

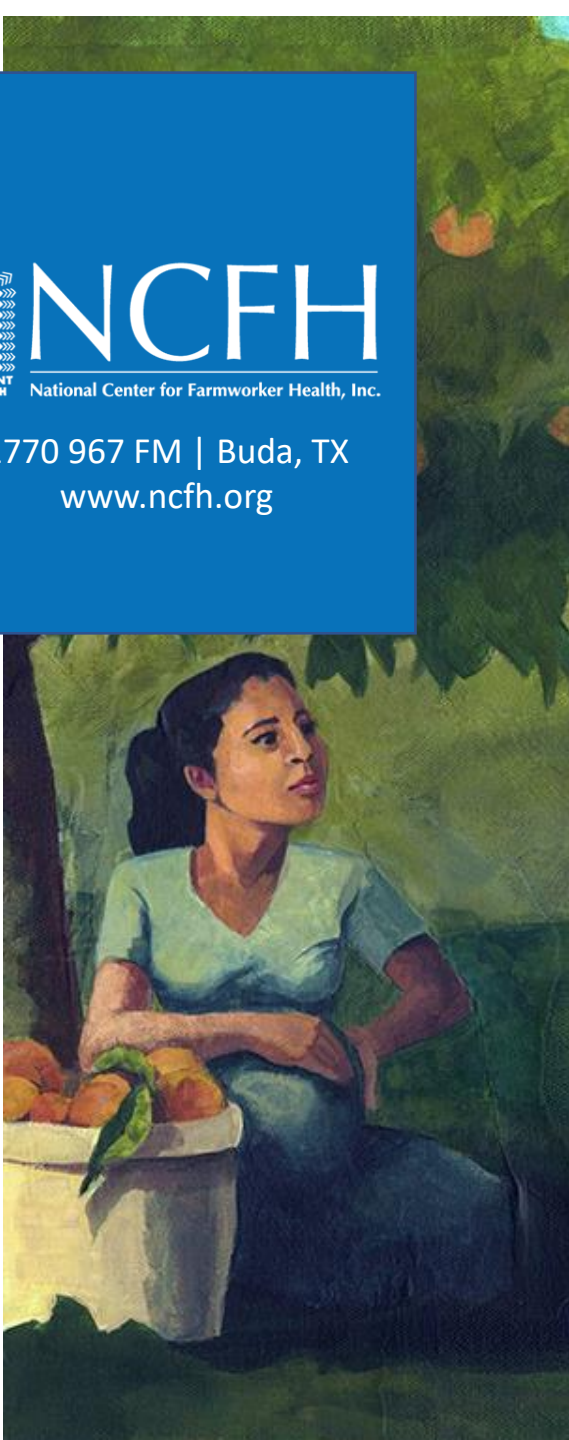


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# Delivering Self- Management Education for Chronic Conditions Through an Innovative Tele-education Approach

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Developed by National Center Farmworker Health (NCFH)






# Today's Speakers



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## Learning Objectives

- Understand how digital technology can be effectively used to deliver tele-education as a service delivery model that health centers can implement with patients with chronic conditions.
- Learn about the effectiveness of messaging apps, specifically WhatsApp, for patient tele-education through different case studies and different program adaptations.
- Access strategies and tools, including the Participant WhatsApp Tele-Education Readiness Assessment, to integrate technology into service delivery for better patient health outcomes



# Digital Technology

- How are we continuing to engage patients?
- How are we successfully communicating with patients?
- How are we continuing to increase and drive patient self-management of chronic illnesses?

# Let's Chat!

- What types of digital platforms have you begun utilizing at your health center or organization with your patients for tele-education?





# Overview and Purpose

Increased use of technology to:

- Digitally deliver health information and patient education.
- Increase Retention and engagement of patients.
- Innovative method of service delivery.



# Poll Question



# Why WhatsApp?







# Gateway Community Health Center



# Case Study: The impact of a self-management educational program coordinated through WhatsApp on diabetes control

## Background

- Social media can effectively mediate digital health interventions and help eliminate barriers associated with face-to-face interaction.

