community, etc. List all contact information and include maps to all your locations. Include photos of your practice if you can. Like the doctor and staff biographies below, you are humanizing the practice; attempting to get the patient to identify with you.

- *Doctor and Staff Biographies:* Patients like to know a little about who is treating them, and not just in terms of professional experience and

expertise. While it is important to include professional highlights (i.e., college, medical school, residency, fellowship, working experience, special training, honors, etc.), it is equally important to include "human" information that patients can (and do) relate to (i.e., where born and raised, married, children, hobbies, civic organizations, etc.). The doctor/staff biographies placed in the practice binder should be interesting mini-profiles that can be read quickly. Save the dull, full-blown professional CVs for special, professional occasions. Include bios of staff members who are highly visible and/or play a vital role in the practice.

- *Menu of Services/Procedures/Offerings:* Compile a list of your most prominent or featured services/procedures/offerings and create a document that includes a brief description of each one. If possible, the descriptions should only be a few sentences long (a solid paragraph) and written in terms patients will understand; too much medical jargon at this point will only serve to add to any

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confusion or misunderstandings the patient may already have. Somewhere on the document should be a “call-out note” communicating that longer, more detailed information about each service/procedure/offering is available through the practice. Each document might contain a couple of related “frequently asked questions.”

• **How to Talk to Your Doctor Tips:** Many patients are intimidated by doctors and medical settings. They tend to think the worst and want the doctor to take the lead on everything. Take some of the edge off the encounter by preparing a document that relays the message that patients who take an active role in their health care will help ensure the best possible care. Note in the document that the doctor expects the patient to ask questions and seek clarification on treatments, options, etc. The patient should also know the doctor wants to be informed of all current health care details.

• **Specialty-specific FAQs:** Anticipate what the patient will want to know. It is likely you already have a list of the most frequently asked questions. This list might be in someone’s head at the moment, but you know what questions are asked repeatedly by your patients. Commit these questions – and answers – to paper and place it in the practice binder. Like almost everything else, this document can stand alone and serve as a handout as needed.

Practice Brochure: Your practice brochure is a mini practice binder, except that it is portable and designed to be passed among family and friends. It is a great marketing tool, as well as an educational resource. Your practice brochure should always be current, containing as much up-to-date information as possible. It should contain a brief history of the practice, a list/brief description of services/procedures/offerings, a brief biography and photo of each doctor, and clear directions and contact information for all locations. Full-color practice brochures can be costly to produce and need not be reprinted every time a relatively minor detail changes; however, they should be reviewed at least annually and replaced when needed.

Posters and Placards: Strategic placement of collateral materials throughout the practice is a good way to

educate patients and spark their interest in targeted services/procedures/offerings. These types of materials are frequently available through professional organizations and vendors.

Practice Newsletter: While a patient newsletter can be an excellent means of educating patients, it is also a major undertaking that can significantly impact practice time and resources. Producing a patient newsletter requires an in-house champion who understands marketing and production of printed materials. The champion must be given adequate resources to do the job. Practices that produce in-house patient newsletters generally adopt a quarterly or semi-annual print schedule. Some practices are producing electronic versions, although consistent gathering of patient e-mail addresses is a challenge (many older patients still do

not use the Internet).

Fact Sheets: Slick, detailed, one-page fact sheets can be an excellent way to target patients who have a more in-depth need-to-know. Limiting them to one page ensures the patients are not overwhelmed and will likely take the time to read them. Avoid making the pages too text intensive; adding a high resolution photograph or drawing/illustration will help make the document more readable and pleasant to the eye. Topics that lend themselves to a fact-sheet style include:

• **Services/Procedures/Offerings:** Expanding on the brief, one-paragraph descriptions included in the practice binder, these documents should be limited to one page (approximately 500 to 600 words) and include a photograph or drawing illustrating the offering. Again, try to write these descriptions in layman’s terms, although these are designed to convey more detailed information and will likely be a bit more technical out of necessity. These documents will be suitable as stand-alone pieces that can be used as a handout for specific patients, placed in a patient-accessible wall rack in the reception area, or included in a special section in the practice binder. They can also be mailed to targeted patients. They could take the form of a folded brochure. Content for these docu-

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ments can be obtained from a variety of sources, including professional organizations and vendors. Of course, a talented doctor or staff member could author original pieces, if so inclined.

