

Keeping it real: An introduction to Person-Centered Hearing Care & Motivation

Cherilee Rutherford, AuD
Sr. Audiologist
Ida Institute



Agenda

- About the Ida Institute
- The what & why of person-centered care
- Motivation & why it is important
- Tools to enable motivational interviewing
- Tool in action
- Practical ways to implement change
- A mindful moment

ABOUT THE IDA INSTITUTE



FACTS

- Non-profit organization established in 2007
- Funded by the Oticon Foundation
- 13,000 + members in the Ida Community

We believe that every person and every hearing loss is unique.

We work with hearing care professionals from around the world to develop and integrate person-centered care in hearing care.

Together we develop knowledge and tools to strengthen the counseling process, enabling people to express their individual needs and preferences and take ownership of their hearing care.

Helping people hear is about knowing how to listen.

IDA
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INNOVATION SEMINARS

Generating new knowledge,
insights, models and tools on
chosen topic



Understand

Explore

Create

Defining Hearing / Motivation /
Communication Partners / Living Well /
Managing Change / Person-Centred Care
/ Cochlear Implants/ Tinnitus/ Hearing
Journey



400+
Participants

32
Countries

20+
Innovation seminars &
workshops

CO-CREATION IS THE HEART OF IDA'S WORK



User-Driven
Innovation Involving
Professionals and
PHL

What is person-centered care?



What is Person Centred Care (PCC)?

“Being person-centred is about focusing care on the needs of individual. Ensuring that people's preferences, needs and values guide clinical decisions, and providing care that is respectful of and responsive to them.”

(Health Education England)

THE BUILDING BLOCKS OF PERSON- CENTERED CARE

1	_____
2	_____
3	_____

SHARED
GOAL SETTING



INVOLVEMENT OF
FAMILY & FRIENDS



UNDERSTANDING OF INDIVIDUAL
PREFERENCES & NEEDS



DIALOGUE BASED ON OPEN-ENDED,
REFLECTIVE QUESTIONS



EMPATHY AND ACTIVE LISTENING

Why Person-Centered Care?



Isn't PCC the norm?

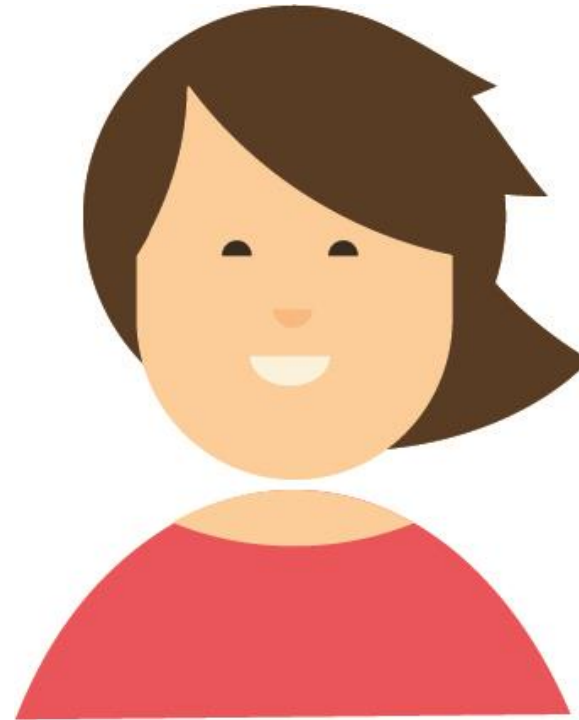
Person-centred care is widely promoted as an ambition, but the aim of delivering services that are centred around their users has not always been realised. People using health and care services should be confident that they will receive clear, understandable information; be given the opportunity for them and their loved ones to take an active role in their care; and be treated in a way that recognises and respects the outcomes that matter most to them. Data from surveys conducted by Picker and others shows that there are still far too many people for whom this does not happen – and we call for a concerted prioritisation of person-centred care to address this”.

Chris Graham, CEO, The Picker Institute

Why Do We Advocate for Person-Centered Care?

