

Creating an individualized patient experience

Through empathy, social support, and a tailored management plan



Agenda



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- Integrating Motivational Interviewing counseling skills and Family Centered Care
- Recommending an appropriate management plan
- · Tailoring a plan for follow up care

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Learning Outcomes

After this course learners will be able to:

- Describe how family-centered care impacts hearing health care.
- Describe 2 methods that can demonstrate empathy during the consultation process.
- Describe how Phonak technology and eSolutions can be used to manage a patient's hearing healthcare journey.

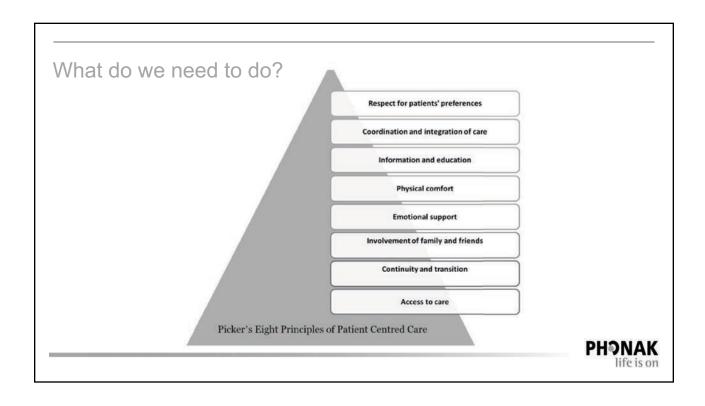


The real "first step"



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1 Get a family member or important communication partner in the room



What is current research telling us about the concept of family-centered care?

- Family support drives help-seeking for hearing impairment
- Family support drives outcomes with hearing aids (e.g. hearing aid satisfaction)
- Family experience difficulties associated with hearing impairment as well as the person with the loss. This is called 'third-party disability' by the WHO. This means family also need help in audiologic care.

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FCC in real life: The current status in clinical practice

50% Average based on HCP report

< 30% Average based on observational studies

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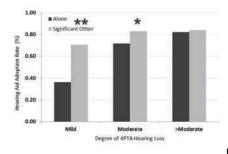


Impact of involving the family member: A retrospective study...

- 60,964 patients
 - 33,933 patients attended appointments alone
 - 27,031 patients attended appointments with a significant other

The group came that came with a SO showed:

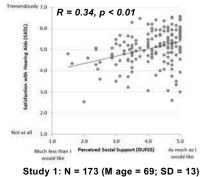
- · A significant increase in
 - hearing aid adoption rate
 - likelihood of purchasing binaural set
 - hearing aid satisfaction
- A decrease in return rate

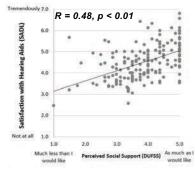


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Singh, G. & Launer, S. (2016) Social context and hearing aid adoption. Trends in Hearing, (20), 1-10

Is there a relationship between FCC and Hearing Aid Satisfaction?







: 69; SD = 13) Study 2: N = 161 (M age = 33; SD = 13)

Social support was the best predictor of hearing aid satisfaction in both studies (even better than reported benefit from the hearing aids)

