

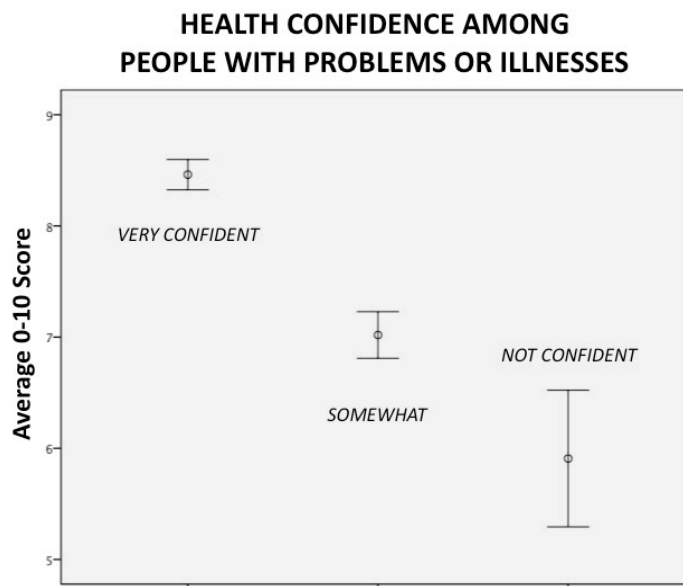
Health Confidence- and the What Matters Index - 2018

Overview:

Health Confidence, is a proxy for patient engagement, activation, self-management and similar terms, have their origins with the concept of “self-efficacy” from 1977. Lorig (1996) used measures of these related concepts to evaluate her chronic disease self-management program while Hibbard (2004) combined several measurement frameworks into her multi-item measure of patient activation. In keeping with our focus on simple and actionable measurement, we introduced health confidence. (2003)

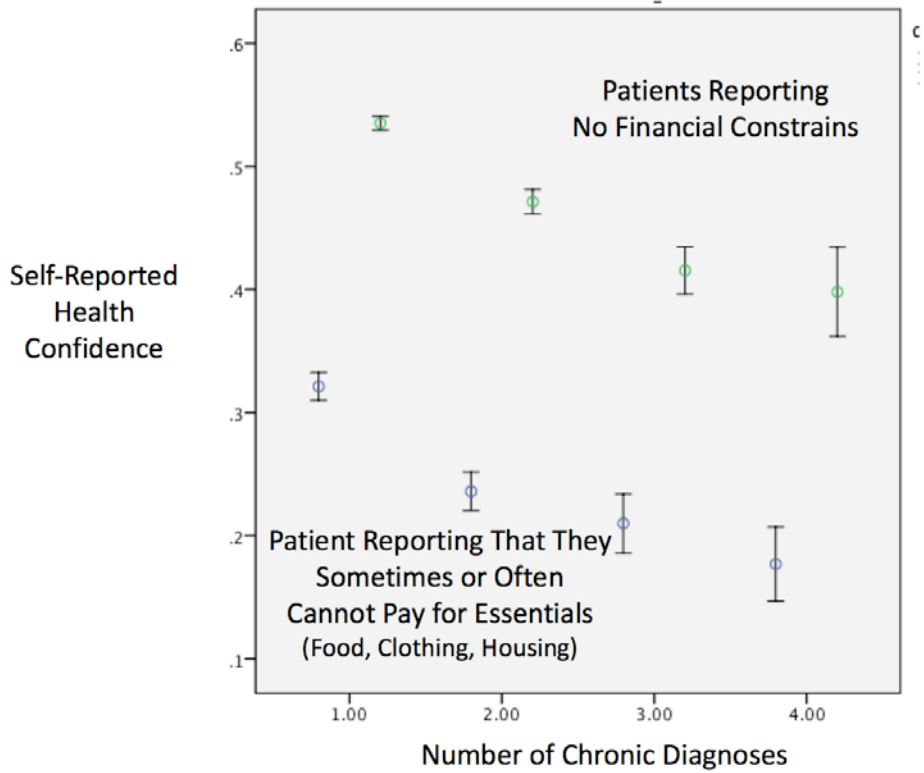
We have subsequently learned that:

- Any measure of patient engagement will be associated with outcomes of care.
- A direct query of patients about their “self-efficacy” or “health confidence” will encourage socially desirable responses. We recommend that responses to health confidence be solicited with that bias in mind. For example, HowsYourHealth contexts for inquiries about health confidence are designed to be neutral and anchored to specific planned changes in habits or management of self-reported conditions.
- While it is often offered as a 10-point scale, we have found that a reduction of the Health Confidence scale to three response categories seems easier for patients to quickly interpret and more explicit as a guide to problem-solving and motivational interventions.



- Engagement is highly associated with both illness burden and financial status. Failure to account for the interplay of these factors can lead to inappropriate interventions for patients and counterproductive incentives by payers.

