

# Designing and Implementing a Medical Advocacy Program: Patient Partners

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# Born from personal experience...

*“My ideas usually come not at my desk writing but in the midst of living.”*

~Anais Nin

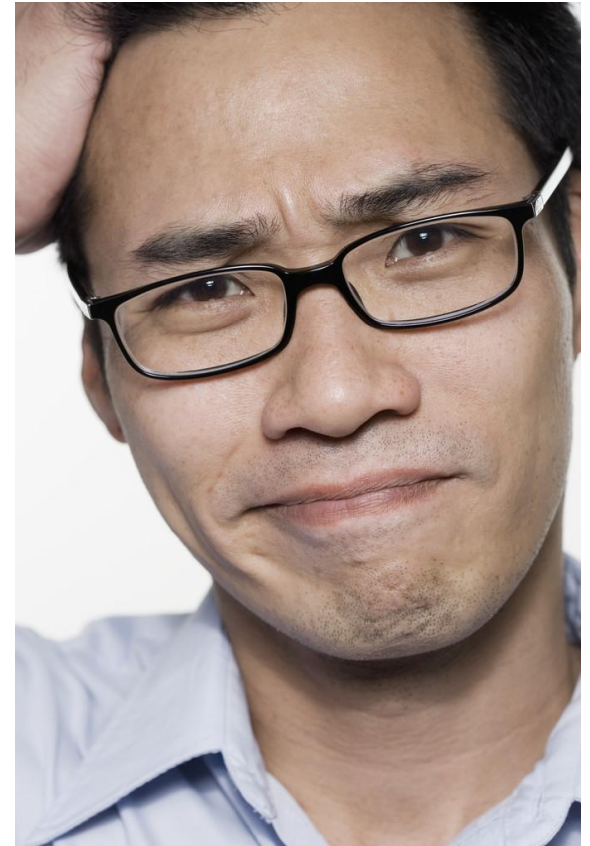


# Talking with doctors

Only 15% of patients fully understand what their doctors tell them.

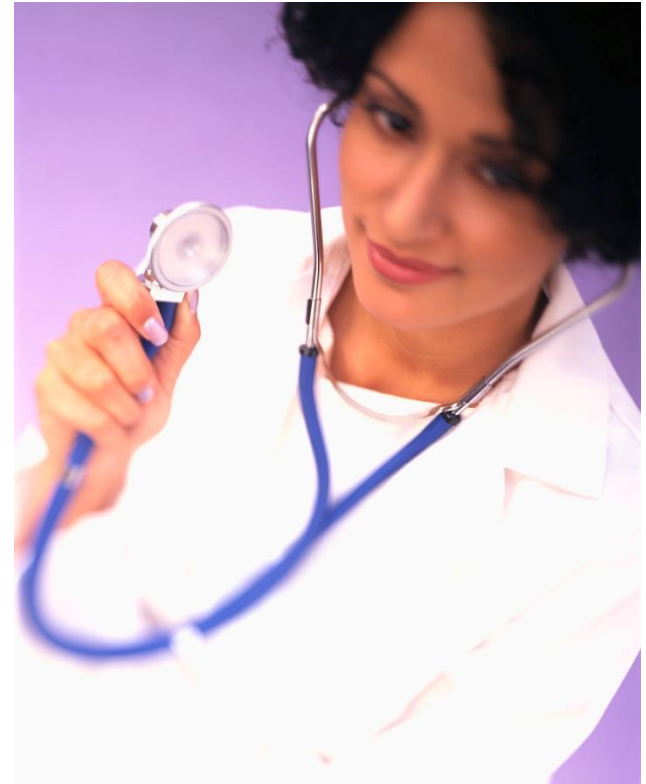
50% leave their doctor's offices uncertain of what they need to do to take care of themselves.

Source: Goodman, Brenda. May/June 2009. "The 18-Minute Doctor's Appointment Challenge." *Arthritis Today*, p. 61-65.



# Talking with doctors

Doctors listen to a patient's concerns for an average of just 22 seconds before interrupting!



Source: Goodman, Brenda. May/June 2009. "The 18-Minute Doctor's Appointment Challenge." *Arthritis Today*, p. 61-65.

# Talking with doctors

In one study...

- 65% of the time doctors neglected to mention side effects of new meds;
- 66% of the time doctors didn't tell patients how long to take drug; and
- 42% of the time doctors didn't give details on how often to take meds.