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2 Setting up the room





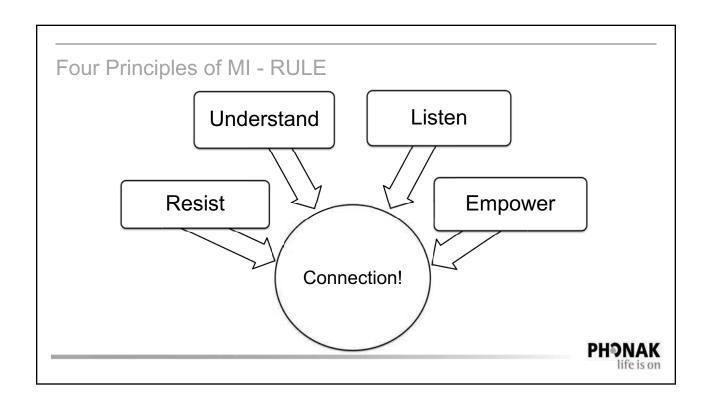
3 The conversation

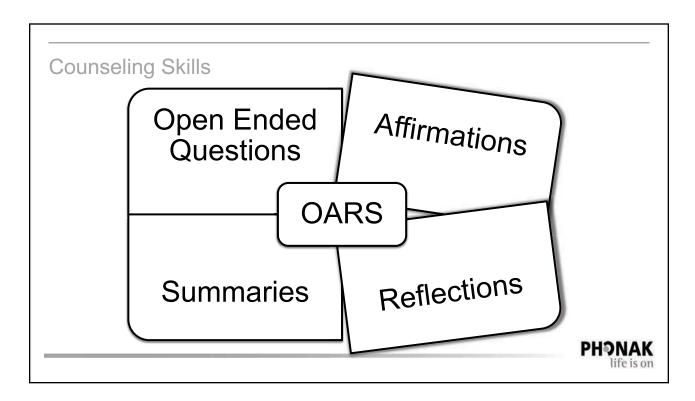
Motivational Interviewing

A person-centered, **goal-oriented** counseling method for helping people change by working through **ambivalence**.









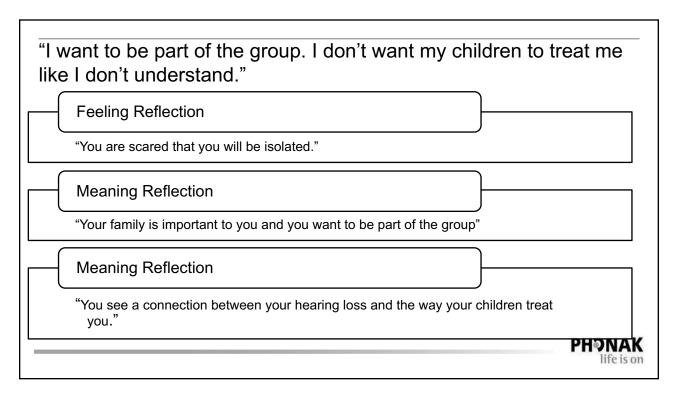


Resistant Behavior and Affirmations

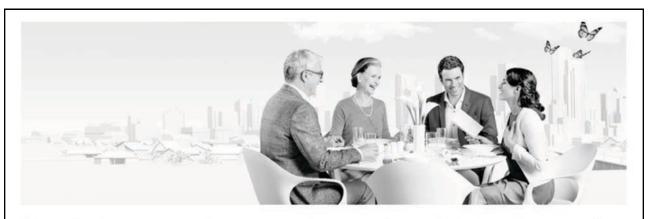
Upset patient has tried amplification several times and has been unsuccessful. Commented on having spent too much money on hearing aids that haven't helped.

"Given your experiences with hearing aids, it makes sense that you might be concerned about coming here today. It must have taken a lot of determination to come anyway."



