

Module 4 (M4): Self-Management Support and Healthy Behavior

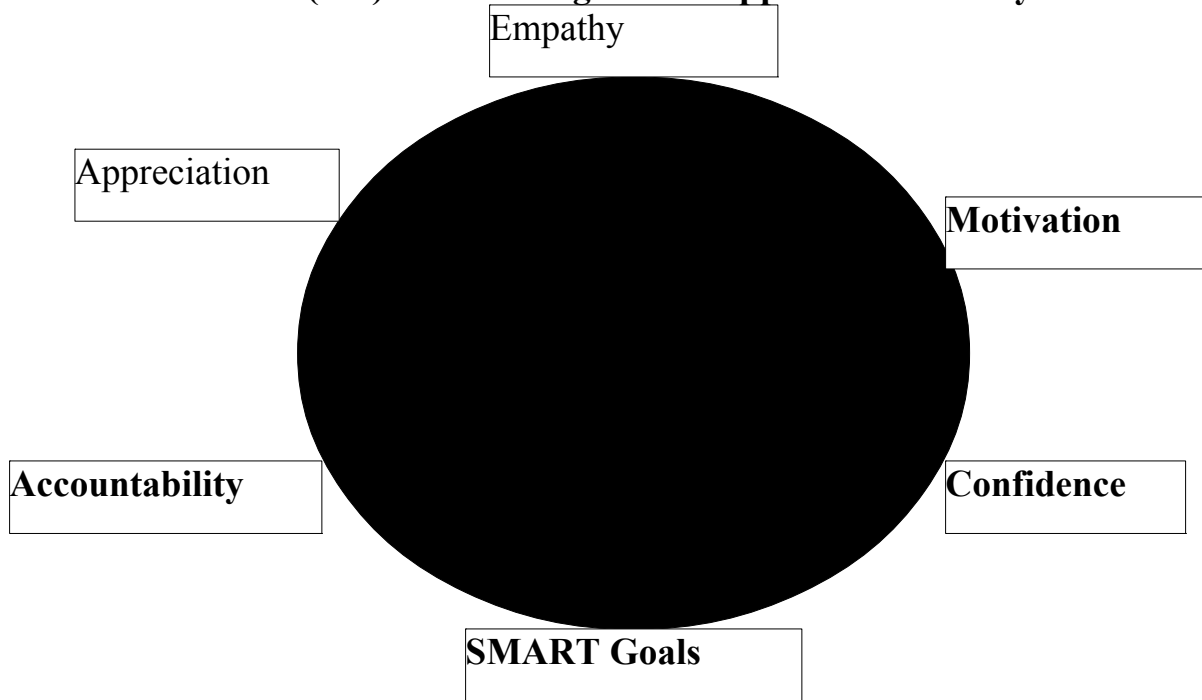


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Module 4 (M4): Self-Management Support and Healthy Behavior

M4 Overview

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HEALTH MENTOR PROGRAM GOALS:

- Students will value the contributions of each member of the interprofessional healthcare team
- Students will understand the perspective of the patient and value patient-centered care
- Students will appreciate how a person's health conditions and/or impairments interact with

Visit and Assignments must be completed and submitted by [insert time here] on [insert date here].

Goal: To gain an understanding of the importance of self-management support through the application of the Transtheoretical Model of Behavior Change and SMART goals.

Objectives: Upon completion of this module, students will:

1. Complete an interview with their Health Mentor, exploring his/her health behaviors as well as his/her past experiences with behavior change and Develop one SMART (Specific, Measurable, Attainable, Realistic, Relevant, Time bound) goal with the Health Mentor to maintain or promote his/her health behavior change.
2. Identify one health behavior that the Health Mentor would like to maintain or change.
3. Identify with the Health Mentor his/her "readiness" or Stage of Change.
4. Identify with the Health Mentor any facilitators and barriers to achieving his/her specific behavior change or maintenance strategy.
5. State the role(s) of each profession in assisting the Health Mentor in maintaining or achieving his/her health behavior change.

Measurements:

1. Completion of a Self-Management Support Plan/ICF Synthesis #2 team assignment
2. Completion of individual reflection paper and Team Performance Scale
3. Discussion of Self-Management Support and Healthy Behavior and wrap-up of two year experience with IPE team and Health Mentor at the interprofessional small group session.