Health Confidence and Economic Status

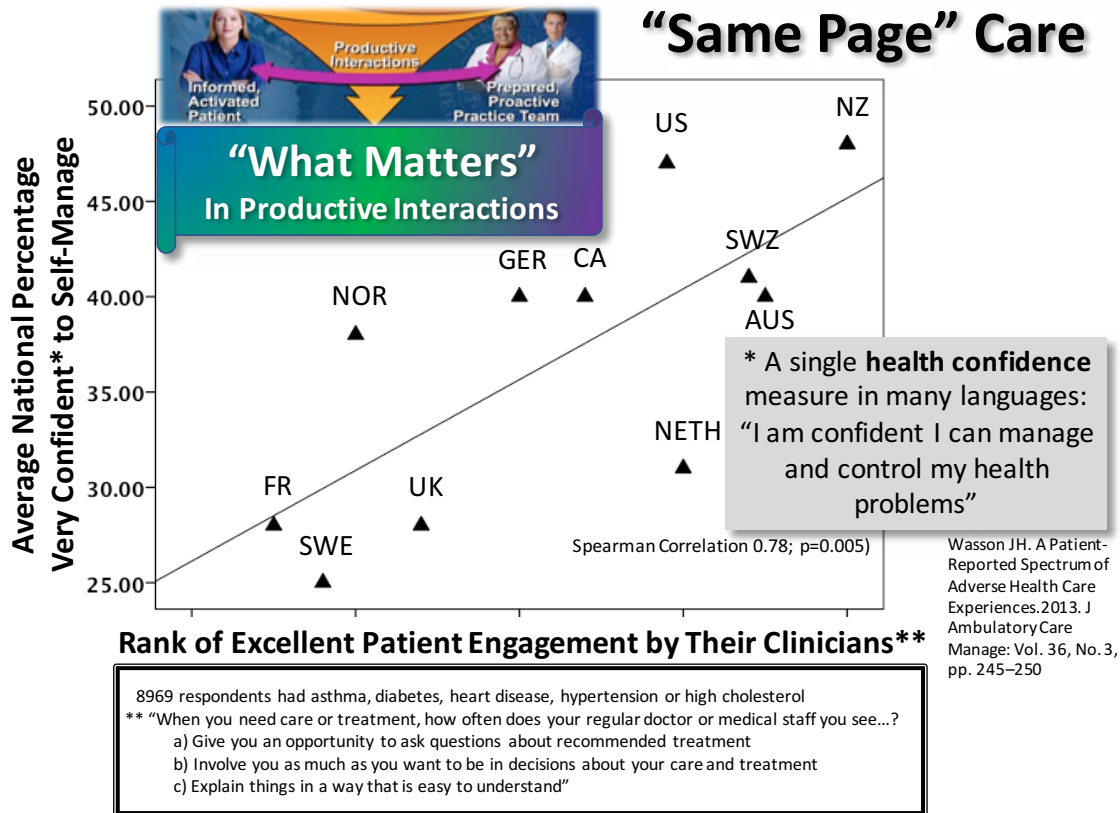


Validation of Health Confidence

The Chronic Care Model (1998: http://www.improvingchroniccare.org/index.php?p=the_chronic_caremodel&s=2) synthesized and popularized all of us who helped create the chronic care model knew the best evidence converged at one easy-to-understand and fundamental truth; that health professionals and patients, like any other grouping of living things, seem to do best when they are on the same page...reading from the same page. In the words of the model, when they have a production interaction.

The term Productive interaction was unfortunate. A synonym, patient engagement was not much better because neither term was easy to measure at the front lines of care.

A sensible, measurable solution is the term health confidence. In the figure below we see across many nations, the correspondence between their patients' self-report of their confidence that they can manage and control chronic conditions, noted on the vertical axis, with the rank of fundamental professional attributes that place them on the same page with what matters to their patients, noted on the horizontal axis. Patient confidence in self-management correlates quite well with their assessment of clinicians' willingness to listen, explain and engage them.



In other words, we can use patient-reported health confidence as a proxy for productive interactions and engagement.

A less impressive way to “validate” is to cross-reference with other models such as the multi-item, “patient-activation measure” that contains within it six assertions about health confidence. (See example below). Of course, there is a strong association.

Regardless of how we articulate the term, nearly all of us want and need to be health confident regardless of whether we need to self-manage a health problem each day (shown in purple), have a burdensome illness that requires less intensive management (in green), or know that we have risky health behaviors that we should address.

In contrast to multi-item surveys, a single item has the advantage of providing a conversational lead to the inquiry about what matters to patients. For example, all patients who are not health confident can be asked “What Would It Take to Help You Become More Confident that You Could Manage and Control Most of Your Health Problems or Concerns?” Our HowsYourHealth.org website that, I should add, is available for free, does this automatically.

APPENDIX. Patient Self-Reported Health Confidence on a Single Measure Compared to Scored Health Confidence Using 6 Items

The Table below compares 131 patient reports of their health confidence using a single item versus a computation based on 6 items described by Hibbard et al (2004). The 6 responses were scored as follows: to be assigned to the “clearly confident” group patients had to always affirm—strongly agree with or agree with—6 assertions about their health confidence; to be probably “not confident” a patient disagreed and could never strongly agree with any of the 6 assertions and disagreed with at least 1 assertion about their health confidence; and “mixed” patients sometimes strongly agreed and disagreed.

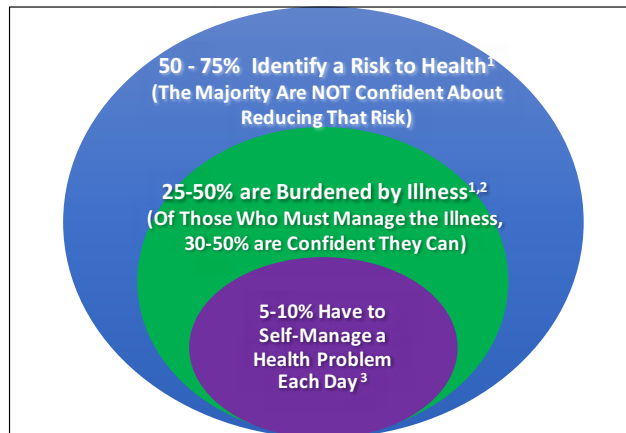
The results in the Table illustrate that the scored groups for health confidence are associated ($r = 0.43$) with the categories in which patients place themselves. However, there are differences that might impact clinical practice: compared to self-report, more patients by the scored method seem confident; compared to the scored categories, fewer patients self-report not being confident. The discrepancies between a single self-rating and designation based on scoring algorithm illustrate that self-rating and calculated methods may give different views of health confidence. Neither a grouping based on a score nor a self-categorization is more correct than the other.

Table. Patient Reports of Health Confidence

	Scored “Clearly Confident”	A Mixed Score	Scored “Not Confident”	Total for Self-Report
Self-report “Very Confident”	39	9	5	53
Self-report “Somewhat Confident”	31	19	13	63
Self-report “Not Very Confident”	0	6	9	15
Total for Scored Responses	70	35	27	131

Who Needs Health Confidence?

(Nearly All Of Us)



1. Data from HowsYourHealth.org: Exercise > Weight > Smoke/Drink > Other
 2. Data from HowsYourHealth.org: Burdened by Functional Limit or Chronic Illness
 3. J Am Board Fam Med 2011;24:380-390.

The What Matters Index and Health Confidence

Health confidence is a marker for the state of mind and self-management ability of a patient in the context of their social and physiologic challenges. People with few challenges will generally be more health confident than those with many. Using HowsYourHealth direct inquiry of thousands of patients about “what would it take to improve your health confidence” has resulted in the following observations:

- The inquiry itself is a form of cognitive behavioral therapy (CBT) from which many will self-identify what they need to do to improve. On-line both the inquiry and more detailed follow-on can be easily provided. HowsYourHealth ask patients to write in their responses to the “what would it take” question to become more confident about changing a habit, improving health confidence, and solving other problems.
- When combined with four other measures (that matter to patients) with the use of health services this “What Matters Index” immediately and unambiguously identifies fundamental, remediable needs for each patient and more sensibly directs the delivery of services to patient categories based on their risk for subsequent costly care. <https://doi.org/10.1371/journal.pone.0192475>

The following materials provide more detailed information about:

- A. The Single Measure
- B. An example for its “packaging” by Bristol-Myers-Squibb.
- C. The What Matters Index Validation

HEALTH CONFIDENCE:

A SIMPLE, ESSENTIAL MEASURE FOR PATIENT ENGAGEMENT AND BETTER PRACTICE

Asking patients this one question can lead to better outcomes.

After being hospitalized for new onset congestive heart failure, Mrs. M, a 90-year-old widow, was discharged and sent home. Over the next six months, she had two additional hospital admissions and four emergency department visits without admission. She also had seven office visits and 21 telephone contacts with her primary care physician.

