

# **AARC Clinical Practice Guideline**

## **Training the Health-Care Professional for the Role of Patient and Caregiver Educator**

### **THCP 1.0 PROCEDURE:**

The process of enabling the health-care provider (HCP) to facilitate the patient and/or caregiver's acquisition of knowledge, skills, understanding, and positive attitudes related to the patient's medical condition and its management.

### **THCP 2.0 DESCRIPTION/DEFINITION:**

**2.1** The process of training the HCP as patient and/or caregiver educator includes addressing and assuring adequate knowledge, skills, and attitude mastery for patient rapport and affective teaching.(1) (HCP is defined as any health-care professional involved in the care of the patient).

**2.2** The ultimate goal of the process is to provide education to the patient and/or caregiver that equips him/her with the knowledge, skills, and attitudes to better understand the patient's condition and to more fully participate in health care. (The caregiver is defined as any person who plays a significant role in the patient's life. This includes individuals who may not be legally related to the patient). This allows a cooperative effort between the health-care provider and patient.(1,2)

### **THCP 3.0 SETTING:**

Any location in which HCPs participate in or can be prepared for patient and/or caregiver education and in which resources are available, including, but not limited to:

- 3.1** acute care hospitals;
- 3.2** outpatient treatment or rehabilitation centers;
- 3.3** physicians' offices;
- 3.4** extended care or skilled nursing facilities or the patient's home;
- 3.5** educational seminars, workshops, and symposia;
- 3.6** postsecondary technical schools, colleges, and universities.

### **THCP 4.0 INDICATIONS**

**4.1** The presence of HCPs who must participate in education of patients and caregivers who need:

**4.1.1** knowledge concerning condition or care;(1)

**4.1.2** skills to participate effectively in care;(1)

**4.1.3** proper attitude or motivation to participate effectively in care.(3)

**4.2** Evidence that the knowledge, skills, or attitudes of HCPs are inadequate to convey the necessary information or demonstrate skills to patients, including evidence of:

**4.2.1** lack of knowledge of effective educational principles and practices specific to patient's or caregiver's age and development;(2,4-9)

**4.2.2** inability to accurately assess patient's or caregiver's educational needs;(2,7)

**4.2.3** inability to prepare educational objectives and establish instructional goals;(1,7,10)

**4.2.4** lack of knowledge of education methods to accomplish objectives and meet goals;

**4.2.5** inability to prepare patient or caregiver education materials;(11-13)

**4.2.6** inability to offer supervised practice of skills;

**4.2.7** inability to assess outcomes of patient or caregiver education;(2)

**4.2.8** inability to appropriately offer feedback to patient or caregiver;(14,15)

**4.2.9** inability to modify educational efforts as the result of learning outcome assessment and feedback from patients.(5,6,10)

#### **THCP 5.0 CONTRAINDICATIONS:**

There are no contraindications to HCP training to offer patient and/or caregiver education when a need exists.

#### **THCP 6.0 HAZARDS/COMPLICATIONS:**

Inadequate training of the HCP can lead to harm to the patient or result in the patient's inability to participate in his/her health-care management.

#### **THCP 7.0 LIMITATIONS OF METHOD:**

The effectiveness of educating the HCP to offer patient and/or caregiver education may be limited by:

**7.1** Limitations in the HCP:

**7.1.1** unreceptive or incapable HCP;(2,6,7)

**7.1.2** lack of educational preparation;(2,7)

**7.1.3** absence of interdisciplinary cooperation;(2)

- 7.1.4** inability to deal with age or development-specific learning patterns;(2)
- 7.1.5** inadequate knowledge of cultural or religious practice that may affect educational process;(2)
- 7.1.6** inability of HCP to communicate effectively.
- 7.2** System limitations:
  - 7.2.1** inadequate time to prepare the HCP due to other patient care responsibilities;
  - 7.2.2** inadequate space, energy, or financial resources;
  - 7.2.3** insufficient or unavailable faculty and preceptors for HCP training program;
  - 7.2.4** inconsistency in information provided to the HCP;
- 7.3** Limitations in the patient or caregiver:
  - 7.3.1** absolute refusal to participate in education;
  - 7.3.2** lack of positive attitude or motivation to participate;(5,6,16)
  - 7.3.3** lack of basic education necessary to benefit from instruction;(5,8,10)
  - 7.3.4** perception of cultural conflict or presence of a language barrier.(2)

#### **THCP 8.0 ASSESSMENT OF NEED**

All HCPs who have patient care contact and opportunity to provide patient and/or caregiver education should be assessed for training as education providers(2) by

- 8.1** observation of HCP in patient education setting to determine if needed skills are present;
- 8.2** verbal questioning by specialist as to knowledge of topics being taught.

#### **THCP 9.0 ASSESSMENT OF OUTCOME:**

- 9.1** Evidence by HCP evaluations that the training has met the goals and objectives for preparing patient and/or caregiver educators:
  - 9.1.1** verbal or written evaluation;
  - 9.1.2** observation of HCP in teaching setting.
- 9.2** The desired outcome of training the HCP as a provider of patient and/or caregiver education is also assessed by meeting the goals of patient and/or caregiver education:
  - 9.2.1** knowledge gained by the patient or patient care provider;(10)
  - 9.2.2** skills mastered by the patient or the patient care provider;(2,14)
  - 9.2.3** positive change in patient outlook and/or attitude;(6)
  - 9.2.4** compliance of patient or caregiver in following the care plan.
- 9.3** Long-term assessment through departmental or institutional continuous quality improvement indicators or other quality monitoring

system.

### **THCP 10.0 RESOURCES:**

**10.1** Written materials

**10.2** Audiovisual materials

**10.3** Anatomic models, mannequins, patient care equipment

**10.4** Computer and software

**10.5** "Appendix--Essentials of the Teaching Process" in Clinical Practice Guideline "Providing Patient and Caregiver Education"(17)

**10.6** Personnel

**10.6.1** Education specialists with training in patient education

**10.6.2** Training specialists in general adult education

**10.7** Education seminars and clinical seminars with emphasis in patient education

**10.8** Formal 'for-credit' patient and adult education courses provided by postsecondary institutions of learning

### **THCP 11.0 MONITORING**

**11.1** The monitoring of the process of training the HCP as educator of the patient and/or patient care provider should include evidence of:

**11.1.1** classes and inservice training for HCPs as educators;

**11.1.2** availability of written and audiovisual materials, computers, and software for use with computers for training HCP as educators;

**11.1.3** HCP evaluation of training effectiveness.

**11.2** Patient and caregiver education directed at meeting the goals and objectives of the education plan

### **THCP 12.0 FREQUENCY:**

**12.1** Spontaneous: as often as the HCP has contact with patients or caregivers requiring education for which the HCP is not prepared. (This should take place outside of patient care area.)

**12.2** Scheduled: a formal HCP-as-educator training program. (This may be included in orientation or as a skills laboratory at least once per year.)

**12.3** As available: training programs offered by external sources such as professional associations and accrediting agencies.

### **THCP 13.0 INFECTION CONTROL:**

The presence of transmissible infection and/or the presence of compromised immunity in the patient should be taken into consideration when patient and/or caregiver education is undertaken. Appropriate steps to protect patient, caregiver, health-care provider, and trainer should be included in the education plan.

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