

Cardiovascular Care Teams Put Patient-Centered Care into Action

By Suzanne Hughes, M.S.N., R.N.,

Last summer, Robinson Memorial Hospital in Ravenna, Ohio, recruited computer-savvy teens and college students to work in the hospital's library, helping older patients navigate the Internet for reliable health information. The young volunteers showed a video created by the National Library of Medicine, handed out a vetted list of health Web sites (including CardioSmart), and then sat side-by-side with the seniors at computer terminals, helping them develop expertise in an unfamiliar world.

This was an innovative example of patient-centered education in a rural part of the country where not everyone has a computer at home. This example, in which patients were given the tools to be active partners in their own care, provides a good example of patient-centered care, which includes having a very strong relationship between the provider and patient.

The concept of educating patients to partner in their own care fits hand-in-glove with the theme ACC President **Alfred A. Bove, M.D., Ph.D., F.A.C.C.**, has chosen to highlight during his term, which he has labeled *The Year of the Patient*.

Cardiac Care Associates across the country are directing or playing a central role in patient-centered programs. These include heart failure clinics that teach patients to monitor their weight and adjust diuretic dose accordingly, anticoagulation clinics that instruct patients on use of home monitoring of international normalized ratio (INR) levels to help keep them in therapeutic range, and cardiac prevention programs that help patients create an individually-tailored health plan of diet, exercise, smoking cessation and stress reduction.

More than Just a Structure

Patient-centered care is a philosophical approach as well as a structured program that guides the individual interactions between patient and care provider. Patient-centered education starts with doing more listening than talking. The conversation with the patient begins with introducing an idea, then asking a question and then listening to the patient. In the end, when you try to put together the next step in a healthier path, you know what that patient's issues are.



Tips for successful patient-centered care include:

- When prescribing a new medication, engage patients in an open discussion about acceptable costs, dosing regimens and side effects. A patient who is part of the decision is more likely to stick with the plan.
- When choosing your words, think: What is this patient's "living room language," and am I speaking it? Most patients don't speak *medicalese*, but they may not let you know when they don't understand for fear of appearing uneducated.
- It takes skilled communication and coaching to help patients commit to taking medications that don't make them feel better on a day-to-day basis. Be sure they understand the medication's life-saving benefits taking place behind the scene.
- At first, some seniors may be disconcerted by a collaborative approach and think that the care provider is indecisive. Make sure they understand that all of the therapeutic choices you are offering are beneficial, but the best choice depends on a patient's abilities, lifestyle and values.
- Pay attention to the stress level of the patient. A stressed, frightened patient may not absorb the information you are giving them. The same goes for a patient who has been sedated for a procedure.
- Use "teach-back" to check on comprehension, supply written materials that reinforce verbal information, and check in with the patient later to reassess comprehension.

The most important thing is to see the world through the patient's eyes. Patient-centered care relies on shared decision-making, not on the old concept of compliance.

Cardiovascular Care Team members within the ACC are continuing to advocate for better patient care. To learn more about becoming a part of ACC's Cardiovascular Care Team, visit us online at www.acc.org/about/join_acc.htm.

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