# Talking with doctors

Typical number of questions asked in a 15 minute doctor's visit:

- For men = 0
- For women = 6

Source: Levine, Meredith. 2004. "Tell the Doctor All Your Problems, but Keep It to Less Than a Minute." *The New York Times*, 6/1/2004.

# When patients have support communicating with doctors...

- 50% more likely to be satisfied with their doctor's ability to give information
- 30% more likely to be satisfied with their physician's interpersonal skills.

Source: Goodman, Brenda. May/June 2009. "The 18-Minute Doctor's Appointment Challenge." *Arthritis Today*, p. 61-65., citing a study by Wolff, J. and Roter, D. (Johns Hopkins Bloomberg School of Public Health) published in the *Archives of Internal Medicine* on 7/14/2008 entitled "Hidden in Plain Sight: Medical Visit Companions as a Resource for Vulnerable Older Adults."

# Why is good doctor-patient communication important?

Studies show that good communication between doctors and patients leads to **better health**:

- lower blood sugar levels in diabetic patients,
- lower blood pressure for patients with hypertension, and
- reduced pain for patients.

Source: Goodman, Brenda. May/June 2009. "The 18-Minute Doctor's Appointment Challenge." *Arthritis Today*, p. 61-65.



## Caregivers need this, too!

- Adult children provide 70-80% of all services to non-institutionalized aging parents.
- Average of 35.4 hours/week
- Economic downturn has increased stress: 50% of working caregivers are less comfortable taking time off of work now to provide care

# What is Patient Partners?



The “Patient Partners” program provides volunteers to accompany older adults to doctors’ appointments and medical procedures in order to provide support and assistance to older adults whose family caregivers are inaccessible.

# Program Goals

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With the support of a “Patient Partner,” older adults will have a companion to guarantee that the outcome of each medical appointment is recorded clearly for the benefit of the older adult and his/her family caregiver.

# Program Goals

Patient Partners will assist older adults so their health-related concerns are satisfactorily addressed.



# Why are “Patient Partners” needed?

Going to the doctor alone can be stressful, overwhelming, or confusing for an older adult.



# Why are “Patient Partners” needed?

- Many older adults have no family or trusted caregivers in the area.
- Local caregivers may be unavailable to accompany aging loved ones to medical appointments due to competing demands of work or children...or they may simply need a break.



# Why are “Patient Partners” needed?

## For caregivers:

- To ensure adequate knowledge of loved one’s medical status and care regime
- To support their ability to care for their aging loved ones
- To prevent burnout

## For older adults:

- To increase their understanding of their medical conditions
- To ensure quality medical experiences
- To improve health care outcomes

# Who can participate?

- Washtenaw County residents
- Over age 65
- Isolated from family or whose caregivers are unavailable
- Any religious or ethnic background



# Training of Volunteer “Partners”

Fifteen hours of instruction in:

- Common aging-related health issues
- Confidentiality and ethics
- Listening skills; communicating with medical personnel and with caregivers....and more!

# Program Process: Prior to appt.

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1. Intake and social work assessment
2. Volunteer Partner is matched
3. Patient and Partner meet once prior to scheduled medical appointment

# Program Process: At the Dr. appt.

Volunteer Patient Partner will:

- Take notes
- Prompt Patient in an empowering manner
- Request translation of medical jargon
- Confirm that Patient understands
- Provide emotional support as needed

# Scope and Limitations

Volunteer Patient Partner will NOT:

- Make medical decisions on behalf of the patient
- Advise the patient on medical decisions
- Have access to the patient's medical records kept by the doctor's office
- Serve as a Durable Power of Attorney for Health Care (Health Care Proxy)

## Program Process: After the Dr. appt.

Volunteer Patient Partner will:

- Review what transpired with Patient
- Make sure follow-up appointments are scheduled at the time of check-out
- Provide written summary

# Cost

- \$15 per medical accompaniment if patient does not need transportation

Or

- \$20 including transportation to and from the medical appointment (within Washtenaw County)



