### Skill Competency Checklist

#### Patient Education: Implementing Appropriate Teaching Methods

<table>
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<tr>
<th>Standard Met/Initials</th>
<th>Competency Areas</th>
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<td><strong>Prerequisite Skills</strong></td>
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<td>Understanding that implementing appropriate teaching methods (also called teaching measures and teaching strategies) in the healthcare setting refers to the process of initiating patient education interventions that have been previously identified and formulated in an individualized education plan for a specific patient and his/her family members</td>
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|                       | Knowledge that teaching methods are implemented after performing the following four steps:  
  • Determination of the patient’s readiness to learn  
  • Assessment of the patient’s learning needs and abilities  
  • Selection of an appropriate setting for patient education  
  • Determination of appropriate patient teaching methods |
|                       | Knowledge that teaching methods are implemented in all healthcare settings in which patient education is performed, including inpatient, outpatient, and home care settings |
|                       | Understanding that the nurse is one of several types of healthcare professionals who can implement teaching methods, and that these duties cannot be delegated to assistive staff members |
|                       | Knowledge that implementation of teaching methods can be performed as one-on-one education or group education sessions and can also involve use of a variety of strategies, including health Web sites, computer/electronic instruction, analogies, role play, and simulation |
|                       | Competence in nursing skills/areas of nursing knowledge required to implement teaching methods, including the ability to  
  • build patient rapport  
  • communicate clearly |
Knowledge that prior to implementing a teaching method it is important to verify that the method meets the patient’s needs related to his/her •cultural beliefs •primary language •health literacy level •sensory impairment (e.g., visual or hearing impairment) •preferred learning style •special learning needs or barriers (e.g., impaired cognition or learning disabilities, physical limitations, psychosocial and/or emotional concerns, financial issues)

Understanding that implementing patient education is a step in influencing or altering a patient’s behavior •Knowledge that teaching methods that blend with the patient’s way of thinking or processing information can promote positive behavior changes •Understanding that collaborating to establish mutually agree on education goals with the patient when implementing teaching –defines expectations of the teacher (the healthcare provider) and learner (the patient and/or family members) –provides a means of measuring outcomes and evaluating the success of the teaching

Knowledge that when implementing teaching methods it is important to meet with the patient in a setting previously identified as appropriate for the educational intervention

Understanding that occasionally a patient is resistive or even hostile to the learning process, including efforts to implement teaching methods •Competence in performing the appropriate interventions if a patient is resistive or hostile, including initiating patient and/or family member discussion of reasons for patient resistance, concluding current educational session and rescheduling, and bringing a nurse colleague to a subsequent meeting for assistance

**Preparation**

Reviews facility protocols specific to patient teaching, particularly about implementing appropriate teaching methods

Becomes familiar with organization-wide and unit-specific practices for implementing appropriate teaching methods for use in patient education

Assesses the setting to identify any needed modification and adjusts the teaching plan or methods, as appropriate

Verifies availability of the following supplies: •Educational materials (e.g., written information, video presentations) identified as appropriate for meeting the patient’s assessed needs
**Procedure**

Assesses patient/family learning characteristics (e.g., readiness to learn, preferred learning style, learning priorities, learning needs and desires, and learning barriers), knowledge deficits, and anxiety about the implementation of teaching methods; provides emotional support and additional information, as appropriate

- Determines if the patient/family requires special considerations regarding communication (e.g., due to illiteracy, language barriers, or deafness); makes arrangements to meet these needs if they are present
  - Uses professional certified medical interpreters, either in person or via phone, when language barriers exist

Encourages rapport to promote patient/family receptivity to learning

- When presenting the education, employs interpersonal skills as well as effective communication techniques
- Whenever possible, sits on a chair during an educational session to be eye level with the patient
- Avoids conveying a patronizing attitude when educating the patient
- Does not use complex technical language or medical terminology unless the patient has a medical background and is interested in detailed information
Implements the teaching methods involving the patient’s family as appropriate and/or as preferred by the patient
• Limits the implementation phase to a few minutes and schedules serial education sessions extending over a period of days or months, as appropriate
• Helps the patient to identify goals, behavioral objectives, and expected outcomes for the teaching plan
  – Writes the patient’s goals, behavioral objectives, and expected outcomes for review and to obtain the patient’s agreement; uses prepared patient education forms for this purpose, if appropriate
• Presents the health information to the patient in the order of its importance to the patient or as described in the patient’s individualized teaching plan
• Uses teaching strategies that best match the patient’s preferred learning style and his/her learning needs
• Enhances patient retention of the health education by
  – Encouraging questions and discussion throughout the health education presentation to enhance and reinforce the patient’s knowledge and understanding of the information presented
  – Planning for short, frequent education sessions
  – Summarizing the main points of the presentation at the end of each session
  – Providing a written plan for education to the patient at the end of the first education session to reinforce the information covered and to increase the likelihood that the patient will follow the educational instructions after discharge to home
• Summarizes the actions to be taken by the patient (e.g., adhering to a prescribed diet regimen or returning for future education sessions) in the written plan for education
  – If the patient must learn new techniques or procedures, provides encouragement during the education session by telling him/her that it takes time and practice to gain confidence and successfully perform new skills
• At the end of each education session, negotiates the time and date of the next session with the patient

**Post-Procedural Responsibilities**

Requests referral to other healthcare agencies and resources (e.g., social work, outpatient physical therapy, mental health services), as appropriate

Evaluates and revises the written plan for patient education, as necessary

Performs the following steps to promote long-term continuity and consistency of patient education:
• Enters the plan for education in the patient’s medical record
• Provides a copy of the plan for education to the treating clinician, consulting specialists, and other healthcare clinicians (e.g., home healthcare clinicians)
• Provides the patient with written information, if available, to reinforce verbal education, including written information on the next scheduled educational session
If the patient is cared for at home or will be discharged to home after implementing teaching methods, explains how the family can contact the treating clinician if questions or problems arise.

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<th>Updates the patient’s plan of care, as appropriate; documents the following in the patient’s medical record, and communicates any concerns with the multidisciplinary healthcare team so that information can be reinforced and the learning plan can be continued or modified accordingly:</th>
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<td>• All patient/family education provided including specific teaching/learning strategies implemented</td>
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<td>• Assessment findings regarding readiness to learn, preferred learning style(s), learning needs/desires, and learning priorities of the patient/family</td>
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<td>• Any identified learning barriers to learning and methods used to help overcome these barriers</td>
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<td>• Patient/family response to learning, including demonstrated level of understanding and/or ability to perform necessary self-care skills</td>
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<td>• Plan for continuation of education, including whether or not specific information should be reinforced or taught using a different teaching method</td>
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