

PATIENT ENGAGEMENT: A LEXICON

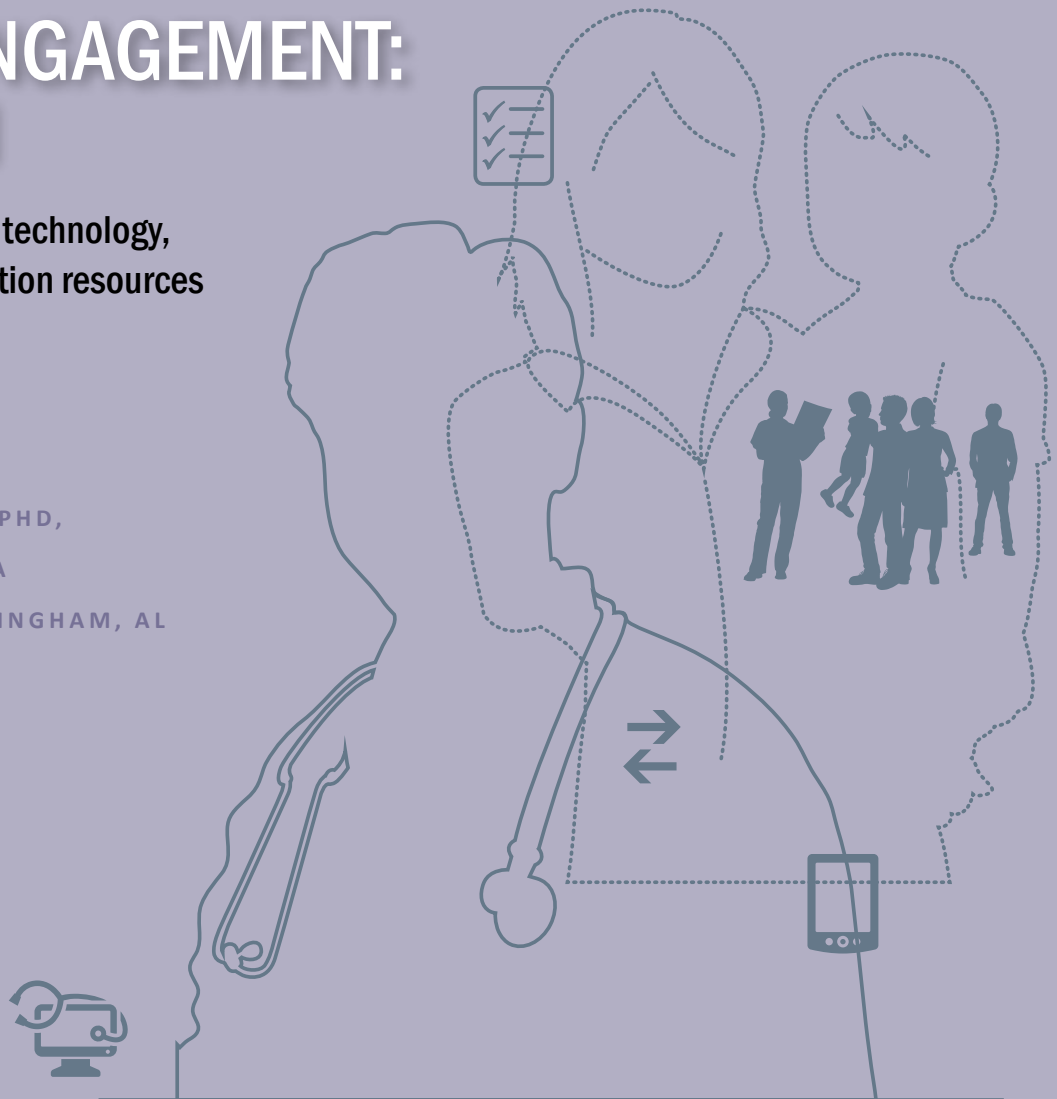
A guide to terminology, technology,
legislation and information resources