INCREASED DEMAND FOR PERSON-CENTERED CARE

- Patients and carers want it
- Health systems incorporate PCC as a standard in national care plans
- Changes in hearing aid dispensing change the role of hearing care professionals, increasing focus on counseling



Why is Person Centred Care So Important?

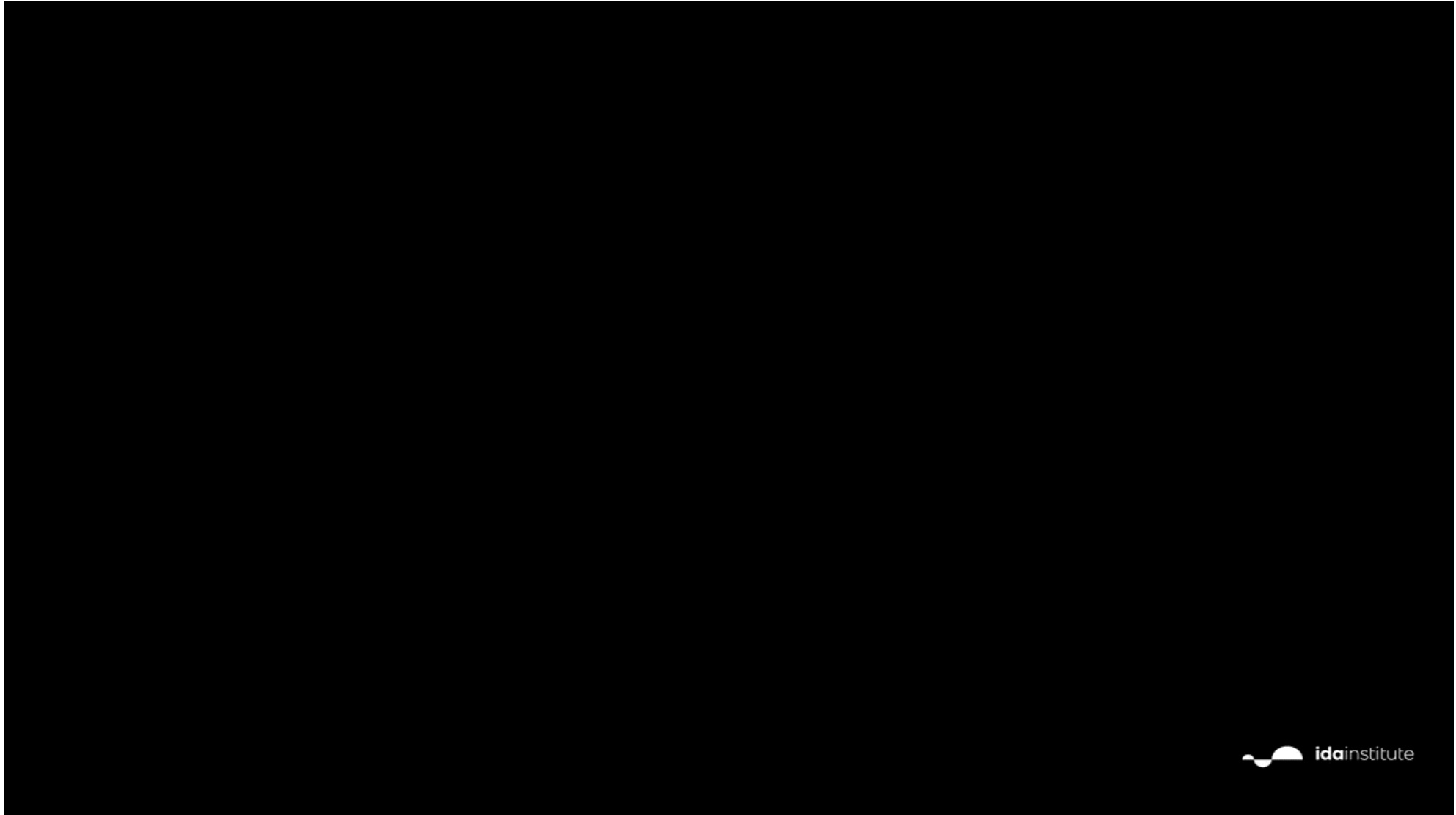
Clinical Benefits

Financial Benefits

Professional Benefits



PERSON-CENTERED CARE: A CLINICIAN'S REFLECTIONS



REFLECTIONS



What stood out to you in Bridgitte's description of how she chooses to work with person-centered care?

