Best practices for administering the Patient Activation Measure® (PAM®)



Phreesia has developed best practice guidelines—based on 20+ years of research and the experiences of our clients—that can help your healthcare organization optimize PAM administration. The following guidelines will help you achieve reliable and valid PAM responses and help you support your patients in being more active in their care.

How to introduce PAM

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Achieving reliable and valid PAM scores starts with a proper introduction of PAM to your patients. Here are the key points to address when introducing PAM to your patients:

- Patient responses will remain confidential and help personalize their care. It is important to communicate that by completing the PAM survey, it will allow your team to tailor the care the patient receives. This reinforces that your patients will be treated as an individual and not just a number.
- Ask the patient to respond to PAM survey questions based on how they feel in the moment, not how they wish to be perceived. Honesty from the patient, based on how they feel right now, is crucial to achieving the most accurate results.
- There are no right or wrong ways to respond. Reassure patients that their care will not be negatively affected because of their responses.
- Disagreement with some of the PAM statements is OK. Inform patients that they will not lose benefits or services based on their responses. Patients who are comfortable disagreeing with statements may be more honest with their answers.

- Completing PAM will take less than five minutes. Tell your patients that the PAM is only 13 statements, and that it shouldn't take too much of their time.
- Avoid words like "survey" or "assessment." Patients often don't like the idea of being surveyed or assessed about how they feel, so it's best to avoid these words.

Introduction example:

Here is a script that you can use to help introduce PAM to your patients:

Here at ______, we're dedicated to providing the best care possible. I have a series of 13 statements that I'd like you to respond to. Your answers will help me tailor my support to your needs. There are no right or wrong answers, so it's important that you answer in a way that feels best to you in this moment. Many people find that they don't agree with all of the statements—and that's OK. Your answers are completely confidential and will not be shared outside of your care team. This questionnaire should take less than five minutes to complete.

How to administer PAM

While administering PAM is straightforward, healthcare organizations often have questions about best practices. Please keep the following items in mind while administering PAM:

- Read the statements in the order that they appear. PAM is a standardized assessment and should be administered in the same way to each person who completes it.
- You cannot change the wording of any statements. A patient may say they don't understand words or phrases in a particular statement. If this occurs, you cannot offer alternative words or phrases because it will introduce bias into the patient's mind. The wording of PAM is very particular. If a patient does not understand a word or phrase, please let them know that the word or phrase only means what the patient thinks they mean.

Clarification example:

Here is a script that can be used if a patient doesn't understand a particular statement:

"If you do not understand certain words or phrases in this statement, that is OK. Unfortunately, I cannot define or explain any of these words or phrases to you. They are open to your own interpretation. In other words, these statements mean whatever you think they mean. There are no right or wrong ways to respond. Therefore, you should respond based on what these statements mean to you."

- If the person can't or won't respond to a statement, mark it as "N/A." "Not applicable" or "N/A" is a perfectly acceptable answer to any of the statements.
- **Do not encourage certain responses.** This is especially important if you're administering the measure to a patient who you know and feel as if their answers may not match your perceptions of them.

- Allow plenty of time for answers. While the survey should not take longer than five minutes to complete, PAM is not timed. Give the patient all the time they need to think about their responses.
- "Yes" and "No" are not acceptable answers. The patient must respond with one of five allowable answers as stated on the measure.
- Be aware of patients providing straight-line responses. While this is not common, some patients will only answer "Agree" or "Strongly Agree" to all the statements. A patient may do this for a wide variety of reasons, but if recognized early, you may interrupt PAM administration and restart from the beginning.

Interruption example:

Here is a script that can be used if you identify a straight-line response pattern:

"People typically don't answer with the same response to each question. Responding truthfully helps us provide you with the best possible support. Remember that there are no right or wrong ways to respond, just what is true for you. Would you like to go through the statements one more time?"

- Administer PAM in the patient's preferred language. The wording of PAM is so precise that any variation in language can corrupt the integrity of the responses. If a patient speaks more than one language, PAM must be administered in the patient's preferred language. PAM is validated in 40+ languages, all of which are available from Phreesia upon request.
- Do not disclose their PAM score or level. PAM should not be used as a motivational tool or rating system. Some patients may find that discouraging.



When to not administer PAM

There are situations in which administering PAM may not be appropriate. Here is a comprehensive list of those occasions:

- The patient has cognitive concerns. If a patient has a cognitive or developmental impairment, it may be difficult to know if the person is able to complete PAM. The measure is written as a sixthgrade level, and the decision to not administer PAM is often a clinical decision made by the administrator. If a patient has significant cognitive concerns, you may administer the Caregiver PAM instead if their caregiver is present.
- The patient is experiencing psychosis. A patient may be diagnosed with some form of psychosis, but with stable, well-managed symptoms. If a patient is not experiencing current difficulties with reality testing, the person could still be administered the PAM. However, if the person is actively experiencing psychosis, the person is not able to reliably answer any statements and cannot be considered a reliable reporter.

- The patient is intoxicated. If the patient has altered or impaired mental function due to something they've taken, then PAM should only be administered to the patient once they become lucid.
- The patient is suicidal. If the patient has been assessed as suicidal, do not administer PAM. Address the immediate concerns and forego PAM administration.
- The patient just received a new and/or serious diagnosis. Stress can factor significantly into a patient's PAM level and score. Patients who just received a new and/or serious diagnosis will be under extreme stress and questioning their ability to take care of their health concerns. While this is up to the provider's discretion, we recommend waiting 2-7 days to administer PAM once the patient understands their diagnosis.