## Objective

- Assess the impact of patient-centered diabetes education program administered through WhatsApp

## Method

- Intervention Group: 109 diabetes patients receive structured education through WhatsApp over 6 months
- Control Group: 109 diabetes patients received regular care
- Follow up to check A1C twice for intervention group and trice for control.

## Results

- Mean of participants: 42 years and 10 years of having diabetes
- HbA1c decreased significantly in the intervention group from 8.4% (SD=1.06) to 7.7% (SD=1.35) after 6 months. Control group had a 0.1% decrease over same period.
- 4% higher completion rate on the Intervention Group

## Conclusion

- Diabetes education via WhatsApp showed promising outcomes regardless of the level of patients' health literacy or numeracy.



## **Guide for Patient Self-Management of Chronic Illness through “Tele-education”**



Available in both English and Spanish.

## Health Data Privacy



WhatsApp is not HIPAA Compliant. Disclosure of this needs to be made and clear expectations and training on what it can be used for.



# Group Guidelines for Online Chronic Illness Support

Safety

Respect

Confidentiality

No PHI shared

No Solicitation

Violators will  
be removed



# Authorized Smart Phone Usage



## **Suggested Best Option:**

- ✓ Health Center Provides Smart Phones for Staff

## **Secondary Option:**

- ✓ Staff use personal smart phones

*Once you establish usage, Stick to it!*

# Team Necessary for Implementation





Participant WhatsApp  
Tele-Education  
Readiness Assessment  
Tool





# Participant Readiness and Assessment

This tool provides health centers a method of assessing a participant's readiness to engage in the digital delivery of services.

Purpose: *Captures participants' current needs and resources.*

Participant  
Willingness/Need

Access to Internet  
and Devices

Digital Navigation  
Skills



# Participant Readiness and Assessment



TECHNOLOGY



ADDITIONAL TRAINING



PREPARE FOR SPECIFIC  
DELIVERY

# WhatsApp Platform and Features



1. Group Chats and Activities

2. Voice Messaging

3. Audio or Video Calls

4. File or Resource Sharing



# WhatsApp Platform and Features

## 1. Group Chats and Activities

- Individual contacts or Groups
- Allows you to send chats to entire group of participants
- You may set up group events and activities



# WhatsApp Platform and Features

## 1. Group Chats and Activities

- |   |            |
|---|------------|
| 1. Send invitation to Zumba Class.  | GROUP      |
| 2. Communicate health center general health services.                     | GROUP      |
| 3. Send a message about a participant's latest A1C and how to address it. | INDIVIDUAL |



# WhatsApp Platform and Features

## 2. Voice Messaging

- No context is lost
- Helps with different participant communication styles and literacy levels (hearing a message as opposed to reading)
- Quick way for HC staff to send individualized messages to participants
- May delete and re-record prior to sending



# WhatsApp Platform and Features

## 3. Audio or Video Calls

- Secure and direct way to reach participants
- Access to difficult to reach populations
- Creates more impactful connection with participant
- Encourages participant personal accountability for their health



# WhatsApp Platform and Features

## 4. File or Resource Sharing

- Send and receive specific health education related files
- Send photos or videos of patient educational material
- Participants can share photos of daily meals, exercise routines, videos of reading food labels at grocery stores, etc





# Strategies for Participant Self-Management via WhatsApp@

1. Conduct participant check-ins daily or weekly, depending on the needs of each individual participant
2. Conduct private audio or video calls with participants to provide individualized healthy discussions or conduct one on one virtual health education sessions.
3. Promote “virtual” accountability by using video calls or file sharing features.
4. Send daily health resources and referrals with participants related to their chronic illness using the file or resource sharing feature.
5. Host group events to promote peer to peer support by using the group video call feature.



Time to  
Connect!





# Next Steps...

1

Find out what patients are current using to communicate.

2

Download the WhatsApp Guide

3

Dialogue with your supervisor/leadership team about implementation.

4

If implementing, develop policies and procedures for phone usage.

5

Start increasing patient communication and retention!





# DIABETES RESOURCE HUB

[Diabetes Resource Hub](#)

# Thank you!



For additional questions, comments, or assistance, please reach out to NCFH at [info@ncfh.org](mailto:info@ncfh.org)