

Using a Competency-Based Approach to Patient Education: Achieving Congruence Among Learning, Teaching and Evaluation

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- Patient education • Competency-based education
- Chronic health problems

Millions of Americans are living with and managing their chronic health problems. Patient education plays an essential role in promoting safe self-management practice. To ensure that patients attain the required abilities, patient education needs to be competency-based. When developing and applying a competency-based patient education lesson/program, each nurse must answer questions concerning essential competencies, optimal teaching methods, best method to evaluate patient achievement, and documentation of evidence. This article describes how the authors used these questions as a guide to achieve congruence among intended learning, instruction, and evaluation to design and implement a patient education program, Managing Heart Failure, at a local hospital.

Millions of Americans are living with and managing their chronic health problems. Patient education plays an essential role in promoting safe self-management practice. The Joint Commission on the Accreditation of Health Care Organizations

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(JCAHO) mandates that each patient receive education and training specific to the patient's needs and as appropriate to the care, treatment, and services provided.¹ To meet accountability criteria, nurses not only need to document that teaching activities have taken place, but also provide evidence that learning has occurred. Verbalized understanding is often used by nurses to document actual learning outcomes of patient education. However, that phrase is not sufficient to indicate the accuracy/degree of understanding, and to support the contention that patients are able to apply the knowledge and skills required for taking care of themselves.

To ensure that patients attain the required abilities, patient education needs to be competency-based. The main focus of competency-based education is on the outcomes; the patient education process must begin with the outcomes in mind.² This implies that instructional activities and evaluation methods must be carefully aligned with the intended learning outcome objectives.^{2,3} Incongruence among learning outcome objectives, instruction, and evaluation may lead to the following problems:

Inability to achieve the intended learning results if the instructional activities are not aligned with the objectives

Inability to obtain sufficient evidence of teaching effectiveness if the instructional activities are not aligned with the assessment methods

Inability to provide evidence of learners' accomplishment of objectives if the assessment methods are not aligned with the objectives.³

When developing and applying a competency-based patient education lesson/program, each nurse must answer the following questions:

What are the essential competencies for patient self-management of health?

What teaching methods will yield the intended learning?

What are the most appropriate methods to evaluate how well a patient has achieved the competencies?

How should the evidence of learning be documented?^{2,3}

In this article, the authors describe how they used these questions as a guide to achieve congruence among intended learning, instruction, and evaluation to design and implement a patient education program, Managing Heart Failure, at a local hospital.

WHAT ARE THE ESSENTIAL COMPETENCIES FOR SELF-MANAGEMENT OF HEART FAILURE?

When determining competencies for self-management of health, patient educators must adopt current best practices. Based on the guidelines established by the American College of Cardiology (ACC) and the American Heart Association (AHA), the heart failure (HF) education nurse identified the following essential content knowledge for HF: the disease process and symptom monitoring, medication adherence, dietary adherence, and activity/exercise modification.⁴

The ultimate purpose for this education program was to prepare patients for the transfer of knowledge into real-life application. To promote transfer, learners must be engaged in cognitive processes beyond remembering.³ In addition to remembering what was learned, learning outcome objectives need to reflect higher-order cognitive processes associated with comprehending, applying, analyzing, and evaluating.

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