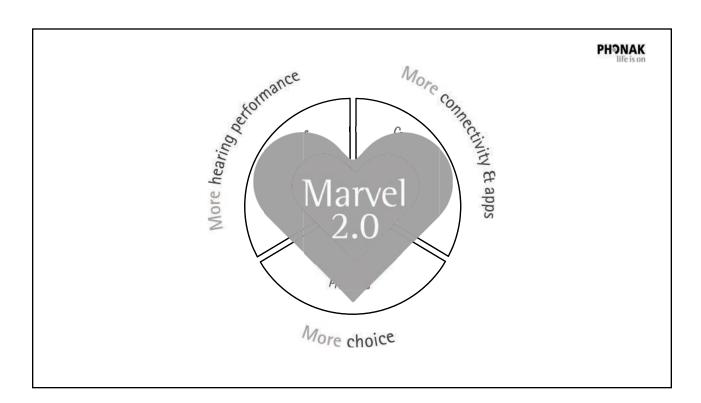




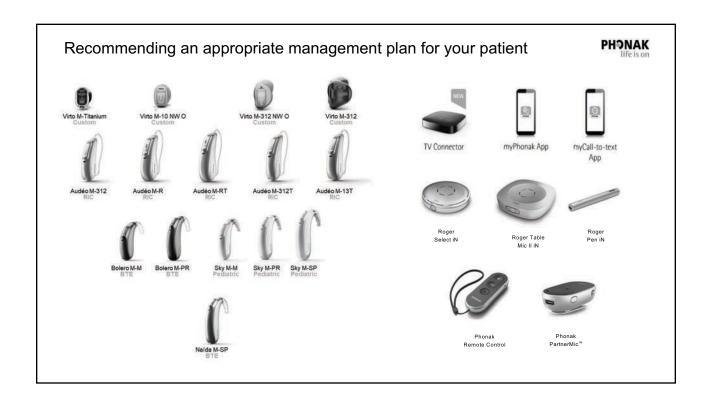


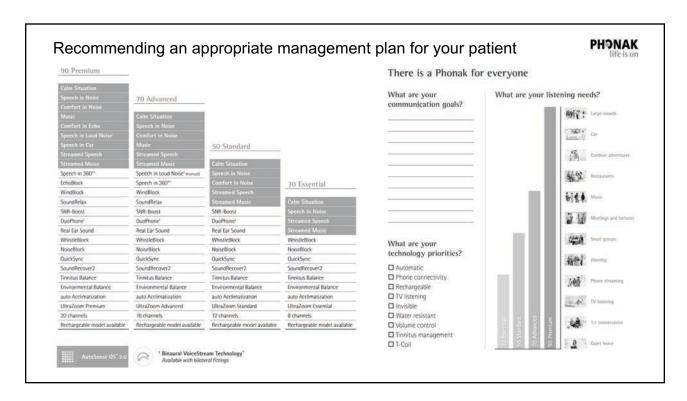
Now that everyone has agreed on goals and that action needs to be taken, it is time to create a management plan