Why does she think it is important?

Motivational Engagement and the Ida Motivation Tools



The Problem: It's Hard to Change Habits

We often fail to do what has been recommended, even if we know it is for our own benefit.

Personal:

- ✓ Losing weight
- ✓ Taking adequate exercise

Audiology:

- ✓ Using hearing devices
- ✓ Adopting effective communication strategies

Medical:

- ✓ Taking vital medication
- ✓ Controlling sugar intake

Knowing is not automatically followed by doing

The Wider Medical Context

Professionals often try to persuade PHL to change their habits by:

Giving information

Making recommendations:

“Hearing aids will improve your quality of life”

“You should wear your aids every day”

“An FM system is just what you need”



How Successful is the Change?

Information and recommendations rarely work well:

PHL fails to follow recommended practice

PHL may even drop out of treatment

Professional feels frustration and dissatisfaction

It is better to let the PHL convince themselves of the need to change:

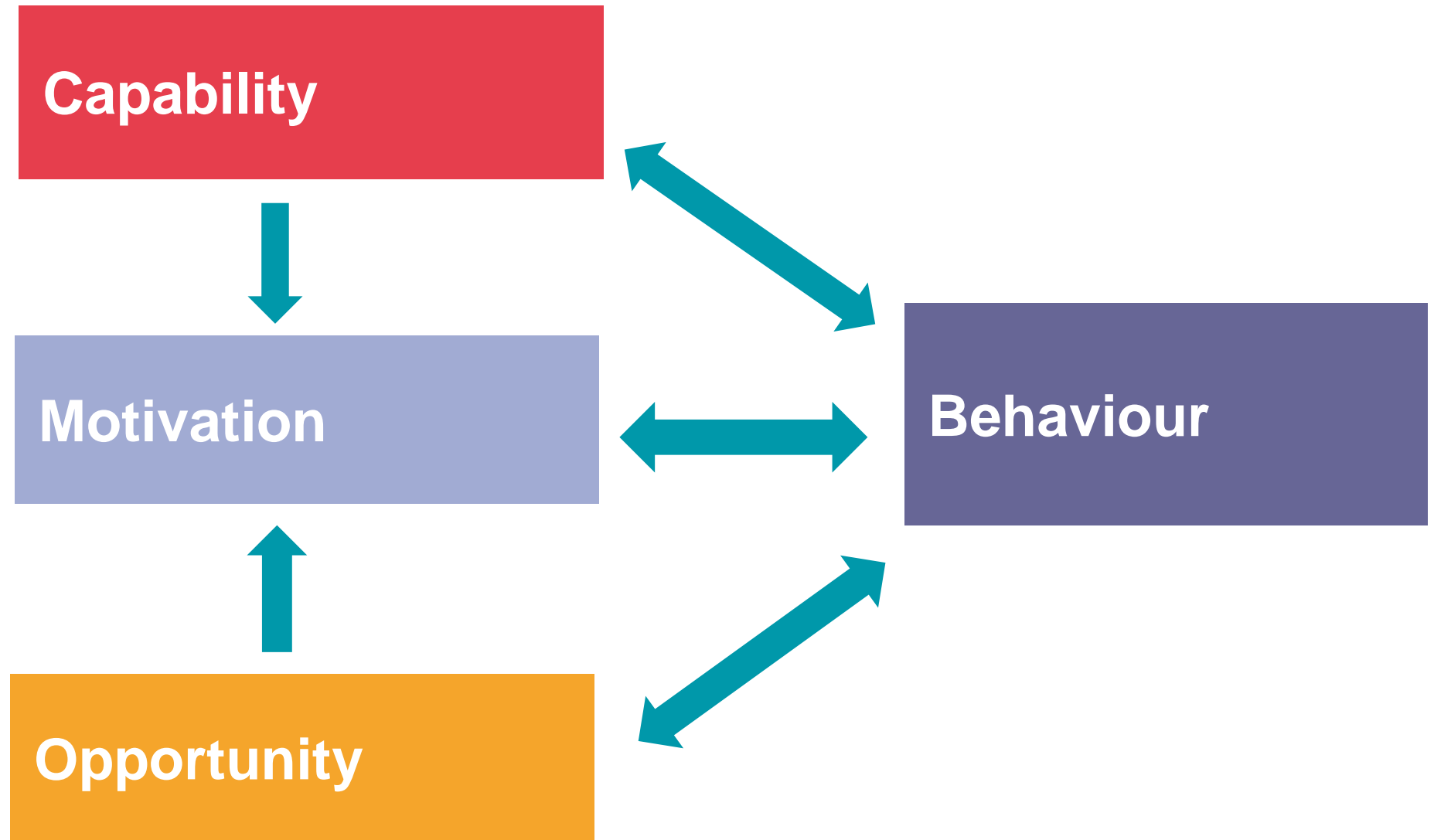
This is more effective

It has a longer-lasting impact

It utilises professional expertise and time more effectively

BUT HOW??

COM-B Model of Behaviour Change (Mitchi et al. 2011)

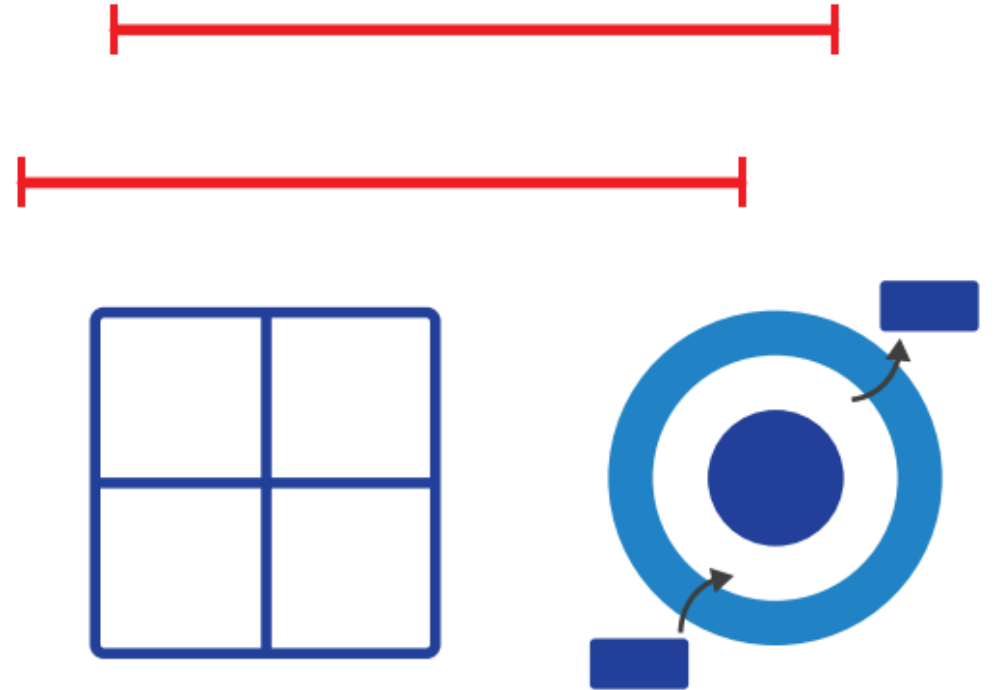


The Process of Changing Habits

Changing habits is fundamental in audiology

People follow a well-recognised pattern, when changing *any* habit

Some simple tools can support the change process



History of Motivation Tools

Based on the transtheoretical model of *intentional* behaviour change

Early work: smoking cessation, obesity, drug addiction

Evidence from successful self-changers and Across different schools of thought within psychology