Eventually, her use of health care services dropped dramatically, and she returned to her usual activities. This turn of events came about because of a relatively simple intervention: Mrs. M's primary care physician asked her to assess her understanding of her condition and her confidence in managing it, and then worked with her to achieve gains.

"Naturally I was concerned about staying on my own when I came out of the hospital," she said. "At that time, my understanding of my heart failure was a '1' on a 10-point scale and my health confidence was a '4.' Now I am a '9' and an '8.'"

This case illustrates the downside of not paying attention to health confidence. Most of Mrs. M's post-discharge medical care was potentially avoidable. But when given the opportunity to gain insight and skills, she was able to better manage her condition and remain at home.

Consider another case:

Dr. A and colleagues observed very low health confidence and disease understanding among their many disadvantaged patients with hypertension. To address this, the clinic had its medical assistants use standard scripts to educate low-achieving patients during their visits. Within a year, more than 80 percent of these patients reported that they were very confident and understood their disease. As a result, blood pressure control improved significantly.

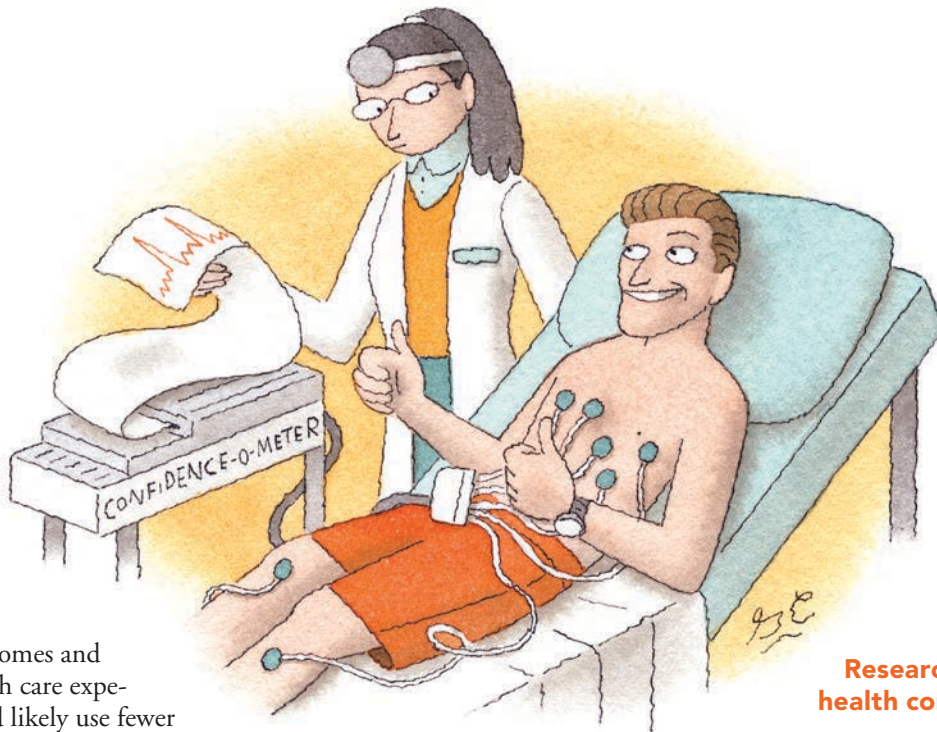
This second case demonstrates how proactive, "upstream" evaluation of health confidence can lead to interventions that improve patient outcomes.

Engagement and health confidence

A variety of terms – such as patient activation, patient self-efficacy, self-care, and self-management – have all been used to describe a patients' health-promoting actions. We prefer the term "engagement." The evidence-based, chronic care model illustrates the crucial connection between engagement and desirable patient outcomes.¹ For example, engaged patients have better

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Research supporting the health confidence measure

health outcomes and better health care experiences, and likely use fewer health care services and cost less.²

Clearly, a patient's level of engagement is a good thing for a clinician and patient to know.

Health confidence is an effective proxy for engagement, and practices can easily measure it using a single question: "How confident are you that you can control and manage most of your health problems?" The possible responses are "very confident," "somewhat confident," "not very confident," and "I do not have any health problems." Alternatively, patients can rate their confidence on a scale from 0 (not very confident) to 10 (very confident). A score of

Several recent studies illustrate the clinical validity of the health confidence measure. In 69 primary care settings, patients' reported level of health confidence was the critical measure associated with a practice's performance outcomes.³ In the 23 clinical settings where health confidence levels ranked in the bottom one-third, 38 percent of patients exercised regularly, 73 percent engaged in healthy eating and risk avoidance, and 64 percent reported control of their blood sugar (if diabetic). In the 23 clinical settings where health confidence levels ranked in the top one-third, 75 percent exercised regularly,

ENGAGED PATIENTS HAVE BETTER HEALTH OUTCOMES AND BETTER HEALTH CARE EXPERIENCES, AND LIKELY USE FEWER HEALTH CARE SERVICES AND COST LESS.

7 or higher is the desired response. The question initiates self-reflection and meaningful communication between patients and health care providers. A helpful accompanying question is "How understandable and useful is the information your doctors or nurses have given you about your health problems or concerns?" (See "A tool to assess health confidence and begin action," page 10.)

Although we are using the term health confidence "measure" in this article, it should be thought of as more of an "action query" – that is, an assessment that results in immediate action and directly leads to improved patient engagement.

89 percent engaged in healthy eating and risk avoidance, and 78 percent reported control of their blood sugar.

Among 75,000 adults with chronic conditions, those who were very health confident reported many fewer adverse experiences than patients who were not as health confident.⁴ Patients who were not confident were much more likely to use the emergency department or be hospitalized and were more likely to claim that much of the hospital and emergency department use was unnecessary.

Patients' ratings of this single measure for health confidence are aligned with surveys based on multiple measures of their confidence to self-manage chronic conditions.⁴ ▶

In a cross-national study, 11 nations' rankings based on the single health confidence measure were strongly correlated with several measures of clinicians' engagement activities.⁴

Influences on health confidence

Practice patterns, comorbidities, and modes of administration can influence patients' reported levels of health confidence.

For both hospital and ambulatory care patients, health confidence is most positively associated with the quality of information

provided to the patient and access to care.^{3,5}

Low health confidence is strongly associated with low financial status and a high burden of illness.⁴ Persistent bothersome pain or emotional problems impede improvement in health confidence and undermine the effectiveness of care.⁶ Of Medicare beneficiaries studied who were health confident, more than 90 percent reported that they always take their medicines as prescribed.⁷ In contrast, only 75 percent who were not confident (and 60 percent who were not confident and also bothered by emotional problems) complied with medication therapy.

There is a crucial connection between patient engagement and desirable patient outcomes.

Health confidence is an effective proxy for engagement and can be measured by a single question.

Persistent pain or emotional problems can impede improvement in health confidence.