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M4 Visit Guide

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NOTE: Please note that many OT students are away on clinical rotations during the Spring Semester. OT students may not be able to make it to your face-to-face meeting your Health Mentor but are expected to be involved in the completion of individual and team assignments.

PART I: Module Preparation

1. Pre-Reading:

Prior to meeting your Health Mentor and student team members, please review the following:

- a) Pre-Reading –
 - i. Transtheoretical Model of Behavior Change and SMART Goals (Attachment I, pages 9-16) – this short reading will assist you with developing appropriate questions for this interview.
- b) Self Management Support Plan/ICF Synthesis #2 (Attachment II, pages 17-19) - this plan can serve as another guide for developing questions for your team interview and will need to be completed as part of your team assignment.

2. Scheduling:

- a) **Health Mentor team visit:** Work with your student team members and Health Mentor to identify a date, time and location for your visit. Your team may choose to meet at the Health Mentor's home or in a public location, such as a coffee shop or on Jefferson's campus **by [insert date here]**.
- b) **Student meeting:** Once you have scheduled the visit with your Health Mentor, you will also need to schedule a meeting with your other student team members to prepare for the mentor visit and plan your interview *prior to meeting with your mentor*. Be sure to identify a date and time that works well for *all* of your team members. You may want to meet over lunch or after class or, perhaps you want to meet on Skype or through Live Chat, especially if you have an OT student on your team who is away on fieldwork this semester. Rooms may also be reserved on campus for this student meeting.

3. Preparing for your mentor visit: Work with your interprofessional student team members to plan your upcoming interview with your Health Mentor.

- a) **Goals:** The goals of this interview with your Health Mentor are to explore his/her previous and current health behaviors, his/her past experiences with behavior change, as well as his/her goals for making a new health behavior change or maintaining a successful health behavior change.
- b) **Preparing for the Interview:** See Attachment I, Pre-Reading to assist you with developing appropriate questions for this interview (pages 9-17 including all tables/figures).
 - i. Using your knowledge of your Health Mentor from your previous meetings and building on the knowledge of the various disciplines represented on your team,

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consider health behaviors that you think might be relevant to discuss with your Health Mentor. Develop questions to help you explore any new health behaviors that you have not touched on in the past with your Health Mentor. Discuss with your Health Mentor his/her past successes with health behavior change and any past challenges with health behavior change (i.e. what were facilitators or barriers for this change?).

- ii. Outline a tentative agenda for your visit with your Health Mentor. For example, your team may want to develop a list of potential open-ended questions to ask your Health Mentor, decide who will open the interview, who will ask which questions, who will take notes, and who will close the interview. Your team may also want to discuss specific strategies to engage your mentor, what you will do if the interview goes “off track” or if your mentor does not identify a desired change (i.e. how can you explore goal maintenance?), and identify ways for each discipline to be involved in the interview process.

PART II: Health Mentor Visit

1. Complete a semi-structured interview with your Health Mentor, exploring his/her previous and current health behaviors, as well as his/her past experiences with behavior change (as described above). This interview should build on what you have already learned about your mentor from your previous visits, and particularly from your Wellness Interview (in Module 2), and should be more focused on developing a specific, detailed action plan for maintaining and/or achieving health behavior changes. Self-Management Support is a tool that you will use in everyday practice, and this exercise should help prepare you for future motivational interviewing (MI) and counseling of patients who are pursuing or would like to pursue healthy behaviors.
2. After completing your broader discussion, address Questions 1-7 of the Self-Management Support Plan (see **Attachment II, pages 17-19**) with your mentor. Use the information from the Pre-Reading to help explain this material to your Health Mentor as you go through each part of the form – feel free to bring a copy of the Pre-Reading along to help you if you need a reference. Ask your Health Mentor to identify his/her “readiness” for change, Stage of Change, as well as supports and barriers to change. Next develop one SMART goal with your Health Mentor and assess his/her confidence, or self-efficacy, in making or maintaining this health behavior change.
 - a) For this portion of your interview, your team should be prepared to discuss with your mentor the meaning of “SMART” goals and to help him or her correctly identify his/her Stage of Change/readiness, based on your pre-readings.
 - b) Also, be prepared to discuss with your Health Mentor ways each profession might provide support for maintaining or achieving his/her health behavior change, as well as other family, community or national resources that may be helpful in his/her SMART goal success.