Examination and resolution of ambivalence is central



(Prochaska and DiClemente, 1993)

The Circle



The Stages of Change

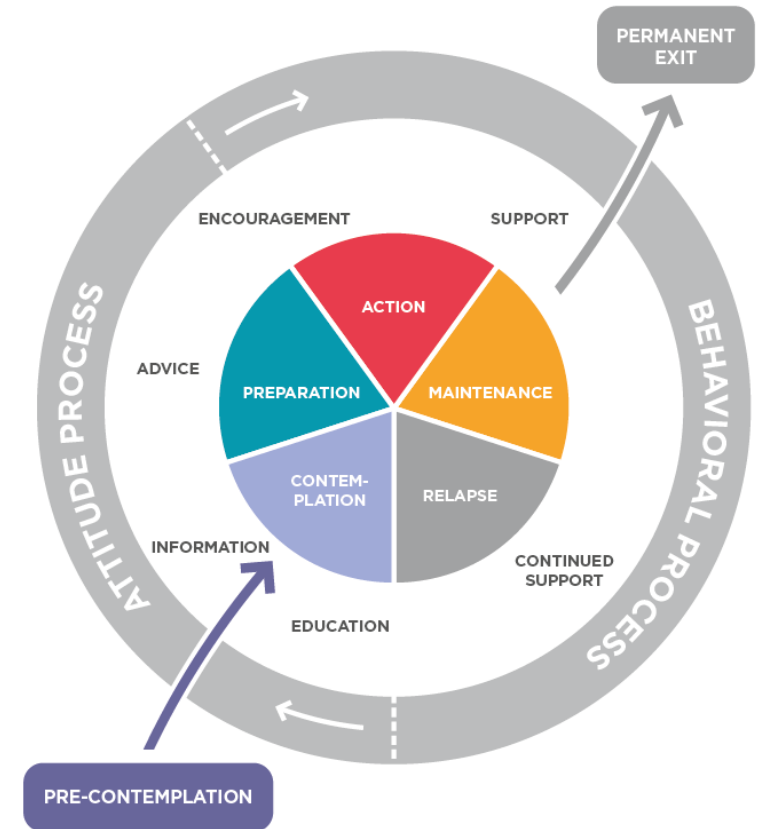
Shows when and how shifts in attitude and behaviour occur

