

ENHANCING YOUR PATIENT EDUCATION SESSIONS - PART 2

Today on lungFIT, I'd like to continue the conversation about ways to improve patient education sessions in your program. Last episode, we talked about how you can activate your patient's prior knowledge of a subject to help them retain information. I also outlined ways in which you can capture your patient's attention and emphasize key points. Lastly, we went over ways you can include other resources to enhance education sessions. If you missed that episode, I would recommend you check it out! This is a short episode where I'll tell you some more strategies you can utilize in your next education session.

These ideas come from a book called "Dynamic Lecturing" written by Christine Harrington, and Todd Zakrajsek. I'd recommend it to anyone who is involved in teaching that includes any form of lectures. It has a lot of great ideas for making your lectures engaging for learners.

So, what else can we do to enrich our patient's learning? Some patients will not have an easy time retaining the knowledge that you're trying to share with them, and conversations about health can be intimidating. The information can be overwhelming and patients can 'tune out'. So our next important strategy is to **Make Your Educational Content Meaningful Through Examples**. This may sound simple, but it is actually extremely important in helping your patients absorb and retain the information you're giving them. Our brains like to categorize things to help us remember and understand them. Good and bad, easy or hard, simple or complex. These are all simple categories we subconsciously place information in as we learn it. Hearing examples helps us to identify which category certain pieces of information belong in quicker and attach meaning to it. For example 😊, you may have learned about lung disease by viewing actual healthy and unhealthy tissue samples, which allowed you to quickly understand the pathology more so than just reading about it. Now I'm not saying you should wheel out a pair of lungs with and without COPD as that may be a little shocking to patients! But there are many other types of examples we can use to help with our patients understanding of a subject.

A common form of exemplifying often used in lectures and schools around the world is **Demonstration**. Demonstration can be extremely useful in helping patients understand what exactly it is you're trying to teach them. Seeing someone else complete an action makes it much easier for our brains to compute how to do the same action ourselves. Demonstrations help bring theoretical concepts to life and give the learners something to apply those concepts to. Of course we do this a lot in pulmonary rehabilitation when we teach people how to use their inhalers – we have trainer inhalers which allow us to demonstrate the technique. Another useful form of example we can use with our patients is **Case Studies**. Case studies can be extremely helpful to your patients as they can show them real world examples to draw on and link to their own personal experiences. So you might be used to using case studies in your clinical instruction, when you're teaching your students in physio or medicine. But they are also really helpful to use when we're teaching patients. Creating links such as those help patients to categorize and truly remember the information you're giving them. It's important to try and use at least two examples for every big point you're trying to get across to give your patient's plenty of time to absorb the information. You can create your own case studies, or you can ask your patients for examples of situations they have encountered which reinforce the teaching points.

The next strategy I'd like to share with you is the use of **Reflection Opportunities**. These are ways in which your patients can reflect on what they've learned and what they hope to learn in the future. This

in turn cements the knowledge they've learned and give them a deepened understanding of it. Giving ample opportunities for your patients to reflect on what they've learned so far THROUGHOUT the lesson is extremely important, as it gives them time to really process what you've told them before you pile on more information. Sometimes discussions can be used to help patients reflect, or doing a small quiet exercise where they write a few reflections that relate to the information in the lecture can be quite effective. Even just the act of taking notes can be a reflective process in and of itself, as it forces learners to piece out the most important information. Some patient education materials have sections where patients write reflections or task lists as a way to further reinforce how the material they are hearing is relevant to their own situation. It may be helpful to have patients identify what they want to get out of these learning sessions and set personal goals for themselves.

Our next main strategy I'd like to cover is **Retrieval Practice**. Retrieval practice is the simple act of drawing on information learned in the past. This is often the final step in education, the quiz or the exam, but it doesn't have to be intimidating or painful. It's important to find ways to make the retrieval of information from our memory fun and interesting, so as not to make it feel like they are back in school. It's really important to have people able to draw on what they've heard and articulate what they've heard in a past session, it really helps cement that information in their mind. Retrieval practice ideas could be a roundtable discussion about past information, with some sort of reward (like chocolate!) A little bribery never hurts right? It's important to motivate your patients to retain what they've learned in a low pressure environment, and to offer multiple opportunities to retrieve their knowledge.

The final strategy I will share with you is the use of **Questioning for Critical Thinking**. Good questions can help your patients retrieve knowledge and build their own understanding of it while keeping them engaged. But as you may know from experience, people often don't like answering difficult questions in group settings and questions can often be met with an awkward and heavy silence. There are a variety of reasons people may not feel comfortable in answering questions such as embarrassment or the worry of getting it wrong, or the personal nature of the question, so you need to give some thought regarding the questions you pose. People are less likely to answer a question if it seems like the person asking it is looking for a specific "right" answer so try and pose questions that don't have a right or wrong answer and instead, ask questions that provoke thought and encourage patients to create their own opinion of a topic. These are called "Divergent Questions". When there is no obvious right answer, a question can invoke a meaningful discussion of a topic instead of shutting down the audience. For example, you could ask "what are some of the barriers to being physically active?" or "why might friends and family find it difficult to talk about end of life care?". Questions that ask how important issues using a hypothetical scenario may result in more thoughtful responses than simple yes-or-no questions.

I hope you found these suggestions helpful, especially if you find that you are stuck in a bit of a rut with your patient education sessions. Maybe you think your sessions are a bit 'dry' with the health care professional doing a lot of the talking and your patient group just listening. Hopefully you have some ideas here that you can start to incorporate. Even just a few changes can make a big difference. If you practice in a setting where group discussion isn't part of the culture, then the other suggestions, such as self-reflection and personal learning goals, may be a better fit. If you already have a patient education component that is dynamic and engaging, perhaps these suggestions can be used as a bit of a checklist, to confirm what you are doing and maybe prompting you to see where you would like to make changes.

Thank you again for your support of the LungFIT podcast. I'm really grateful for all the emails and positive encouragement I've received from listeners so far, it's been fun engaging with a wide audience of pulmonary rehab practitioners. So until next time, be well everyone!