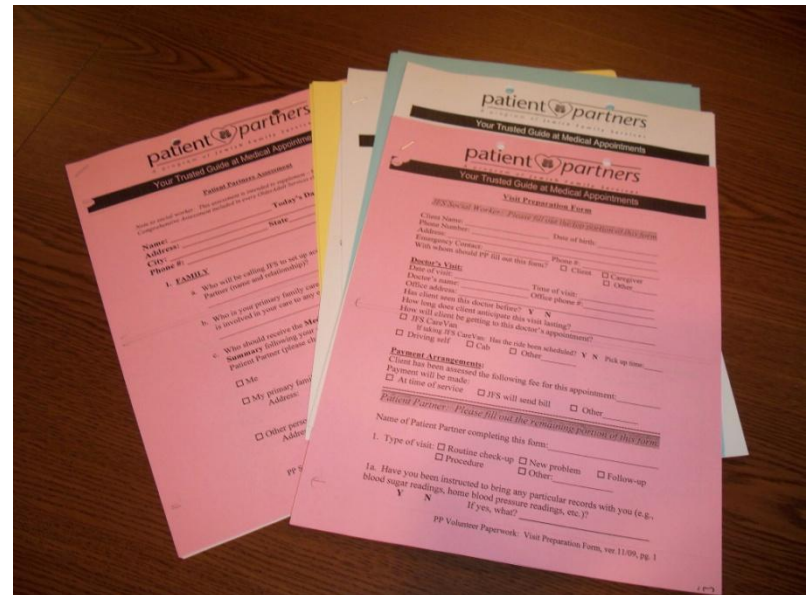
# What makes Patient Partners unique?

1. Focus on facilitation of communication between doctors and elderly patients



# What makes Patient Partners unique?

2. Use of thorough, detailed, standardized forms for recording what transpires in the exam room.



# What makes Patient Partners unique?

3. Use of trained volunteers in a professional capacity.



# What makes Patient Partners unique?

4. Intensity of support to seniors via preliminary assessment and pre-appointment meeting with volunteer



# What makes Patient Partners unique?

5. Fills a real gap in services – both for clients and for medical offices

# Is Your Organization Ready?



Take this quick organizational assessment quiz...then learn more about implementing the program!

# Implementation: Roles for Volunteers

- Program development committee
- Trainers/presenters
- Ongoing Patient Partner volunteers
- Intake/Assessment specialists
- Drivers

# Implementation: Recruitment and Screening

- Target to healthcare professionals, “helping professions,” prior caregivers
- Exclude physicians
- Write position description
- Conduct personal interviews



# Implementation: Recruitment and Screening, cont.

- “Attitude” towards medical community
- Unresolved caregiving issues
- Highly opinionated
- Communication skills
- Ability to handle complex paperwork
- Ability to complete intense, 15 hr. training
- Patience with clients and medical offices

# Implementation: Creating the Training

- Group training (individual too costly)
- Wide range of abilities in training class
- Everyone completes same training
- Engage throughout – it's long!
- Role-playing & practicing important
- Complexity may lead to “weeding out”

# Implementation: Volunteer Management

- Balancing frequency of assignments – keeping volunteers busy but not burnt out
- Maintain frequent contact, treat professionally
- Watch for training “slippage”



# Implementation: Client Management

- Different types of clients
  - Independent “young-old”
  - Those with chronic health problems but no cognitive issues
  - Those with dementia or other cognitive impairment

# Implementation: Designing the Evaluation

- What should you measure?
- How will you measure them?
- Challenges

# Implementation: Potential Issues and Concerns

## Volunteers

- High agency investment, turnover costly
- Necessary difficulty of strict volunteer screening
- Overburdening volunteers with last-minute requests

# Implementation: Potential Issues and Concerns

## Clients and Families

- Clients with significant mental health or physical health needs
- Coordination with transportation program
- Client/family understanding of the program and policies

# Implementation: Potential Issues and Concerns

## Medical Facilities/Doctors' Offices:

- Access for PP Volunteers
- Liability
- Marketing

# Benefits of Implementing

For the clients and their caregivers:

- Medical appointments can happen as scheduled
- Empowerment of client; more enjoyable medical experiences
- Easing of caregiver burden

# Benefits of Implementing

For volunteers:

- Skilled “professional” position
- Direct client work w/o a long-term relationship
- Low time commitment with high impact
- Positive feedback from clients, families, medical office, & JFS staff
- Improving health care system!

# Benefits of Implementing

For the organization:

- Increase in clients, reach new population
- Primarily volunteer based; lower cost
- Opportunity to move organization to using more volunteers in professional roles
- Uniqueness/high-profile

# Benefits of Implementing

For medical offices:

- More time for clinical care
- Fewer cancellations/ less rescheduling
- Better communication with patients; higher patient satisfaction



# Benefits of Implementing

For the community:

- Coming together as a community to help seniors and families
- Needed by diverse population across demographics
- A small but important way to improve the health care received by seniors!

# Replication Support

- Many factors to consider before planning
- Mission, staffing, transportation
- Experience with volunteer programs
- Ability to market
- Ability to sustain program
- JFS can help you design and implement a program for your community

## For more information

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