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

Presented By: Maria Bustamante, CHWI
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Today’s Speakers

Maria Bustamante, CHWI Diabetes Program Manager
National Center for Farmworker Health
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 began utilizing at your health center or organization with your patients for tele-education?
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.

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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
  - No PHI shared

- Respect
  - No Solicitation

- Confidentiality
  - 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

- Medical Assistant
- Health Educators
- Patient
- Self Management Program Leads
- Community Health Workers
- Front Office
- Care Coordinator

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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 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.

2. Communicate health center general health services.

3. Send a message about a participant’s latest A1C and how to address it.

GROUP

GROUP

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!
Thank you!

For additional questions, comments, or assistance, please reach out to NCFH at info@ncfh.org