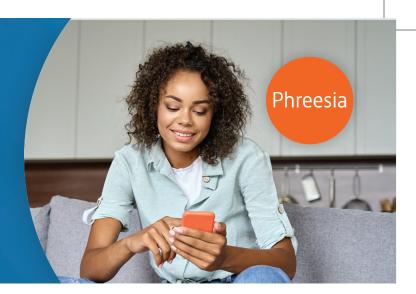
Coaching to higheractivated patients: Care team communications



Use this guide to coach higher-activated patients (PAM levels 3 and 4) on the importance of fostering collaborative partnerships with providers.

Build knowledge:

Establish the patient's role as a leading member of their care team.

- Encourage the patient to speak candidly with their care team about what they have learned about their health and what they do not yet understand. Suggest bringing a list of questions or concerns to their next visit.
- Collaboratively identify any health knowledge gaps, and build questions for the care team around those gaps.
- Stress the importance of knowing one's medical history and conveying it concisely to their care team. Suggest having a brief synopsis of their medical history, medications and care team roster on hand to share with new providers who join their team.

Build skills:

Help the patient identify care gaps and navigate barriers to care.

- Determine whether the patient has completed all recommended screenings based on their age and risk factors. If not, find out why. Emphasize the benefits of preventive care services, and set goals and delineate steps the patient can take to fill those gaps.
- Work with the patient to identify challenges or barriers that make it difficult to follow their care team's recommendations. This may include social needs, such as lack of transportation or childcare, or religious/cultural beliefs that impact their ability to follow recommendations.
- Discuss what to do if the patient disagrees with their care team's recommendations. Stress the importance of shared decision-making and encourage the patient to communicate concerns to providers.



Build confidence:

Encourage the patient to set achievable health goals and track milestones.

- Ask the patient to share their most important health goal, and explain why it is meaningful to them. Create an action plan that breaks the goal down into small, achievable steps. Help them identify healthy ways to self-reward for meeting these milestones. Encourage the patient to share their goal with all members of their care team.
- Promote the use of health tracking tools or a personal medical diary to track symptoms, document concerns and health goals, and monitor health metrics such as A1C and blood pressure.
 Suggest sharing high-level results with their care team regularly.