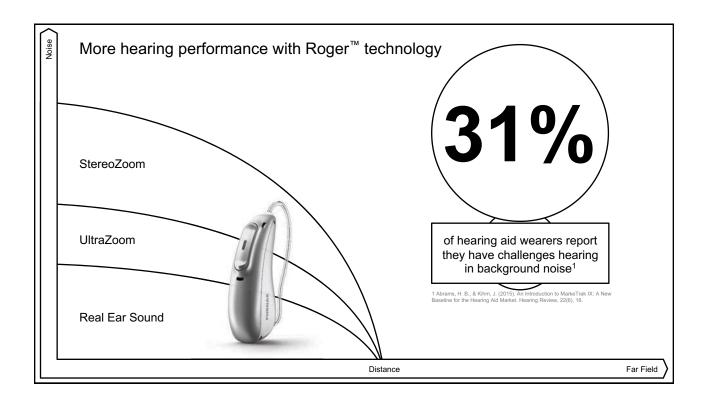


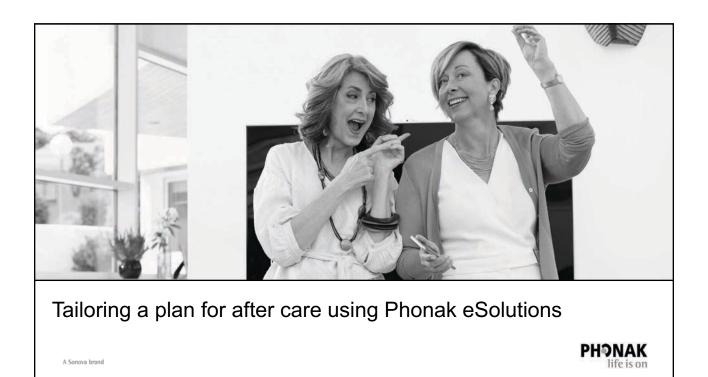




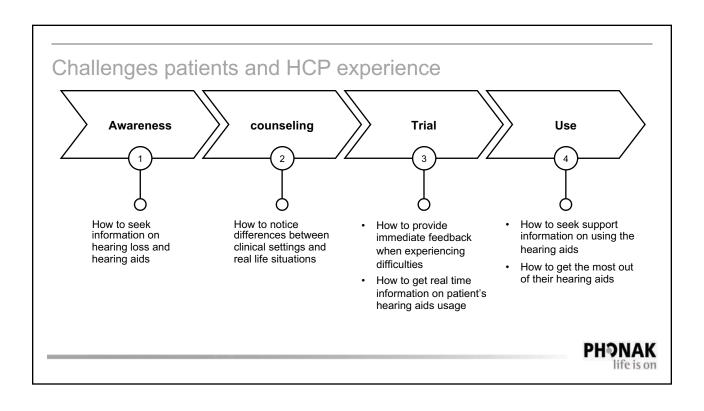


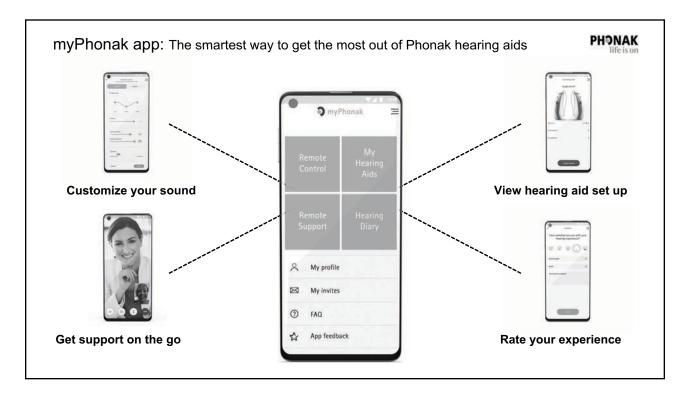




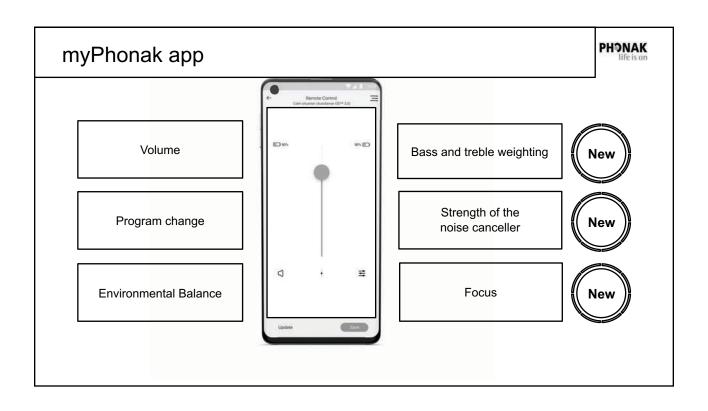


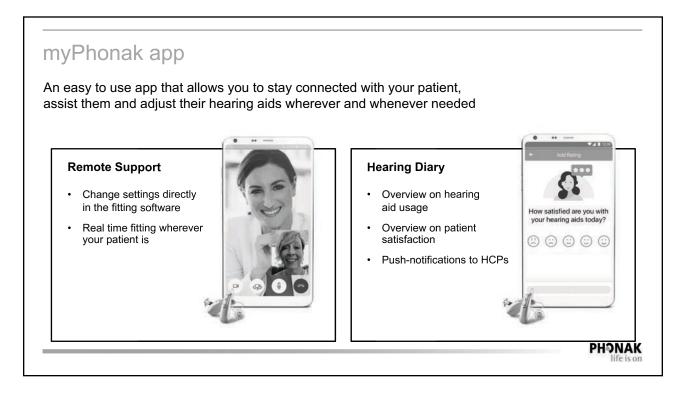










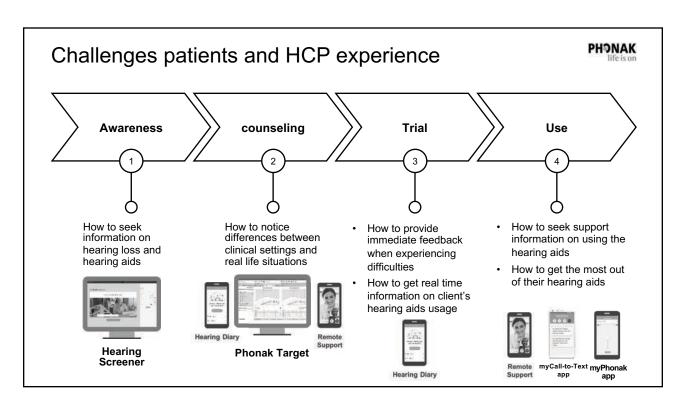






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The Phonak myCall-to-Text app allows users to read, in real time, what the person says on the other end of the phone.





4 Measure outcomes

Step 4: Measure outcomes

Measure outcomes of the management plan agreed upon by the patient and the family member

