

PFE.2.1 Patient/family education is provided in an easy language understandable by the patient/family.

PFE.2.2 Sufficient time is provided to allow the patient to understand the information provided and interact with the health educator.

Standard Intent:

The information given to the patient should be appropriate for the patient's age, literacy level, education, and language skills. Patient materials should be geared between sixth- and eight-grade reading levels. Use of medical terminology or jargon should be avoided. The education subjects should be provided in the patient's preferred language and the hospital has to have alternative educational means for the patients with special needs (e.g., sign language for the hearing-impaired patients, and assistance modalities for sight impaired patients).

PFE.3 Each patient's educational needs are assessed and planned.

PFE.3.1 Staff conduct educational needs assessment for every patient by:

PFE.3.1.1 Assessing learning needs.

PFE.3.1.2 Assessing literacy skills.

PFE.3.1.3 Assessing caregiver/patient's readiness and ability to learn.

PFE.3.1.4 Assessing patient's capability and motivation to provide self-care.

PFE.3.1.5 Assessing caregiver/patient's appropriate educational materials and methods that meet their learning skills.

PFE.3.1.6 Assessing who will provide care after discharge (caregiver and/or patient).

PFE.3.2 Staff use the assessment findings for planning and delivery of education as appropriate to the plan of care.

PFE.3.3 Staff provide the caregiver/patient with educational materials that meet their learning skills (e.g. written and verbal notes, pictures, demonstration).

PFE.3.4 When the patient is unable/unsuitable to learn (e.g., comatose, child, mentally disabled), education is provided to the family or the caregiver.

Standard Intent:

Effective education begins with an assessment of the patient and family's learning needs. This assessment determines not only what needs to be learned, but also how the learning can best occur. Learning is most effective when it suits an individual's learning preferences, religious and cultural values, and reading and language skills, and when it occurs at appropriate points in the care process.

The goals of the patient educator are to provide support and information, to correct misconceptions, to assist patient in understanding their role, and to identify learning needs. Next, he starts to set goals and priorities to decide which ones he will teach to his