A TOOL TO ASSESS HEALTH CONFIDENCE AND BEGIN ACTION

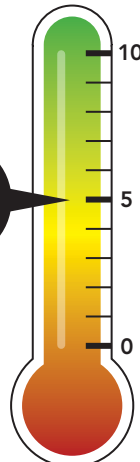
Note: A pdf of this tool can be downloaded from the online version of this article: <http://www.aafp.org/fpm/2014/0900/p8.html>. Additionally, an electronic version and pdf versions in several languages are available at <http://www.healthconfidence.org>.

MY HEALTH CONFIDENCE

What number best describes your:

Health confidence

How confident are you that you can control and manage most of your health problems?

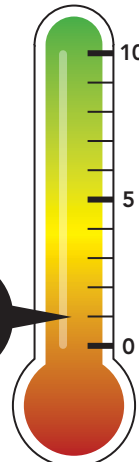


If your rating is less than "7," what would it take to increase your score?



Health information

How understandable and useful is the information your doctors or nurses have given you about your health problems or concerns?



If your rating is less than "7," what would it take to increase your score?



Family Practice Management[®]

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Health confidence ratings are often positively biased if a patient is questioned directly by an authoritative figure, such as a health professional presenting the question with a judgmental tone.⁷ This is often referred to as the social desirability bias. To minimize it, the presenter should avoid a judgmental tone by emphasizing the value of an honest response.

Using the health confidence measure

Offices can implement the health confidence measure in several ways:

As a vital sign for patients who have chronic conditions, health risks, or difficulty following recommended care. Six of 10 adults who have chronic conditions are not health confident, and the majority of patients who have health risks (such as not exercising, being overweight, smoking, or drinking excessively) are not confident they will make

sary subsequent care.

For patients facing a new diagnosis, procedure, etc. Patients also experience significant transitions during clinic visits. New diagnoses, treatments, tests, and management decisions often disrupt a patient's health confidence.

If a patient's health confidence is high (a score of 7 to 10) and the patient has a good understanding of his or her health problems, the office can proceed with usual care.

If a patient's health confidence is low (a score of less than 7), the clinician or a staff member should follow three basic steps of motivational interviewing:⁹

1. Find a way to support or reinforce any progress the patient has made. For example, "I see you marked a '4' on health confidence. What made you mark a '4' instead of a '0'?" This allows the patient to reflect on some personal strengths.

Offices can use the health confidence measure as a vital sign for patients with chronic conditions or health risks.

For patients transitioning from another care setting, asking about health confidence can identify those who feel unprepared to manage their health problems.

If a patient's health confidence is less than 7, motivational interviewing techniques can help identify ways to improve the patient's score.

NEW DIAGNOSES, TREATMENTS, TESTS, AND MANAGEMENT DECISIONS OFTEN DISRUPT A PATIENT'S HEALTH CONFIDENCE.

progress in the two months after they choose to reduce one of these risks.⁸ To identify these patients and help them get the resources they need, medical assistants can routinely ask patients about their health confidence as part of their collection of vital signs.

As part of a routine check up. For example, the Medicare annual wellness visit offers a scheduled opportunity to integrate health confidence into a patient's health check up. Both paper-based and electronic assessment methods are available. (See the Medicare annual wellness visit tools listed under "Additional resources" on page 12.)

For patients transitioning from another care setting. Depending on their burden of illness and the quality of their hospital, 12 percent to 67 percent of patients feel prepared to manage their health problems at discharge.⁵ Exposing inpatients to the health confidence tool could help them express their limits and concerns as they transition from the hospital and could obviate much unneces-

2. Ask what it would take to reach a higher level of health confidence. For example, "What would you need to move from a '4' to a '7'?" This allows the patient to identify behavioral goals that are acceptable, meaningful, and feasible rather than having the clinician suggest a goal that does not fit with the patient's values.

3. Ask which goals might be most important and how the doctor or office staff might be able to help. This allows the patient to prioritize options, and allows the practice to be clear about the support it will be able to provide. Often, patients need a plan that involves Internet or community resources that teach them about problem solving, weight loss, blood sugar control, etc. (For more information on using community resources, see "Caring for Seniors: How Community-Based Organizations Can Help," page 13.) The support plan can be revisited, reinforced, and modified at subsequent visits.

When a patient's progress is slow, consider

whether pain or emotional problems (anxiety, depression, etc.) are present. An additional intervention such as telephone outreach is often needed to help these patients achieve behavior change. The patient's response to the question "What will it take to move higher on the confidence scale?" should guide the choice of resources. The patient may need to be referred to a health coach, case manager, or a specialist in behavioral therapy. Peers who have completed a chronic disease self-management program or those who are members of community support groups may be valuable resources as well.

Reassessment and reinforcement is usually needed to improve health confidence. When health confidence becomes part of everyday clinical service, the practice will find that it is a powerful stimulus for behaviorally sophisticated actions and a useful organizing principle for more efficient and effective services.

The next "blockbuster drug"

Patient engagement has been rightfully likened to a blockbuster drug for successful management of chronic conditions and the reduction of health risks.¹⁰ However, its appropriate prescription has been limited by its vague definition. Health confidence provides a free, easy to use, actionable measure to encourage patient engagement and better practice. **FPM**

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10. Dentzer S. Rx for the "blockbuster drug" of patient engagement. *Health Aff*. 2013;32(2):202.

Send comments to fpmedit@aafp.org, or add your comments to the article at <http://www.aafp.org/fpm/2014/0900/p8.html>.

ADDITIONAL RESOURCES

The following resources can assist practices with assessing patients and their health confidence:

HealthConfidence.org

<http://www.healthconfidence.org>

This site provides a complete health assessment with tailored information and a personal health plan for people age eight to 99. It also offers figures and forms related to this article, such as the "Problem Solving" tool (<http://www.healthconfidence.org/pblmslv/>), which can help patients prioritize their problems and develop practical solutions.

MedicareHealthAssess.org

<http://www.medicarehealthassess.org>

This site incorporates health confidence into a paper or electronic checkup for Medicare annual wellness visits. There is a "short form" version and a "long form" version, which automatically adds a personal health plan that the user can share and update at any time.

VeryIll.org

<http://www.veryill.org>

This site offers a tool for clarifying and supporting the needs of patients who are frail or need palliation or hospice care.

Health Assessments in Primary Care: A How-to Guide for Clinicians and Staff

<http://1.usa.gov/1p5wmGU>

This is a "how to" manual for health assessment in primary care practice created by the Agency for Healthcare Research and Quality. It offers additional links to information and communication technologies.

Patient Activation Measure

<http://bit.ly/OGd1ha>

This site offers a multi-item measure for patient activation that includes many items for patient health confidence.