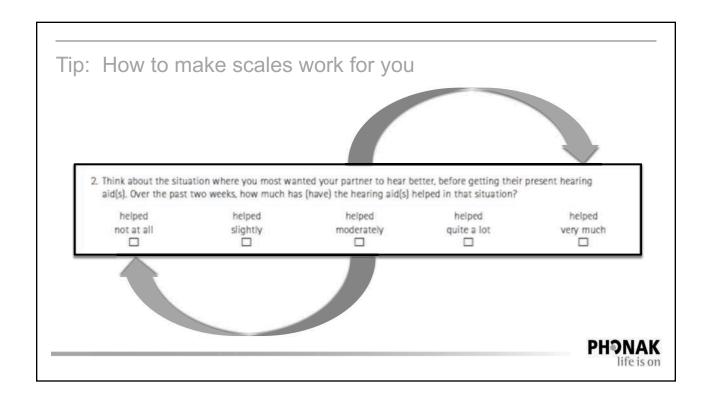
Has the treatment and rehabilitation process effected the goals?

- FOCAS
- IOI-HA & IOI-HA-SO



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Step 4: Incongruent Outcomes

When a family member is included, the complexity of the conversation inherently increases and can often catch us off guard.

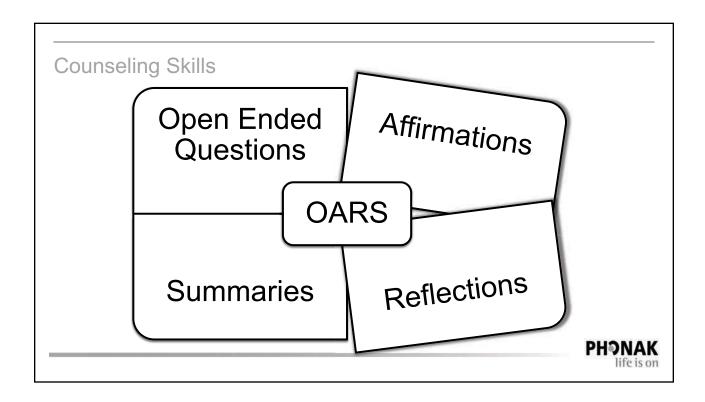
- What if patient and family perspective contradict each other?
- Will we lose control of the appointment?
- Will the patient feel defensive?

This is called having "difficult conversations" and managing "incongruent outcomes".