Cyclical pattern of movement

Common set of processes

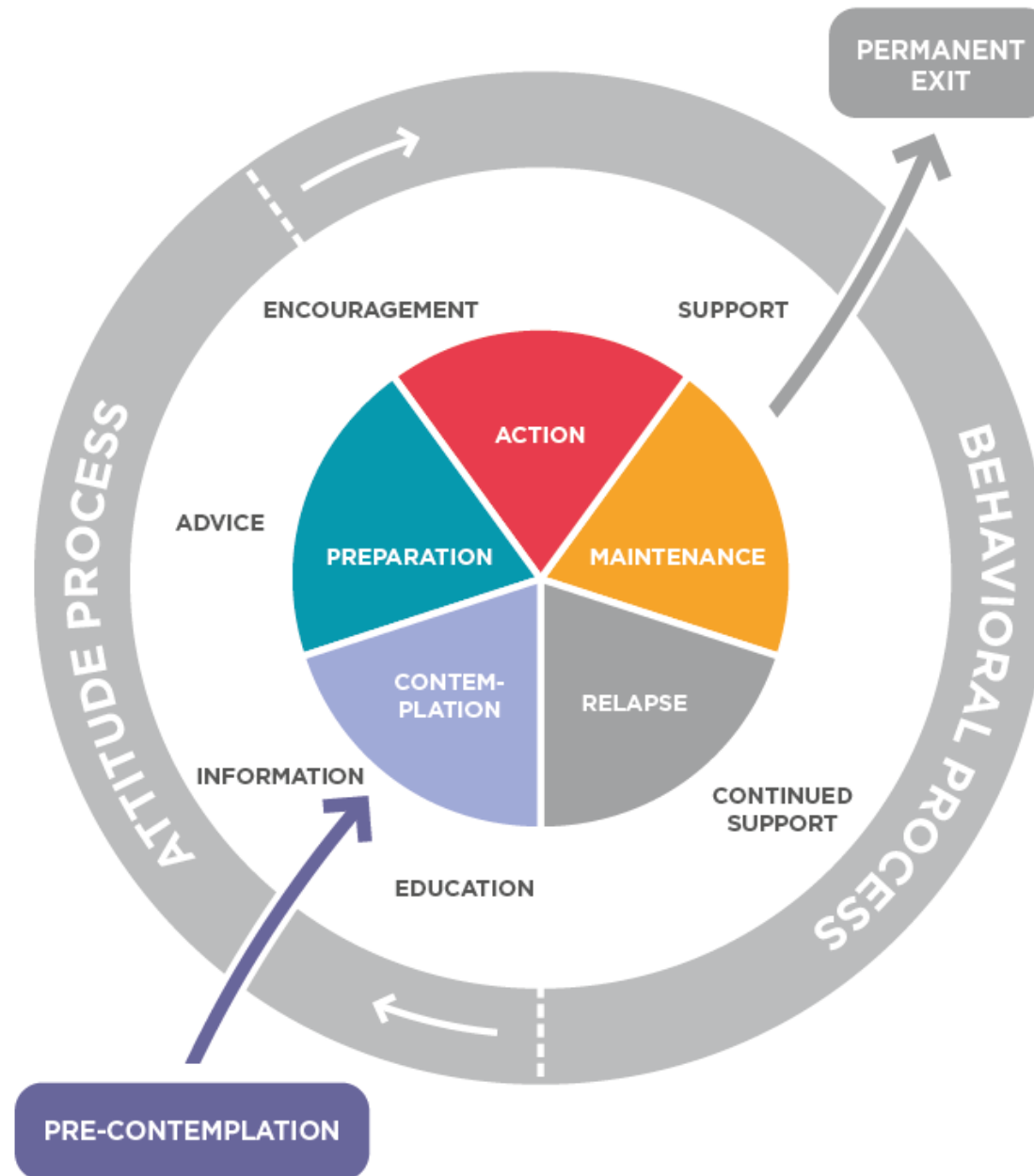
Systematic integration of **stages** and **processes** of change

Distinct and measurable stages



(Prochaska, DiClemente, Norcross, 1993)

The Circle



Let the Client Tell You.....

Which best describes you?

I am not ready for hearing aids at this time.
(Pre-contemplation)

I have been thinking that I might need hearing aids.
(Contemplation)

I have started to seek information about hearing aids.
(Preparation)

