

Is it possible to raise a patient's 'activation level' through an intervention targeted specifically at that outcome?

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Background

Why focus on patient activation? A Health Foundation study in Islington (n= 10,000) demonstrated that, compared to level 1, level 4 activation is associated with

- 19% fewer GP appointments
- 35% fewer A&E attendances
- 28% fewer minor self-referrals to A&E
- 39% fewer emergency inpatient admissions
- 17% fewer outpatient appointments

Other studies have shown that higher levels of activation are related to higher levels of health-related behaviours, better control of chronic conditions, more appropriate use of health services, greater ability to build and make use of support networks, and a greater sense of wellbeing (Greene et al., 2015, Deeny et al., 2018).

The Intervention

Structured Agenda-Free Coaching Conversations are designed to move patients up activation levels (see figures on right). Coaches were trained and supervised to adhere to the model. They typically provided 5 coaching sessions, (first 60 mins, others 45 mins) over 5-12 weeks.

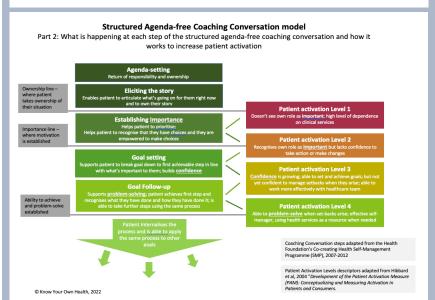
Evaluation methods

This was a prospective service evaluation. 1,020 patients attended coaching over 3.5 years. Preand post-PAM scores were collected for the final cohort (n=110). Service usage data was provided by their GP for 12 months pre- and post-intervention (n=59, patients with less than 12 months follow-up data were excluded). Patients were invited to self-report their experience and outcomes after the final session.

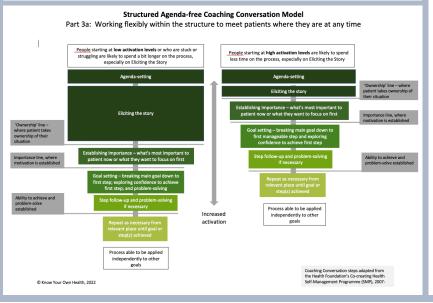
Participants

Participants were invited to engage by their GP and provided written informed consent to the evaluation.

The Structured Agenda-free Coaching Conversation Model Designed specifically to increase patient activation

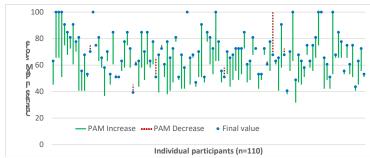


The model's flexibility supports people at all activation levels



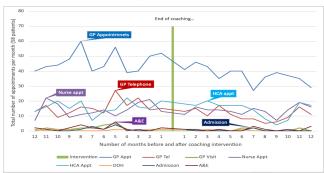
Outcomes: PAM score changes

There were 95 increases, 10 decreases and 5 ties (n=110), asymptotic significance (2-sided Wilcoxon signed-rank test) <0.001. The median score before was 55.6 (IQR=65.5-47.0) and afterwards was 70.2 (IQR=80.9-60.6).



Outcomes: service utilisation changes

Participants were seeing their GP on average 9.5 times/year, which reduced to an annualised rate of 4.3 visits/year 12 months after the intervention.



Patient-reported outcomes

Patients reported transformational improvements in health-related behaviours, measurable outcomes such as BMI, BP, HbA1C, wellbeing, more effective use of health services, improved levels of active and social engagement, and use of support networks.

"[My coach] came to me at a very dark time... I felt very low and couldn't see how to live positively. They encouraged (and enabled) me to set goals, reach goals and view life positively. I no longer feel overwhelmed. In fact, I feel well-armed to not only manage my life but succeed too!"

Conclusions

PAM levels rose for 95 of 110 patients who completed the intervention. Patients also showed anticipated outcomes for higher levels of activation in line with observational studies. Further larger scale interventional studies are warranted.