- **Medication Facts Sheets:** Medication (and post-procedure) compliance can be a major issue, negatively impacting treatment success in a large number of cases. Most patients would welcome with open arms a clear, simple instruction document detailing their follow-up treatment and medication plan. Never confuse patients by including more than one medication/treatment explanation on one page; they could easily follow the wrong instructions.

- **Payment/Billing Fact Sheets:** Who totally understands the payment/billing process? Hopefully, your billing staff does, but they might be the only ones. Producing a document that clearly spells out your payment/billing process, including Medicare/Medicaid, insurance, and other third-party payers, would go a long way to minimizing or even eliminating financial issues. This document could also address any payment plans you might offer. Include the name and contact information for your billing supervisor/department.

- **Helpful Resources:** Compiling and maintaining a list of places (primarily on the Internet) to find quality, pertinent information that would be of interest to patients can be helpful, especially if you limit it to sites such as national academies/societies, state and local organiza-

tions, and established general medical sites such as WebMD.com, familydoctor.org, etc. Vendor sites frequently include good patient education materials and should be included in any list.

- **Multimedia Presentations:** An increasing number of practices offer multimedia presentations in their waiting/reception area. Many leading practices will have a “welcome” video/CD/DVD that relays information similar to that which is included in the practice binder, website, and/or brochure. The presentation generally loops automatically, playing the same information over and over again. Obviously, this can create problems if your patient wait times are excessive (better fix that problem now!). A professionally produced 15-minute production meets the needs for most practices. Some larger practices go so far as to have multiple stations with monitors and earphones, showing procedure-specific presentations.

- **Referral Information:** Rather than just sending your patients to another professional for related care, it would be nice to have a referral form which contains pertinent information about the doctor and/or practice. This could be a tear-off form that has practice/doctor information on one side and a map and driving instructions on the other. Anything you can do to make the process as seamless as possible will be appreciated by patients and referral sources alike.

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Select Your Patient Education Team Carefully

Similar to other strategic planning initiatives, developing a comprehensive menu of patient education materials will require formation of a team, identification of goals and objectives, and creation of a plan complete with assignments, accountability, and deadlines. Critical to the success of this initiative is the designation of a practice “champion” who will take ownership of the project and serve as the team leader. Choose this person carefully; nothing will kill the project quicker than misplaced responsibility, especially at the top of the leadership chain. This person should have demonstrated leadership abilities in the past and have a detail-oriented, patient-based personality. It would also be helpful, but not mandatory, if this person had some marketing inclination, as well as

an “artistic” eye which will help in producing professional quality materials. The champion need not have all these qualities – the strong leadership and commitment levels are required – so look for some of the other helpful traits when choosing additional team members.

It is imperative that this team be given an appropriate amount of time and resources to complete the assignment. The team will need to generate an action plan that includes locating all patient education materials currently in use or adaptable for future use, identifying holes in the program, and determining how best to design, create, and produce necessary new tools and resources in a timely manner ... all while fulfilling their regular job descriptions. This project will fail if the team is not allocated adequate time and resources.

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Direct Mail: Although most direct mail campaigns are marketing/advertising related and designed to generate new business, they can fill a patient education role on occasion. For example, you might send information to a patient with a specific diagnoses when there has been a new development related to that diagnoses (i.e., new technology/training, innovative treatment approved, new medical data/findings, addition of a new sub-specialist at the practice, etc.).

Website: Your website (you have one, don't you?) is likely based on the same information contained in your practice binder, brochure, and multimedia presentation. Today, people get their information in so many different ways in today that you need to cover all your bases. A website serves not only as another way to get the word out, but it also shows you embrace technology. While elderly patients may not use the Internet with regularity, a large and important population segment does, making

it important to be a part of it. It is highly unlikely you will design, build, and maintain you own website; you will be looking outside for assistance, which is readily available from many sources for a variety of fees. You don't have to spend an arm and leg for a website, but an amateurish site can be a real turnoff. Make sure you get references and see examples when hiring a web developer/designer.

Success Factor

Do not put patient education in your too-hard-to-do-box. While developing and implementing a comprehensive patient education program for your practice is a major undertaking, it is critical to your success and can be accomplished in stages. Once you commit to focusing on patient education, treat it like any other strategic initiative and create a working action plan that will inspire ongoing progress, yet allow your practice to continue to function at a high level.

For more information, contact BSM Consulting at 1-800-832-0609.