The Importance of Patient Engagement

Executive Summary

Patient engagement is related to patient behaviour, since what people do in their everyday lives largely determines their health and their subsequent need for healthcare. The influence of patient behaviour on health outcomes can be observed across the entire disease state from preventing illness to the management of long-term chronic health conditions. Patients who are more engaged in their healthcare are more likely to have positive outcomes. This article explores models of patient engagement with a specific focus on activation and behaviour change to promote wellness. Relevant resources including case studies, tools and related articles are provided.

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Introduction

Accountability for outcomes in healthcare is a shared responsibility between government, policy makers, providers, suppliers and patients. Traditional models have been provider-centric rather than patient-centered and have not considered the critical role patients play in their own care, which includes the determination of both the need for care and the outcomes of care. This influence of patient behaviour and other determinants of health on outcomes is evident from prevention through to the management of chronic, long-term illnesses. Patients who are engaged in decision-making about their own care tend to have better outcomes than those who are not. Increased patient engagement is part of a movement toward value-based care, and has developed over the past
decade as a related construct to the patient-centered care movement. The Patient Engagement task force of the Patient-Centered Primary Care Collaborative developed a useful framework for patient/family engagement which includes principles such as mutual goal and expectation setting; accurate and complete information flows; review and communication of care coordination issues, etc.

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**Models of Patient Engagement**

The use of tools and resources to help engage patients in their own care and well-being is based in part on an assessment of their existing level of health and their goals. The amount and type of healthcare patients require directly impacts which engagement strategies are most likely to be effective. For high-risk patients, engagement is achieved primarily through care management. This model involves sharing data between the patient and/or family members and the care coordinator. Medium-risk patients are those with chronic diseases many of whom have multiple comorbidities. Historically, care has been focused on one disease rather than focusing on overall care. The relationship with the care staff in this instance is focused on healthcare literacy and making sure that appropriate results are shared and understood by relevant parties. Building health literate organizations [4] is one useful mechanism to support patient engagement in this manner. The rising-risk and low-risk category of patients deals more with managing risk factors, identifying determinants of risk, and other population-focused metrics. Interventions for this group are focused on behavioural change and prevention of disease [5]. Traditionally, this group is the most challenging to address due to lack of interaction between health system components.

- **Patient Engagement Playbook** [7]
- **Guide to Patient and Family Engagement in Hospital Quality and Safety** [8]
- **Patient Care Experience** [9] **Observation Exercise** [9]

Case studies reflecting high levels of patient engagement for specific populations include:

- **Ochsner Health System’s O Bar** [10]
- **Community Asthma Initiative at Boston Children’s Hospital** [11]
- **My Tool Box: Peer-Led Training for Chronic Disease Self-Management Improves Outcomes & Reduces Costs** [12]

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**Behaviour Change**

Assisting patients in behaviour change is an important component of healthcare engagement. By helping individuals to make healthier life choices, population health can be improved. Further information is available on a framework for: **Changing Patient Behavior** [13].

One of the prominent theories of behavioural change is the **Transtheoretical Model of Behaviour Change** [14]. The stages of change are as follows: pre-contemplation, contemplation, preparation, action, maintenance, and termination.

The physician/patient relationship is a powerful force for behaviour change. Research suggests that the physician is trusted more than other relationships, and only slightly less than other family
members. Even a brief conversation with a physician can increase smoking cessation rates by up to 10%. There is also additional research to determine at what point on the behaviour change scale are interventions most effective. Messaging to help patients make change can be based on economic, educational, and other determinants of health.

**Patient Activation**

Delivering the right message to the right person at the right time is critical. Patients who are engaged or activated in their own healthcare can more effectively fulfill that role. Those with long-term conditions who are activated in their care are more likely to engage in positive health behaviours. Some payers are using a tool called the Patient Activation Measure (PAM)® which contains 13 statements designed to assess the degree of a patient’s activation. The statements are about beliefs, confidence in the management of health-related tasks and self-assessed knowledge. The scores range from 0 to 100, and for the purpose of specific interventions they are divided into ‘levels of activation’.

**Employer Programs for Wellness Engagement**

Workplaces are also becoming increasingly important venues for wellness activities, and to help promote population health. Since the workplace is where individuals spend a majority of their day, engagement of employees in their care can be effective at improving health outcomes and can enhance productivity. Examples include on-site physicians that employees can visit during work hours, workplace kiosks for employees to interact with care providers via virtual contact. An example of workplace wellness activities include the Healthy Living Program at American Express Canada. Useful tools include:

- Business Health Support Toolkit
- Business Case for Workplace Health
- Creating a Healthier Organization Toolkit

Need more information? Have some resources to share? Please visit the Safe & Healthy Workplace Community of Practice and ask a question in the discussion space and/or upload files to share with your colleagues.

**References & External Links:**

2. Supporting people to manage their health: An introduction to patient activation
3. Relationships between patient activation, disease-specific knowledge and health outcomes among people with diabetes; a survey study

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