

Patient and Family Education

Standard PCC.04.00

The hospital provides an education program that is based on the care, treatment, and services it provides and meets the needs of the patient population it serves.

Intent of PCC.04.00

Patient education promotes patient engagement and leads to improved outcomes, including improved adherence to medications and treatments. The hospital creates its education program based on services provided and the needs of its patient population. The hospital chooses how the program is organized and how resources are allocated.

Clinical staff collaborate to develop patient education materials. This collaboration results in more comprehensive, consistent, and effective patient education. Those responsible for providing patient education have the knowledge, resources, and communication skills to do so. The hospital decides how to oversee the education program. Examples of oversight include an education coordinator, committee, or service.

The hospital ensures that those providing education have resources to do so. This may include the following:

- Providing training on how to provide effective patient education
- Assigning clinical staff with the appropriate clinical or educational background in the subject matter
- Providing patient resources (for example, on-demand education videos, written materials, hands-on exercises, materials to teach how to use new technology or equipment following discharge)
- Ensuring access to translator services

Measurable Elements of PCC.04.00

1. The hospital plans education based on the care, treatment, and services provided and the needs of its patient population. (*See also* ASC.02.03, ME 2; ASC.03.01, ME 2; HCT.01.01, ME 4)
2. The hospital has a program to educate patients throughout the hospital that includes the following:
 - Oversight by a qualified member(s) of the clinical staff
 - Access to educational resources based on the care, treatment, and services provided and the needs of the patient population
3. Patient and family education is developed and delivered collaboratively by interdisciplinary staff members.
4. Clinical staff who provide the education have the subject knowledge and communication skills to do so.

Standard PCC.04.01

Each patient's educational needs and learning ability are assessed and documented in their medical record.

Intent of PCC.04.01

Clinical staff must understand each patient's unique educational needs and learning ability to deliver effective education. Education focuses on the specific knowledge and skills the patient will need to make care decisions, participate in their care, and continue care at home or the next level of care.

A patient's individualized educational needs are based on the patient's care and treatments. Educational needs are documented in the patient's medical record throughout the care continuum as needs are identified or changed. Documentation of these needs makes it easier for the patient's care team to participate in the education process. Education needs include the following:

- A patient's preferred language for spoken or written information
- A patient's preferred way of receiving information (for example, a video, demonstration, written materials)
- The participation of an additional learner (for example, a parent, a home care nurse)

There are many patient variables that determine if the patient and family are willing and able to learn. Qualified clinical staff assess patients and their family for any learning needs or barriers and readiness to learn. Patients and families may be affected by learning barriers. Examples of barriers include the following:

- Literacy level
- Language
- Motivation
- Visual or hearing impairments
- Learning disorders

Education is provided to patients and families throughout the care process and documented in the patient's medical record. Examples of when education occurs and documented include the following:

- As part of the process of obtaining informed consent for treatment
- When patients are expected to be discharged home with a medical device or dressings for a wound
- At the start of a new home feeding or medication regimen

Each hospital decides documentation requirements for the educational assessment, planning, and delivery of patient education.

Patients and their families are encouraged to participate in the care process and to ask questions. The hospital has a process to verify that patients and their families understand the education they have received, such as use of the "teach back" method.

Measurable Elements of PCC.04.01

1. Each patient's and, when appropriate, family's educational needs and preferences are assessed and recorded in the patient's medical record. This must include, at a minimum, the following:
 - The language the patient prefers for education
 - The form(s) the patient prefers for education
 - Who should receive education in addition to the patient (for example, a spouse or caregiver)
 - Any known barriers to learning
2. Education provided to patients and families is documented in the patient's medical record. (*See also* ACC.04.01, ME 5)
3. The hospital has a process to verify that patients and families acknowledge receipt and understanding of the education provided. (*See also* ACC.04.01, ME 5)