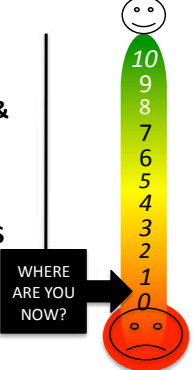
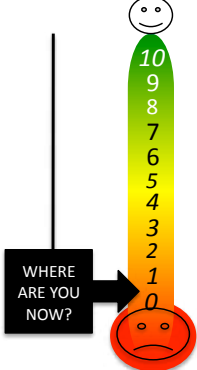
Further reading:

Stewart EE, Fox C. Encouraging patients to change unhealthy behaviors with motivational interviewing. *Fam Pract Manag*. 2011;18(3):21-25. <http://www.aafp.org/fpm/2011/0500/p21.html>.

Hibbard J, Lorig K. The dos and don'ts of patient engagement in busy office practices. *J Ambul Care Manage*. 2012;35(2):129-132.

Simmons L, Baker NJ, Schaefer J, Miller D, Anders S. Activation of patients for successful self-management. *J Ambul Care Manage*. 2009;32(1):16-23.

Examples of Alternative Health Confidence Layouts

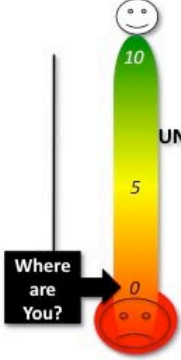
White River Family Practice	What number best describes you...“0” (red) to a “10” (green)...or somewhere in between?	Name: _____
		Date: _____
	<p>Best Health Confidence</p> <p>I CAN CONTROL & MANAGE MOST HEALTH PROBLEMS</p> <p>WHERE ARE YOU NOW?</p> 	<p>Best Health Information</p> <p>INFORMATION IS UNDERSTANDABLE & USEFUL</p> <p>WHERE ARE YOU NOW?</p> 
		<p>Scores</p> <p>Confidence _____</p> <p>Health Information _____</p>

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A “Best Health Confidence 10” means you are very confident you can control and manage most of your health problems.

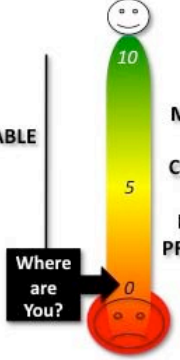
A “Best Health Information 10” means the information your healthcare team has given you about your health problems or concerns has been excellent, understandable and useful.

Best Health Information



Where are You?

Best Health Confidence



Where are You?

Whenever You Think About Your Health or Health Care

IF YOU SCORE YOURSELF WITH A 2 OR HIGHER

ASK, WHY DID YOU NOT SCORE A 0 (zero)?

IF YOU ARE BELOW THE DARK GREEN (8 OR LESS)

ASK, WHAT WOULD IT TAKE TO MOVE UP YOUR SCORES TWO or THREE POINTS?

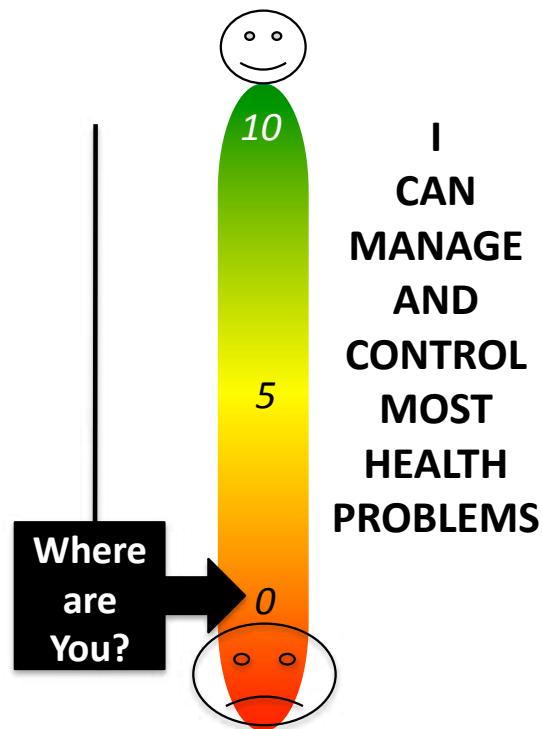
Mark a “10” (green) if you are very confident you can control and manage most of your health problems

Mark a “10” (green) if the information your doctors or nurses have given you about your health problems or concerns has been excellent, understandable and useful

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What number best describes you... “0” (red) to a “10” (green)... or somewhere in between?

Best
Health
Confidence



A “Best Health Confidence 10”

means you are very confident you can control and manage most of your health problems.

Zero (0) means that you are not confident at all. If you are somewhere in the middle, mark a number that comes closest to describing your confidence

A "HealthConfidometer"

Whenever You Think About
or Talk About
Your Health and Health Care

Mark a "10" if you are
very confident you can
control and manage most
of your health problems.

Mark a "0" if you are not
very confident.



A "HealthConfidometer"

(El medidor de Confianza en la Salud)

Cuando usted piensa o habla de
su salud o su cuidado de salud

Marque un "10" si usted está
muy seguro de que usted puede
controlar y manejar la mayor
parte de sus problemas de salud.

Marque un "0"
si no está muy seguro.

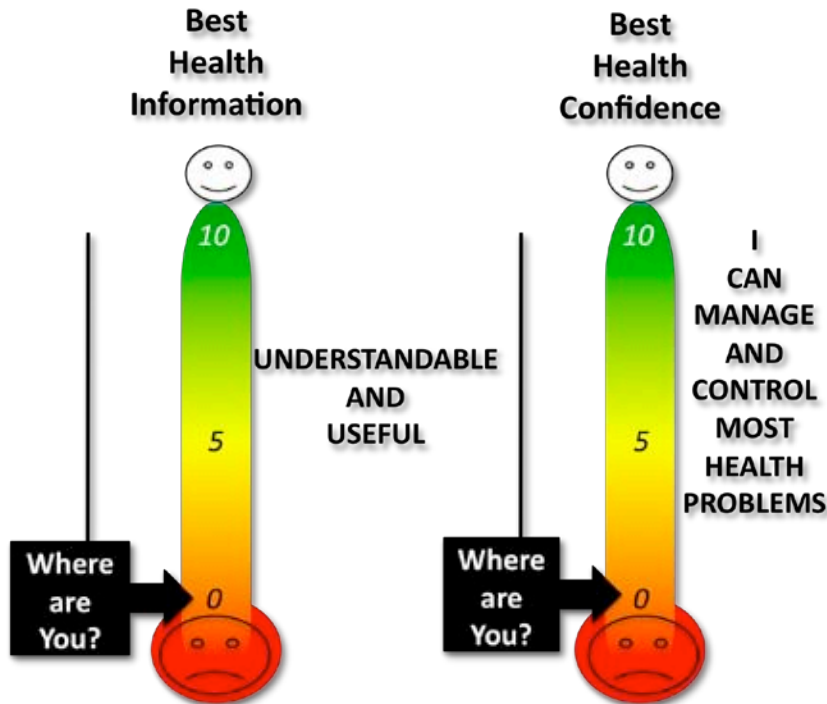


Patient Self-Assessment

Today's Date _____

Name _____

Whenever You Think About or Talk About Your Health and Health Care



Best Information: Mark a "10" if the information your doctor or nurse gave you about your health problems or concerns has been excellent. Mark a "0" if the information has been poor.