Double-Sided Reflections

- Highlights ambivalence in patient's statements
- Start with element favoring status quo
- End with dimension favoring change
- "and" versus "but"



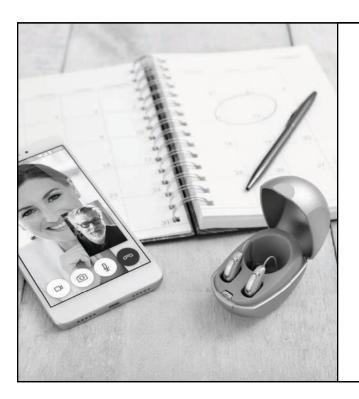


"The hearing aids seem to help when we go out to eat. I don't wear them at home, though. There's nothing I need to hear there."

"But he's still saying "what?" all of the time when we're at home together. I'm still repeating things all of the time. It's frustrating."

"You notice that the hearing aids make it easier to have conversations when you're out together, and, at the same time, you can now see that wearing them at home would make your wife happier."





Empathy and support need to continue throughout the patient's journey



Can one, 30 minute MI session influence behavior?

Table 2. Datalogged Hearing Ald Use at the Nine-Month Follow-Up Visit

Datalogged Hearing Aid Use ^a	Six-Month Visit (before MI)	Nine-Month Visit (after MI)
Hours:minutes/day, mean (SD)b	0:21 (0:29)	
Frequencies, % (n)		
0 h/day	60% (28)	
1 h/day	40% (19)	
2 h/day		
3 h/day		
4 h/day		_
5 h/day		
8 h/day		
Did not attend		

- Follow-up appointments using MI counseling skills along with technical support may increase the use hearing aids for those who rarely or never use their hearing aids
- How can eSolutions be leveraged in this scenario?

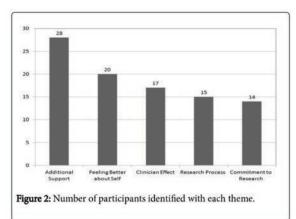
Note: N = 47.

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n Evaluation of Motivational Interviewing for Increasing Hearing Aid Use: A Pilot Study. : Solheim J, Gay C, Lerdal A, Hickson L, Kvaerner KJ.; J Am Acad Audiol. 2018 Sep;29(8):696-705. doi: 10.3766/jaaa.16184.

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How do patients feel about MI?



- Patients receiving MI plus standard care during a 60 minute follow up appointment one month postfitting increased average wear time from 1 hour/day to 7 hours/day
- Rated feeling as though they had additional support and a good rapport with the clinician as top reasons for increased usage of hearing aids
- MI group gave the audiologist higher ratings for partnership, empathy, and evocation

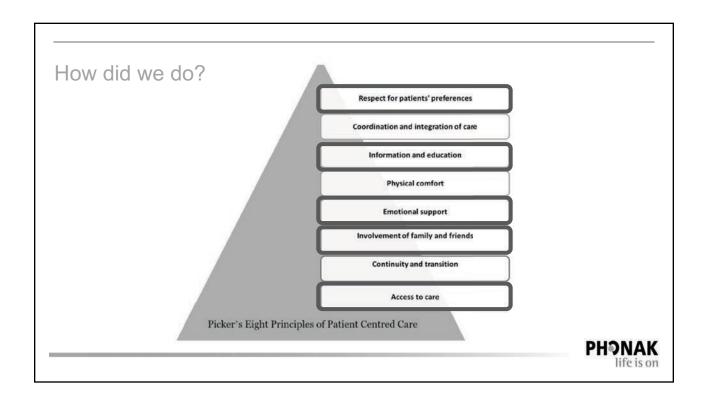
Aazh H (2016) Patients' Experience of Motivational Interviewing for Hearing Aid Use: A Qualitative Study Embedded within a Pilot Randomised Controlled Trial. J Phonet and Audiol 2: 1000110.

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aRounded to the nearest whole hour.

^bExcludes the ten participants who did not attend the nine-month visit.



Questions?





Together, we change lives