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GENERAL

- Engagement**
 Actions individuals must take to obtain the greatest benefit from available health care services.^{2,28}
- Engagement behavior framework**
 A model with 10 measures to facilitate individuals/groups seeking and utilizing safe and appropriate care. It facilitates the path toward patient-centered care approaches.²
- Patient activation**
 An individual's knowledge, skill, and confidence for managing his/her own health and health care.^{12,13,14,23,28}
- Patient advocacy**
 An individual or organization acting as a liaison between the patient and provider to ensure the needs (medical, social, psychological, community support needs and others) of patients are addressed as part of an integrated and comprehensive patient-centered care approach.^{47,48}
- Patient education**
 A planned, systematic, sequential, and logical process of teaching and learning provided to patients and clients in all clinical settings.⁴⁹
- Patient engagement**
 The use of a set of principles and strategies for empowering patients to actively participate in actions related to their own health. The concept of engagement takes into account the need for continuous and regular interaction between patients and providers throughout healthcare delivery.^{1,2,5,7,23,28}

ORGANIZATIONAL

- Change management**
 The application of evidence-based strategies, methodologies and tools for preparing an organization to adapt to changing needs and achieving desired patient health outcomes.²⁶
- Disease prevention and health promotion**
 Services to address the health of patients before the onset of illness or occurrence of disease that also encourage patients to lead healthy lives by changing behaviors.²⁶
- Gap analysis or needs assessment**
 The process of using quantitative and qualitative methods to systematically collect and analyze data to understand health or organizational needs.^{26,42}
- Leadership participation**
 Active involvement in implementing change management is imperative to enabling an organization's ability to move forward successfully. Leaders must identify and communicate organizational value, support changes taking place and play an active role in implementing those changes. They can also assure that organizational resources for successful implementation are available to help overcome obstacles.²⁵
- Performance improvement**
 Positive changes in capacity, process and outcomes within an organization.^{21,26}
- Performance management**
 The practice of actively using performance data to improve patient health. This involves the strategic use of performance standards, measures, progress reports, and ongoing quality improvement efforts to ensure an organization achieves desired results.^{21,26}

Quality improvement

Systematic and continuous actions that lead to measurable improvement in health care services and the health status of targeted patient groups. Also, the process of continuous effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality services or processes which achieve equity and improve the health of individuals or communities.^{17,21,42}

TECHNOLOGY AND DATA

Clinical Decision Support (CDS)

A variety of tools to enhance decision-making in the clinical workflow. These tools include computerized alerts and reminders to care providers and patients; clinical guidelines; condition-specific order sets; focused patient data reports and summaries; documentation templates; diagnostic support, and contextually relevant reference information.^{40,42,45}

Data infrastructure

Technology, processes, tools and standards needed to promote data sharing and consumption.²¹

Data integration

A combination of technical and business processes used to combine data from disparate sources into meaningful and valuable information.²¹

Electronic Health Record (EHR)

A real-time longitudinal patient electronic health record generated by one or more encounters in any care delivery setting.^{21,34,39,43}

Health Information Exchange (HIE)

The capability to electronically move clinical information between disparate health care information systems while maintaining the meaning of the information being exchanged.^{10,34}

Health Information Technology (HIT)

The application of information processing involving both computer hardware and software that deals with the storage, retrieval, sharing, and use of health care information, data, and knowledge for communication and decision making.^{21,34,39,40,43,44,45}

Interoperability

The ability of health information systems to work together within and across organizational boundaries in order to advance the effective delivery of healthcare for individuals and communities.^{21,34,40}

Meaningful use

Using certified EHR technology to: 1) improve quality, safety, efficiency, and reduce health disparities, 2) engage patients and family, 3) improve care coordination, [and population and public health], and 4) maintain privacy and security of patient health information. The overall mission of meaningful use is: better clinical outcomes, improved population health outcomes, increased transparency and efficiency, empowered individuals, and more robust research data on health systems.^{10,21}

mHealth

Portable wireless devices that continuously monitor a patients' condition remotely on his or her health status indicators/metrics, allowing doctors to leverage data to make informed decisions and employ real time interventions.⁴

National Quality Forum (NQF) measures

Standards that are evaluated through the Consensus Development Process for measuring and publicly reporting on the performance of different aspects of the healthcare system. Standards endorsed by NQF are widely viewed as the "gold standard" for the measurement of healthcare quality.³⁶

Patient portal

A secure online website that gives patients convenient 24-hour access to personal health information to either communicate with healthcare providers and/or gain access to portions of their medical record and other services.^{4,10}