Best Confidence: Mark a "10" if you are very confident you can control and manage most of your health problems. Mark a "0" if you are not very confident.

Your

Go to www.HealthConfidence.org to improve your health confidence, health information, and health care.

Health Confidence _____ and Information Scores _____

IF YOU ARE IN THE YELLOW  OR RED ZONE 

WHAT IS YOUR PAIN SCORE ____ AND FEELING SCORE ____ (Attached)

WHAT WILL IT TAKE TO MOVE YOU TO THE  GREEN ZONE?

Clinician and Patient Plan

Today's Date _____

Name _____

Whenever You Think About or Talk About Your Health and Health Care



Best Information: Mark a "10" if the information your doctor or nurse gave you about your health problems or concerns has been excellent. Mark a "0" if the information has been poor.

Best Confidence: Mark a "10" if you are very confident you can control and manage most of your health problems. Mark a "0" if you are not very confident.

Go to www.HealthConfidence.org to improve your health confidence, health information, and health care.

Signature: _____

Your Health

Patient Category Based on Scores: _____

Patient's suggested action to better Health Confidence _____

Other Comments and Plans _____

Patients suggested action to better Understanding _____

Confidence _____ and Information Scores _____

IF YOU ARE IN THE YELLOW OR RED ZONE

WHAT IS YOUR PAIN SCORE ____ AND FEELING SCORE ____ (Attached)

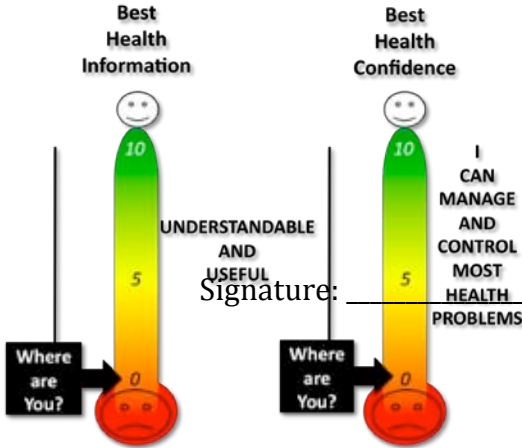
WHAT WILL IT TAKE TO MOVE YOU TO THE GREEN ZONE?

PATIENT COPY

Today's Date _____

Name _____

Whenever You Think About or Talk About Your Health and Health Care



Best Information: Mark a "10" if the information your doctor or nurse gave you about your health problems or concerns has been excellent. Mark a "0" if the information has been poor.

Best Confidence: Mark a "10" if you are very confident you can control and manage most of your health problems. Mark a "0" if you are not very confident.

Go to www.HealthConfidence.org to improve your health confidence, health information, and health care.

Signature: _____

Your Health

Patient Category Based on Scores:

Patient's suggested action to better Health Confidence

Other Comments and Plans

Patients suggested action to better Understanding

Confidence _____ and Information Scores _____

IF YOU ARE IN THE YELLOW OR RED ZONE

WHAT IS YOUR PAIN SCORE ____ AND FEELING SCORE ____ (Attached)

WHAT WILL IT TAKE TO MOVE YOU TO THE GREEN ZONE?



Questions and Ideas To Improve My Health Confidence

	When I Am Being Discharged From A Hospital or When I Am Told A New Diagnosis	Whenever I Talk With A Doctor Or Nurse or Whenever I Manage a Health Problem or Concern
CHECK (Health Confidence)		
<p>What Matters to Me?</p> <p>I need to understand my health care needs and how I can help in managing my problems and concerns.</p>	General Measures. How does the question about Health Confidence help me think about what matters to me?	How am I doing avoiding problems and building on my strengths? Am I becoming more health confident?
	Specific Measures. What is being measured that matters for my condition(s) now?	What should I measure on my own?
	Medications and Treatment. What do the treatments and medicines mean and what do I need to do now?	What new skills do I need to get the most out of the treatments and medicines? What decisions might I have to make? What is my future?
ACTION (For Health Confidence)		
<p>What I will do, what others will do, and what others will help me do.</p>	General Actions. I have a list of what I am going to do.	I have a plan to better manage my health.
	Specific Actions. I have a list of warning signs or “red flags.”	I know how to respond to changes in my condition(s) and when I should seek help.
	Medications and Treatments. I know how to keep track and report what I am doing.	I know how to keep track and report what I am doing.
REINFORCEMENT (Of My Skills)		
<p>The health care team and helpers in the community help me do the right things at the right time.</p>	I am able to describe a self-management responsibilities and what I will do when problems occur.	As my health confidence increases I know how to use helpful tools and people to better my health and life.
ENGINEER (Build A Strong Bridge)		
<p>I am setting up a system of care and support that will make it very difficult for me to “get into trouble.” I have a clear plan including a plan for if I am too sick to speak for myself.</p>	I have helped put together the best plan and support I can for this short term. I am thinking about what I will need to do in the future.	With the help I needed, I am confident that I have set up and built a plan for managing my problems now and in the future.

FEELINGS

During the past 4 weeks...






How much have you been bothered by emotional problems such as feeling anxious, depressed, irritable or downhearted and blue?

Not at all		1 2 3 4
Slightly		5 6
Moderately		7 8
Quite a bit		9 10
Extremely		

PAIN

During the past 4 weeks...

How much bodily pain have you generally had?

No pain		1 2 3 4
Very mild pain		5 6
Mild pain		7 8
Moderate pain		9 10
Severe pain		

Patient Screener



External Audience: E-Suite and HCPs (Physician, Nurse, Patient Navigator, Pharmacist)
End User: Patient and Caregiver

Description: Bristol-Myers Squibb's version of Dr. Wasson's validated health confidence screening tool



Insight:

- Simple and easy-to-use resource to track and increase patient engagement over time

Tips:



- "High" health confidence is represented by a score of **7 to 10**
- "Low" health confidence is represented by a score **below 7**



- Should be used with patient at multiple touchpoints across the care continuum

Resource Enhancements:

Spanish Language: MMUS1602624-03-01

Editable PDF: MMUS1602624-02-01

Spanish, Editable PDF: MMUS1603078-01-01



Updated Sell-In Flashcard

BRISTOL-MYERS SQUIBB'S
MY HEALTH CONFIDENCE PROGRAM
Supporting Efforts to Improve Outcomes and Decrease Costs

Be Confident. Be Healthy.