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M4 Team and Individual Assignments

All assignments are due by noon on March 19, 2012

1. **Team assignment: Self Management Support Plan/ICF Synthesis #2**
 - a. Complete and submit the Self Management Support Plan/ICF Synthesis (pages 17-19) on your team wiki by [insert time here] on [insert date here].
 - i. Each team member must contribute to development of this plan and to the new ICF Synthesis.
 - ii. [insert location here]
 - b. Grading: faculty will review and grade your team's Self Management Support Plan and ICF Synthesis #2 according to Team Grading Guidelines, available on Pulse.
 - i. [insert location here]
2. **Individual assignments:**
 - a. **Reflection paper:** Submit your document to Assignment Link on Pulse by [insert time here] on [insert date here]
 - i. Follow the "What? So What? Now what?" Model for writing reflection papers (See Attachment III, pages 20-21). Please note that these guidelines will also be used as a reference for grading your paper.
 - b. **Completion of Team Performance Scale**
 - i. After completing your team assignment, please go to the Health Mentor's course site (located under the courses tab of Pulse), click on the main menu section entitled "TPS" and complete the Team Performance Scale (TPS). Please answer the questions based on your overall experience with your team during this module's activities and assignments.
 1. [Insert TPS Location Here]
 - ii. All students must individually complete the TPS in order to receive the aggregate team score. To view this score, click back on the same link you used to access and complete the Team Survey.
3. **IPE Small Group Sessions – [insert date here]**
 - a. Preparation:
 - i. After you have completed both team and individual assignments, please prepare for your small group sessions on [insert date here].
 - ii. Student instructions and details for this session are available at:
 1. [insert location here]

M4 Attachment I: Pre-Reading

**Healthy Behavior:
Transtheoretical Model of Change and
SMART Goals**

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Healthy Behavior: Transtheoretical Model of Change and SMART Goals

Transtheoretical Model of Behavior Change (see Table 1)

Understanding how health behavior change happens is a critical component to helping patients maintain and/or health behaviors. However, before we can become a part of a person's journey to behavioral change, we need to understand Transtheoretical Model of Behavior Change. This model helps healthcare providers to categorize patients into specific "Stages of Change" and can help to guide appropriate interventions and support.

The Transtheoretical Model helps to identify patients who are not yet ready for change (Pre-Contemplative), who are thinking about making changes (Contemplative), who are preparing to take action (Preparation), who are taking action (Action), and who are maintaining healthy behaviors (Maintenance). Experts describe these changes as an upward spiral toward maintenance of healthy behaviors and recognize that sliding backwards or "relapse" may occasionally happen.

See **Table 1** for a definition of the 5 Stages of Change as well as a list of guiding questions that can help you to identify where a person is on this spectrum of health behavior change. You may want to use some of the guiding questions in this list during your interview with your Health Mentor and to help describe the Stages of Change Model to your health mentor as you complete the Self-Management Support Plan together. Also, you can use these questions as a guide to identify Motivators, Obstacles, Strategies, and Strengths (MOSS) for maintaining healthy behaviors.

The Readiness Ruler is an evidence-based tool that can help healthcare provider's to identify an individual's Stage of Change or "readiness" to change.

Confidence and Importance (see Figure 1)

Two of the most important contributors to health behavior change are confidence and importance (see **Figure 1**). Notice the relationship of confidence to importance. If something is not important to us, we will not change. If we are not confident in our ability to achieve a goal, we will not change. If we find that something is important, and our confidence grows, we start to go down the pathway of change.

As healthcare providers, we always have to assess how important something is to the person we are working with and realize that what is important to us may not be what is important to the person we are working with. We need to help people find their own internal motivators for change. Examples of motivators can be a family history of stroke, having clothes that are too tight, or wanting to be a good role model. Once an individual's motivators are found, healthcare providers can help the patient to identify his/her own obstacles, to uncover internal strengths and to identify strategies for success, thereby increasing the person's confidence in his or her ability to maintain or make a healthy change.

SMART Goals (see Table 2)

Helping patients make or maintain health behavior changes rests on identifying actionable, realistic goals. Authors have identified key components to these goals, which are labeled as SMART goals (See **Table 2**). The acronym SMART stands for Specific, Measurable, Attainable, Realistic/Relevant and Time Sensitive. **An example of an inappropriate goal for health behavior change** is: "I want to lose weight". An example of a SMART goal is: "I want to lose 20 lbs by April 15th 2012. I will perform a half hour of cardio and half hour of strength training per day, 5 times a week and I will only eat starchy carbohydrates 3 times a week." Helping your mentor identify a "SMART" goal will be critical in developing an appropriate and individualized Self-Management Support Plan.