Personal Health Records (PHR)

An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards that can be drawn from multiple sources while being managed, shared, and controlled by the individual.^{21,38}

Quality measures

A method for quantifying patient health care in comparison to a baseline criteria (such as using evidence-based recommendations as baseline for cholesterol measurement).^{23,24,25,26}

Telemedicine

The use of medical information exchanged from one site to another via electronic communications to improve a patient's health status.^{3,4,42,44,45}

PATIENT AND PROVIDER INTERACTION

Care coordination

A function that helps ensure that the patient's needs and preferences for health services and information sharing across people, functions, and sites are met over time.^{8,9,18,19}

Continuous Quality Improvement (CQI) methods

Routine patient feedback to practice, measuring patient outcomes against benchmarks or evidence-based practices, and many other process and outcome measures.^{17,21,40}

Continuum of Care (CoC)

An integrated system of care that guides and tracks patient care over time through a comprehensive array of health services spanning all levels of intensity of care. This includes care provided at home, by primary providers, specialists, social and mental health workers, and others involved in delivering care for a patient as part of a comprehensive treatment plan.^{8,9,11,12,13,14,15,16, 37}

Counseling, coaching, question prompts, motivational interviewing, decision aids & helplines

Interventions that can be used to engage patients at various points of the care continuum. The ultimate goals of all the interventions are for patients to take action and be an active participant in their healthcare decisions.^{8,9}

Disease self-management

Providing education and tools needed to help patients cope with chronic diseases such as managing stress, physical activity, good nutrition, communicating effectively with health care providers, and developing action plans through structured planning and feedback exercises.^{8,9,11,12,13,14,15,16}

Evidence-based medicine or practice

Use of current and most accurate evidence science and guidelines in making decisions about the care of individual patients.^{9,23}

Health Insurance Portability and Accountability Act (HIPAA)/Patient Privacy

A privacy rule that offers Federal protection to individuals specifying that an entity cannot use or disclose protected health information unless authorized by patients, except where this prohibition would result in unnecessary interference with access to quality health care or with certain other important public benefits or national priorities.⁴⁶

Integrated care delivery

Bringing together inputs, delivery, management and organization of services related to diagnosis, treatment, care, rehabilitation and health promotion. Integration is a means to improve services in relation to access, quality, user satisfaction and efficiency.^{7,19}

Multidisciplinary team approach

An approach that encompasses all members of the treatment and/or care team allowing coordination of all relevant aspects of a patient's healthcare needs. These team members consider every facet involved with the patients care, treatment planning, disease or symptom management, resulting in more effective communication among the full health care team and the patient.^{8,9,11,12,13,14,15,16}

Patient Activation Measure (PAM)

An assessment tool designed to measure knowledge, skills, and abilities of patients in managing their own health and healthcare decisions. There are four stages that a patient must take to be activated in their care (starting to take a role, building knowledge and confidence, taking action, and maintaining behaviors).^{2,13,23}

Patient-centered care

Active involvement of patients and their families and respecting individual and cultural values, needs and choices/decisions in care delivery and decision-making.^{5,8,9,11,12,13,14,15,16,27}

Patient empowerment

Allowing patients to access to choices that affect health outcomes.^{1,2,8,22,30,56}

Patient/family outreach

Proactive efforts to understand and reach out to the patient and family to ensure adherence to treatment, with the goal of sustaining new healthy behaviors or for prevention screening outreach.^{6,8,9,21,29}

Patient health literacy

The degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services available to be able to make appropriate health decisions.⁸

Patient technology competence

The skills, competence and use of technology that a patient may have to access his or her own health information or electronic personal health record.⁴

Quality and safety

Quality care is safe, effective, patient-centered, timely, efficient, and equitable. Thus safety is the foundation upon which all other aspects of quality care are built.²³

Shared Decision Making (SDM)

A process in which healthcare providers and patients collaboratively discuss and select tests, interventions, management and next steps that are based both on evidence-based research and patient preferences.^{5,8,9,11,12,13,14,15,16,27}

Transition and continuity

Information that will help patients care for themselves away from a clinical setting, and the follow-up coordination, planning, and support to ease transitions in care.^{9,18}

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