Active Patient Engagement is Associated with Improved Outcomes¹

WE UNDERSTAND THAT ACHIEVING THE TRIPLE AIM, RECENTLY EXPANDED TO THE QUADRUPLE AIM, IS CHALLENGING AND COMPLEX, BUT PATIENT ENGAGEMENT PLAYS A CRITICAL ROLE²

- Quality measures, improved outcomes, and sometimes decreasing the cost of care are oftentimes directly and indirectly affected by patient engagement²
- An engaged patient (or caregiver):
 - Listens
 - Is willing to take some accountability
 - Shows some level of commitment



TOO OFTEN PATIENT ENGAGEMENT TOOLS AND PROGRAMS ARE COMPLEX AND DIFFICULT TO IMPLEMENT³

→ The MyHealth Confidence tools are unique in offering a simple and easy-to-use resource to track and increase patient engagement over time²

FEATURES OF THE MY HEALTH CONFIDENCE PROGRAM

 Appropriate for use across care settings	 Easy implementation and integration into existing workflows for all care team members	 Disease-agnostic resources
---	--	---



External Audience: E-Suite and HCPs (Physician, Nurse, Patient Navigator, Pharmacist)
End User: E-Suite and HCPs (Physician, Nurse, Patient Navigator, Pharmacist)



Description: To be used by Market Access team members as a leave-behind for senior level decision makers to generate interest in *MHC* program



Insight:

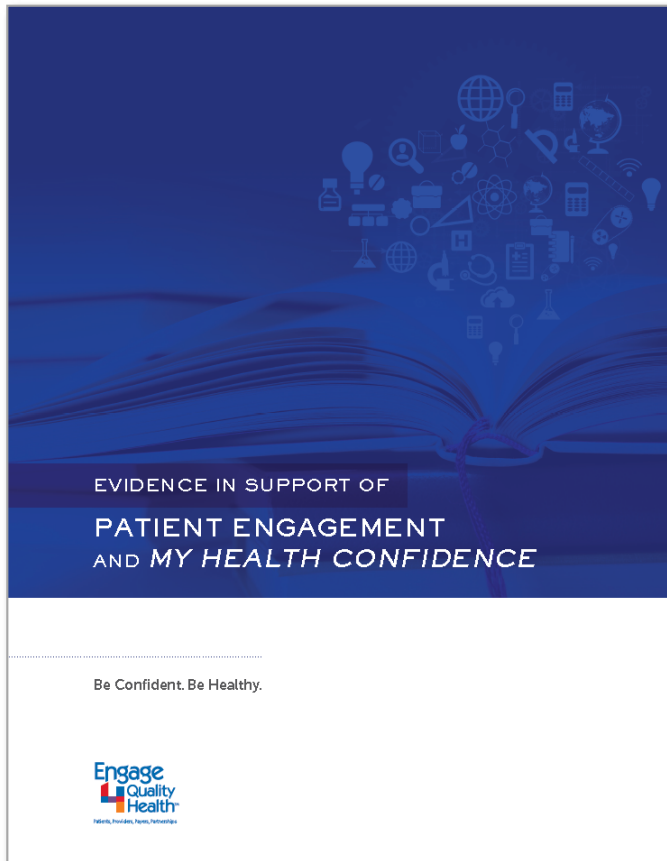
- Presents background around the importance of health confidence, features of the program, as well as the suite of patient and provider pieces
- Piece should be walked through with senior level decision makers prior to leaving behind

Resource Enhancements:



Updated Sell-In Flashcard: NOUS1703115-01-01

Evidence in Support of Patient Engagement and *My Health Confidence*



External Audience: E-Suite and HCPs (Physician, Nurse, Patient Navigator, Pharmacist)
End User: E-Suite and HCPs (Physician, Nurse, Patient Navigator, Pharmacist)



Description: Provides evidence supporting patient engagement's critical role in achieving the Quadruple Aim, acknowledges the complexity and difficulty often associated with implementing patient engagement programs, and introduces *My Health Confidence* as a simple and easy-to-use tool to increase patient engagement over time

Insight:

- Some E-Suite members and HCPs may be interested in MHC, but would like more information on the background research and evidence behind the program
- Use this tool to demonstrate the importance of patient engagement and validity of the *MHC* program



Tips:

- Page 2 contains the same content as the updated *MHC* Sell-In Flashcard (NOUS1703115-01-01)



How To Integrate *My Health Confidence* into Your EMR

Be Confident. Be Healthy.

HOW TO INTEGRATE MY HEALTH CONFIDENCE INTO YOUR EMR

My Health Confidence's single question: "How confident are you that you can control and manage most of your health problems?" is a simple and easy-to-use resource to track and increase patient engagement over time.

In order to better incorporate this simple tool into your organization, consider these three strategies to integrate My Health Confidence into your EMR.

- 1. ADD THE MY HEALTH CONFIDENCE SCORE TO THE FLOWSHEET (IN EPIC)**
 - PROS:**
 - Easy to track and monitor Health Confidence scores through time
 - Cascading functionality can be added
 - If a patient scores below a 7, the reason for low Health Confidence can be recorded
 - Can easily create reports based off this metric
 - Can use the score to trigger a best practice alert, to send an InBasket message (EPIC) or to add an admitted patient to a Patient List for follow-up
 - CONS:**
 - Requires some collaboration with your HIT lead to implement
 - Certain clinicians don't use Flowsheets, which could restrict which users are able to fill out the score electronically
- 2. USE THE MEDIA ACTIVITY TAB (IN EPIC)/SCAN OR SAVE INTO YOUR EMR**
 - PROS:**
 - The My Health Confidence Screener and Action Plan can be easily scanned into the Media tab
 - Providers can monitor patients' Health Confidence scores and goals by reviewing past uploaded documents before and during subsequent visits
 - Requires little to no system build from the HIT team
 - An existing document type may be used to scan in the documents
 - In addition, a new document type may be added by your HIT lead
 - CONS:**
 - Media tab may become cluttered, making it difficult to differentiate from other scanned documents
 - Since the scores aren't recorded discretely, cannot easily track and monitor patients' Health Confidence scores through time
- 3. BUILD A SMARTTEXT (IN EPIC) TO ADD TO YOUR AFTER VISIT SUMMARY**
 - PROS:**
 - A SmartText can help standardize the documentation of a Health Confidence score into your care team's workflow
 - Can easily be shared with patients to help shared decision making
 - Most users are familiar with SmartTexts and use them often which would make this easy to implement for a wide variety of users
 - CONS:**
 - May require collaboration with your HIT lead to implement
 - Cannot easily track and monitor patients' Health Confidence scores through time
 - Difficult to report on
 - Difficult to see across encounters
 - Not recorded as discrete data point

Materials developed by Bristol-Myers Squibb Company
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External Audience: E-Suite and organization's HIT stakeholders
End User: E-Suite and organization's HIT stakeholders



Description: Provides three strategies to integrate *My Health Confidence* into organizations' EMRs

- Flowsheet
- Media Activity tab
- SmartText



Insight:

- Integrating into an EMR has many benefits including:
 - Providing discrete documentation
 - Measuring provider adherence
 - Tracking information across encounters



Tips:

- Use this piece as a guide that provides options for customers to consider when implementing *MHC* into their EMR
- Organizations' HIT experts will likely have preferred methods to incorporate new tools into their EMR

MY HEALTH CONFIDENCE PROVIDER GUIDE

If a patient's health confidence score is high, represented by a score of **7 to 10**, and it is clear they have a good understanding of their health problems, proceed with regular care.