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The COACH Approach (see Figure 3)

The Coach Approach to Behavioral Change (see Figure 3) incorporates principles from motivational interviewing (MI*) and SMART goals. Motivational interviewing involves reflecting a person’s own justifications and viewpoints back to them in an empathetic way. Using MI, providers can identify why and what a person wants to change or maintain, assess his/her motivations for change or maintenance, identify how confident he/she is in the ability to change or maintain a habit. Using the Coach Approach, providers can help patients create SMART goals and then holds them accountable for following through on those actions. Providers show appreciation when patients meet their goals, as well as empathize with them when they do not allowing room to start the process over again as needed. The Coach Approach may help you develop your interview approach with your Health Mentor (as well as for your future patients), and it the key role that empathy plays in encouraging healthy behaviors.

Tips to Enhancing Communication and Promoting Health Literacy

Good communication between the clinician and the patient/family is an essential component to patient and family education.

Six steps to improving interpersonal communication with patients/families

| | |
|--|---|
| 1. Slow Down | Communication can be improved by speaking slowly and by spending just a small amount of additional time with each patient. Slowing down can help foster a stronger rapport with patients. |
| 2. Use plain, nonmedical language | Explain things to a patient like you might explain them to your grandmother. |
| 3. Show or draw pictures | Visual images can improve the patient’s recall of ideas. |
| 4. Limit the amount of information provided —and repeat it | Information is best remembered when it is given in small pieces that are pertinent to the tasks at hand. Repetition further enhances recall. |
| 5. Use the “teach-back” technique | Confirm that the patient understand by asking them to repeat back your instructions. |
| 6. Create a shame-free environment: Encourage questions | Encourage patients to feel comfortable asking questions. Consider using the Ask-Me-3 program. Enlist the aid of others (patient’s family or friends) to promote understanding. |

Behaviors that Improve Communication¹

- Use orienting statements: “First I will ask you some questions, and then I will listen to your heart.”
- Ask Health Mentor if they have any concerns that have not been addressed.
- Ask Health Mentor to explain their understanding of their medical problems or treatments.
- Encourage patients to ask questions.
- Sit rather than stand.
- Listen rather than speak.

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Table 1 - Stages of Change

1. Precontemplation → not thinking about change - “I won’t/I can’t”
(Not ready yet)
Questions to ask Precontemplators
(Motivators, Obstacles, Strategies, Strengths or MOSS)
“What is most important in your life?”
“What makes . . . impossible?”
“What would need to happen in order for you to . . .?”
“What has helped you be successful in the past?”
Key to interview is empathy
2. Contemplation → thinking about change in the next 6 months - “I may”
(Thinking about it)
Questions to ask Contemplators (MOSS)
“How would your life be different if you were...?”
“What do you think is holding you back?”
“What steps would you need to take to make . . . a daily habit?”
“When you need to reach a goal, how do you do it?”
Key to interview is finding motivations
3. Preparation → thinking about change within 1 month - “I will”
(Preparing for Action)
Questions to those in Preparation (MOSS)
“What is driving your desire to change?”
“What do you need to tackle before you get rolling?”
“What can you do to get around your obstacles to getting started?”
“Tell me about a time you reached a goal.”
Key to interview is strategies for success
4. Action → performing new behavior for 6 months - “I am”
(Taking Action)
Questions to ask those in Action (MOSS)
“What’s keeping you going?”
“What obstacles do you anticipate this week?”
“What can you do to ensure that you continue?”
“What characteristics are enabling you to be successful with . . .?”
Key to interview is anticipating future obstacles
5. Maintenance → follows action length determined by specific behavior - “I *still* am”
(Maintaining a Good Thing for Life)
Questions to ask Maintainers (MOSS)
“What’s going to inspire you to keep doing this?”
“What could get in your way in the future?”
“What can you do to ensure that you continue?”
“What characteristics are enabling you to be successful with . . .?”
Key to interview is reinforcing motivations

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Table 2- SMART Goals

S = **Specific**: Do you know exactly what you want to accomplish with all the details?

Goals must be well defined. They must be clear and unambiguous.

M = **Measurable**: Can you quantify your progress so you can track it? How will you know when you reach your goal?

Define specific criteria for measuring progress toward the accomplishment of each goal you set so that you can measure and keep track of progress.

