Guidelines for Use of Patient-Family Teaching Form

Purpose

- To assure documentation of the information and instructions given to the patient/family.
- To facilitate continuity of teaching activities during hospitalization and following discharge.
- To provide the health professional an ongoing record of the patient/family's ability to meet mutually set learning goals related to safe self-care following discharge.

Scope

Information and instruction given by the Respiratory Care Practitioner to the patient/family shall be:

- Consistent with the medical plan of care
- Documented on the Patient/Family Teaching form (#5635), which will be maintained as a permanent part of the patient's medical record.

The Patient/Family Teaching form shall be utilized by Respiratory Care Service personnel in the following manner:

- Respiratory Care Practitioners will record any patient/family teaching activities performed as part of routine respiratory care.

Evaluation:
When specific learning goals and objectives are preprinted on the back of a Patient/Family Teaching form, a narrative note shall be included in the Progress Notes addressing any learning objective which is not met by the patient.

Accountability:
Licensed Respiratory Care Practitioners with minimal supervision of the Supervisor or Respiratory Care Practitioner with understanding of age specific requirements of the patient.

Procedure

Step	Action
1	The therapist will carefully assess the patient's/family readiness and ability to learn, considering the following Expectation of ability for self-care following discharge: • Current acuity level • Medical Plan of Care • Family history and support • Primary Language • Educational level
2	Formulate a teaching plan: After discussion with patient/family of projected learning/discharge needs, incorporate broad learning goals into written plan of care.

Continued next page

Procedure Continued

Step	Action
3	Select one of the following Patient/Family Teaching forms for documenting teaching activities: • Generic form: a blank form with the same format printed front and back on which may be written the teaching activities designed to meet the individualized needs of the patient/family. • Preprinted form: a form on which an approved teaching plan/outline has been printed, offering a standardized teaching protocol for the specific medical or nursing diagnosis designated in the title.
4	When using the generic form, list topics in the column marked Teaching Subjects which may be addressed during periods of routine care; e.g., medications, special procedures, self-care skills. Audiovisuals utilized in instruction should be listed by title. Document teaching method and patient response to each topic by using the steps described below.
5	When using a preprinted form, essential topics will be listed. Follow the Teaching Guide outlined on back of the form and document teaching method and patient response for each section completed using the steps described below.
6	Document **Method** used: Place initials and date in the block under the subheading that best describes the method used to teach the subject. Subheadings include: **Explanation**: for any information listed under Teaching Subjects which is related to the hospitalization and post-discharge care and which is discussed with the patient/family. **Audiovisuals:** for any program listed under Teaching Subjects that is shown to the patient/family, either individually or on the Hospital Health Channels. List by title any audiovisuals used in Patient/Family Teaching under Teaching Subjects. **Demonstration:** for demonstration of any skill or procedure listed under Teaching Subjects which is needed by the patient/family for some phase of care. **Reinforcement**: for repetition of instruction given previously by another healthcare professional practitioner to confirm patient understanding and correct usage.

Continued next page

Procedure Continued

Step	Action
7	Document **Outcome** of teaching: Place initials and date in the block under the subheading that reflects the patient/family response to teaching. Subheadings include: **Verbalizes/Understands** - when the patient/family can successfully state in his/or own words the subject matter being learned and listed under Teaching Subjects. **Satisfactory Return Demonstration** - when the patient/family has successfully demonstrated an ability to perform a specific skill listed under Teaching Subjects (e.g., dressing change/clean technique). **Follow up Needed -** when a problem has been encountered with teaching that may necessitate additional teaching time or referral to another health discipline. **NOTE:** Plans for follow up interventions must be documented in the Progress Notes.
8	**Information Handouts**: List by title any printed information/educational materials given to the patient/family.
9	**Comments:** Note in this space any pertinent information that may be needed by other health professionals during teaching activities, e.g., "Patient speaks little English. Translator is recommended".
10	**Name of Translator**: This information is provided when a translator has been utilized during some segment of teaching activity.
11	**Classes Attended**: List the title/subject addressed during group teaching/learning activity.

Special Notes for Form Use

- **(*)** The use of a "star" or asterisk in a block with initials and date is used to indicate an additional narrative note in the Progress Notes. This allows the respiratory care practitioner to address in more detail any identified teaching problem or need with the Teaching Subject.

Continued next page

Special Notes for Form Use Continued

- **(N/A)** Should be used in blocks on preprinted forms to designate any Teaching Subject listed which may not be appropriate for a specific patient's needs.
- **Patient/Parent Signature**: may be required on preprinted forms used in certain clinical areas. At time of discharge the instructor may ask the patient/parent to review the documentation on the form and designate agreement at having received the specified information/instruction.
- **Initials/Signature**: The respiratory care practitioner's full signature should appear one time only so that accountability for initials can be assured. Signatures of respiratory therapy students must be countersigned by their instructor.

References

Institutional Handbook of Operating Procedures; Patient/Family Education, Policy #9.3.4, http://www.utmb.edu/policy/ihop/search/09-03-04.pdf

Institutional Handbook of Operating Procedures; Interdisciplinary Plan of Care,.Policy #9.3.4, http://www.utmb.edu/policy/ihop/search/09-13-08.pdf

Attachments

Patient Family Teaching Form