If a patient's health confidence score is low, represented by a score **below 7**, use this tool alongside their Action Plan to help identify and address their confidence gaps.

SCREENER FOLLOW-UP

- Patient records name, date, and confidence score
- Patient lists any areas of concern that may be affecting their confidence score. Some common concerns may be:
 - Financial/Socioeconomic
 - Medication Access and Management
 - Psychologic (Depression, Grief, Anxiety, etc)
 - Smoking and Drinking
 - Weight, Exercise, Diet
 - Transportation Management
 - Symptom Management
- Review areas of concern listed by patient and identify immediate next steps that the care team/organization can take to address them. Some next steps may be:
 - Referral to social work
 - Referral to case management
 - Referral to psychologist
 - Consult with pharmacist
 - Consult with physician
 - Enroll in disease management programs
 - Enroll in community-based programs
 - Enroll in additional support programs
- Document within patient's electronic medical record their health confidence score, areas of concern that are affecting their confidence level, and steps taken by the care team/organization to address patient's concerns as part of the *My Health Confidence* initiative

GOAL SETTING

- Patient records steps they think they can take to improve their confidence score
 - Sample language to use with patient: "What steps do you think you can take to move from a 4 to a 7?"
- Patient sets and records a goal that will help them to improve their confidence score and a date or event by when they want to achieve this goal
 - Ensure goal set by patient is reasonable, achievable, and measurable
- Patient identifies and records steps and timelines necessary to achieve goal
 - Review example presented in patient Action Plan
- Remind patient to fill out progress notes as they complete each step and to bring their Action Plan to their next appointment

FOLLOW-UP VISIT (IF APPLICABLE)

- Re-check patient's confidence score, record score in Action Plan, and assign as higher, same, or lower
 - If score improved, reinforce progress patient has made
 - If score remained the same or declined, refer back to Screener Follow-Up section above
- Review completed Action Plan with patient
- Reinforce any progress that the patient has made toward achieving goal
 - Sample language to use with patient: "It's great to see you managing your disease. I'm encouraged by the continued progress you're making."
- Identify any setbacks that may have hindered the patient's ability to achieve their goals
- If necessary, help the patient to identify additional steps and to create timelines that will enable them to achieve their goals

MY HEALTH CONFIDENCE ACTION PLAN

Be Confident. Be Healthy.

Complete this Action Plan with a member of your care team to identify and address your confidence gaps and and take steps towards improving your health confidence.

Name: _____ Date: _____ Confidence Score: _____

SCREENER FOLLOW-UP

- What concerns do you have that may be affecting your health confidence score?

○ _____

○ _____

GOAL SETTING

- Are there any steps that you think you can take to improve your health confidence score?

○ _____

○ _____

- Set a goal that will help improve your health confidence score:

○ My goal is: _____

○ I want to achieve this goal by (date/event): _____

STEPS TO ACHIEVING GOAL

- Record below the steps you will take to achieve your goal:

[**Example: Step 1:** I will review the materials provided by my doctor. **Done by:** Saturday **Completed:** Yes No]

Step 1: _____

Done by: _____ (date) Completed: Yes No

Notes on progress _____

Step 2: _____

Done by: _____ (date) Completed: Yes No

Notes on progress _____

Step 3: _____

Done by: _____ (date) Completed: Yes No

Notes on progress _____

FOLLOW-UP VISIT (For Clinician Use Only)

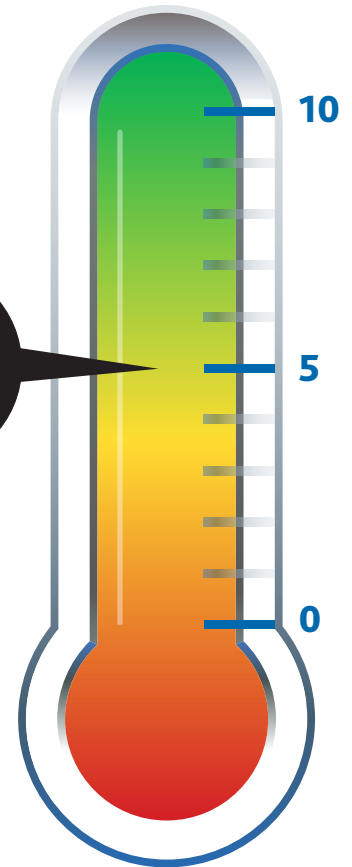
Date: _____ Confidence Score: _____ Higher/Same/Lower: _____

MY HEALTH CONFIDENCE SCREENER

MEASURING YOUR HEALTH CONFIDENCE:

How confident are you that you can control and manage most of your health problems?

Adapted from: Wasson J, Coleman EA. Health Confidence: A simple, essential, measure for patient engagement and better practice. *Fam Pract Manag.* 2014;21:8-12.



A QUICK CHECK For Better Health and Health Care

During the past 4 weeks, how much have you been bothered by emotional problems such as feeling anxious, depressed, irritable, or sad?				
Not at all	Slightly	Moderately	QUITE A BIT	EXTREMELY
During the past 4 weeks, how much bodily pain have you generally had?				
No pain.	Very mild pain.	Mild Pain	MODERATE PAIN	SEVERE PAIN
How many different prescription medications are you currently taking more than three days a week?				
None	1-2	3-5	MORE THAN 5	
Do you think that any of your pills are making you sick?				
YES	No	MAYBE, I AM NOT SURE	I am not taking any pills	
How confident are you that you can control and manage most of your health problems?				
Very confident	SOMEWHAT CONFIDENT	NOT VERY CONFIDENT	I do not have any health problems	

INSTRUCTIONS:

- ✓ Pick the one answer that describes you best for each of the five questions.
- ✓ Whenever your answer is in **BIG PRINT**, give yourself one point. You can have at most 5 points and at least, no points.
- ✓ Add up your points. People with a sum of two or higher have an increased risk of using the hospital or emergency room during the next year. Therefore, they need to make sure that doctors or nurses are aware of the needs and that they have good communication with all health professionals. They also benefit when they complete full check-up using www.HowsYourHealth.org and bring the results (the Action Form) to their clinical appointments. HowsYourHealth also automatically creates a personal health record that can be used to keep track of their progress.
- ✓ A person with a sum of one should consider taking similar action as a person with a sum or two or more.
- ✓ If you are **SOMEWHAT OR NOT VERY CONFIDENT**, ask yourself “what would it take for you to be able to say that you are very confident that you can control most of your health problems during the next two months?” Write that plan here and share it with someone who can help you.

Based on: Validation of the What Matters Index: a brief, patient-reported index that guides care for chronic conditions and can substitute for computer-generated risk models