A = **Attainable**: Is your goal a challenge but still possible to achieve?

Goals must be achievable. The best goals require you to stretch a bit to achieve them but they are not impossible to achieve.

R = **Realistic**: Are you confident you can achieve your goal? Is your goal realistic and within your reach? Are you willing to commit to your goal?

Almost certainly your goal is realistic if you truly believe that it can be accomplished.

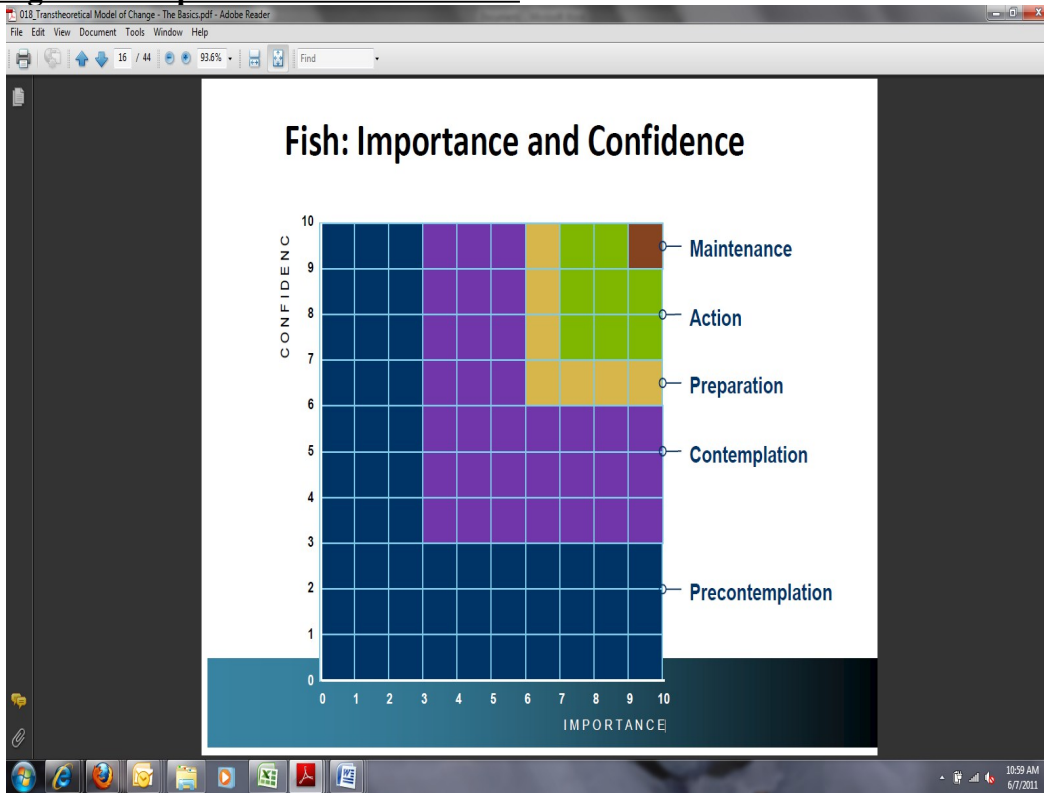
Relevant: Is your goal relevant to your life purpose? Is it in line with your beliefs and values?

Your goal must be consistent with other goals established and fits with your immediate and long-term plans?

T = **Time Sensitive**: Does your goal have a deadline?

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Figure 1– Importance and Confidence



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Figure 3 – The Coach Approach to Behavioral Change

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M4 Attachment II – Team Assignment
Self-Management Support Plan/ICF Synthesis #2

Self-Management Support Plan

Student Instructions: As a team, complete each of the questions below based on the interview with your Health Mentor and his/her responses.

1. The health behavior that I want to change or maintain is:

2. My “readiness” for change is (*Please bold your Health Mentor’s response.*)

0 1 2 3 4 5 6 7 8 9 10

Not prepared to change

Already changing

3. My Stage of Change* is:

4. The supports/resources that could make it possible to achieve my goal include (consider personal and environmental supports as well as family, healthcare, community, and national resources):

5. The barriers that could make it difficult to achieve my goal include (consider personal and environmental barriers):

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6. The specific steps that I will take to achieve my SMART** goal are:

7. My confidence that I can achieve my goal is (scale of 0-10, with zero being not confident at all and 10 being extremely confident):

- **Stages of Change:** pre-contemplation, contemplation, preparation, action, maintenance– see pre-reading for more details
- ** “SMART” goals are defined as: **S**pecific, **M**easurable, **A**ttainable, **R**ealistic, **R**elevant, **T**ime Bound

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ICF Synthesis #2

Student Instructions: After completing your final interview, complete the following information based on what you have learned from your Health Mentor over the last two years. You may want to refer back to your original ICF Synthesis from Module 1 to edit, add to and update this form based on your additional knowledge. The ICF Synthesis #2 should present a final, well-rounded view of the impact of your Health Mentor's health condition(s) on his/her quality of life, wellness, safety and self-management. If your health mentor was your patient, the intervention or treatment plan would be formulated based on this comprehensive view.

Health Condition (s) (list all health conditions, disorders or disabilities):

Impairments (describe any impairment(s) to body function and structure, related to each of the health conditions identified above):

Activity (describe current activities as well as any limitations in activity due to each health condition identified above):

Participation (describe current roles as well as any restrictions due to each health condition identified above):

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M4 Attachment III Guidelines for Writing Reflection Papers

Reflection Assignments: Prepare and submit one personal reflection relative to the Health Mentors Program. Reflection offers you the opportunity to think critically about how you are affected by your participation in the Health Mentors Program and how you will be able to apply what you are learning to your future as a healthcare professional. Follow the “What? So What? Now What?” Model below for writing your paper. Please note that these guidelines will also be used as a reference for grading your paper.

Format:

1. In the top left corner of your essay, please include your name, discipline, and team number.
2. Reflection essays should be 3 paragraphs in length (approximately 500 words). Please use 12 point Times or Arial fonts and double-space your essay.
3. Please label your file with your team number, full name and discipline (Team1, Lisa Smith, Nursing) and upload to Assignment Link.
 - a. [insert location here]
4. Please note that these reflection essays may be de-identified and used for future educational research.

Grading:

Faculty will review and grade your reflection paper according to the “What? So What? Now what?” Model below. You will receive a “0” (failure) if you only complete one of the three sections, an “80” (marginal pass) if you only complete 2 sections, and “100” (full credit) for satisfactorily completing all three sections outlined below.

Suggestions for Writing Reflective Entries:

- A reflection is not a work log of tasks, events, times, and dates. It should include information about sights, sounds, smells, concerns, insights, doubts, fears, and critical questions about issues, people, and most importantly, yourself.
- Honesty is very important. Write what you believe, not what you think other people (including faculty) want to hear.

The What? So What? Now What? Model: This model of reflection should be utilized in your paper. A true reflection contains three components:

- Descriptive component in which the events are described
- Examination component in which the event(s) are explored and feelings/reactions are discussed
- Contemplative, planning component where plans are made for future encounters.

The sample questions listed under each of the three categories below *may help get you started* on making reflective entries as you think about your experiences. Do not try to answer every question.

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Choose the questions that have the most relevance to your experience. Better yet - come up with questions of your own!

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What? *(Describe)*

Sample Guiding Questions:

- Describe an experience with your Health Mentor. What happened during your visit?
- Describe an experience with your team members. What were their roles/contributions? What problems arose? What successes did you have?
- Describe an experience that changed your understanding of the impact of your Health Mentor's health condition or impairment on his/her life. How do your Health Mentor's health condition interact with personal and environmental factors?

So What? *(Examine)*

Sample Guiding Questions:

- How did you feel about your experience? What was the best thing that happened? The worst? Were you offended by anything? Were you puzzled by anything that happened? What lifted your spirits? In what did you take the most pride?
- What have you learned about the interprofessional team? What are the similarities and differences between you and the other members of the team? Did you communicate effectively with other team members? What are your team's strengths and/or weaknesses?
- Did you change or grow as a result of your experience? What did you learn about yourself? Do you have more/less understanding or empathy than you did before? Were there any skills or knowledge you lacked? Has your experience complemented or contrasted with what you are learning in class?

Now What? *(Contemplate & Plan)*

Sample Guiding Questions:

- What is the connection between this experience with your Health Mentor to your future? What impact does this experience have on your everyday life? Will your experience change the way you act or think in the future as a health care provider?
- How can you make your interactions with team members more productive? Do you need to do any reading or research? What skills will you practice? What will you do to improve communication skills? What will you do about biases and prejudices that limit your effectiveness?
- What insights did you gain that might assist you in your career? Is there something new and creative you will try to improve your performance?