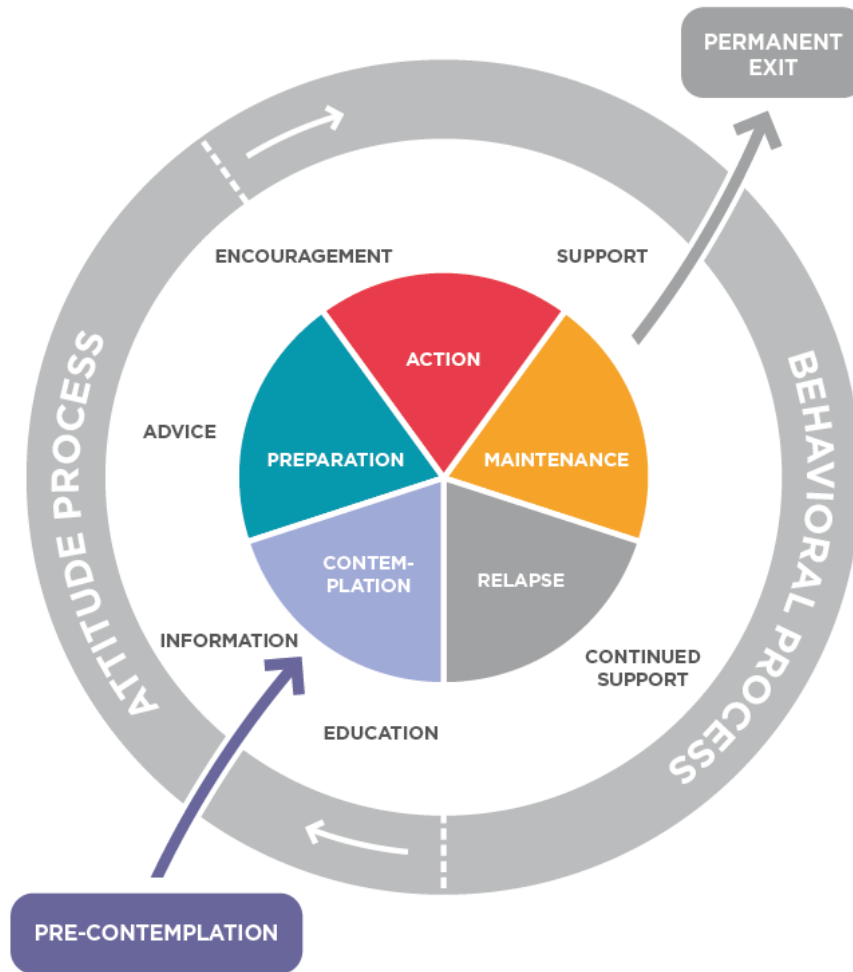
I am ready to get hearing aids if recommended.
(Action)

I am comfortable with the idea of wearing hearing aids.
(Maintenance)



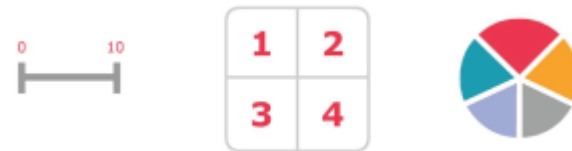
(Babeau, Kricos et al, 2004)

Does it Work?



"The better clinicians understand the clients' stages of change, the more precisely they can predict the likely success of the treatment and the better they can devise the correct treatment"
(Levesque et.al., 2012)

Ida Motivation Tools



Research Support

- Feasibility of motivational engagement in UK NHS
- M+ group showed greater self-efficacy, reduced anxiety, and greater engagement with the audiologist at assessment and fitting appointments
- Helps to better identify readiness. Aud's struggle with ambivalence.
- No extra time to appointments & useful as conversation starter.
- UK NICE Guidelines recommends motivational interviewing

Ferguson et al 2016; National Institute for Health and Care Excellence (NICE) 2018; Ekberg & Barr (in preparation).

The Lines



The Lines



Identify the PHL's views with respect to:

- how important is it to change their habits?
- how strongly do they believe in their ability to change?

Use the Lines

1: How important is it for you to improve your hearing right now?



2: How much do you believe in your ability to use... hearing aids, a cochlear implant, communication strategies...



The Core Part of the Dialogue

ASK:

What is the reason for giving yourself 6 and not 1 ?

RESPONSE:

The PHL begins to articulate their reasons, perhaps thinking deeply about this for the first time

***You are always more likely to be convinced by
listening to your own arguments and voice***

Don't Stop There...

Typical follow-up questions:

ASK:

What would it take to increase the importance from 5 to 9 ?

ASK:

What would it take to increase your belief in your ability to change habits from 3 to 8 ?

ASK:

What can I do to help you to go from 1 to 7?

The Box



The Box

Cost



Benefit

The Box: Costs and Benefits of Change

1) What are the advantages of no action? <i>I look normal</i>	2) What are the disadvantages of no action? <i>I feel left out and isolated</i>
3) What are the potential disadvantages of taking action? <i>People will know I'm deaf</i>	4) What are the potential advantages of taking action? <i>I'll be able to join in family conversation</i>

Adapted from Janis and Mann 1977

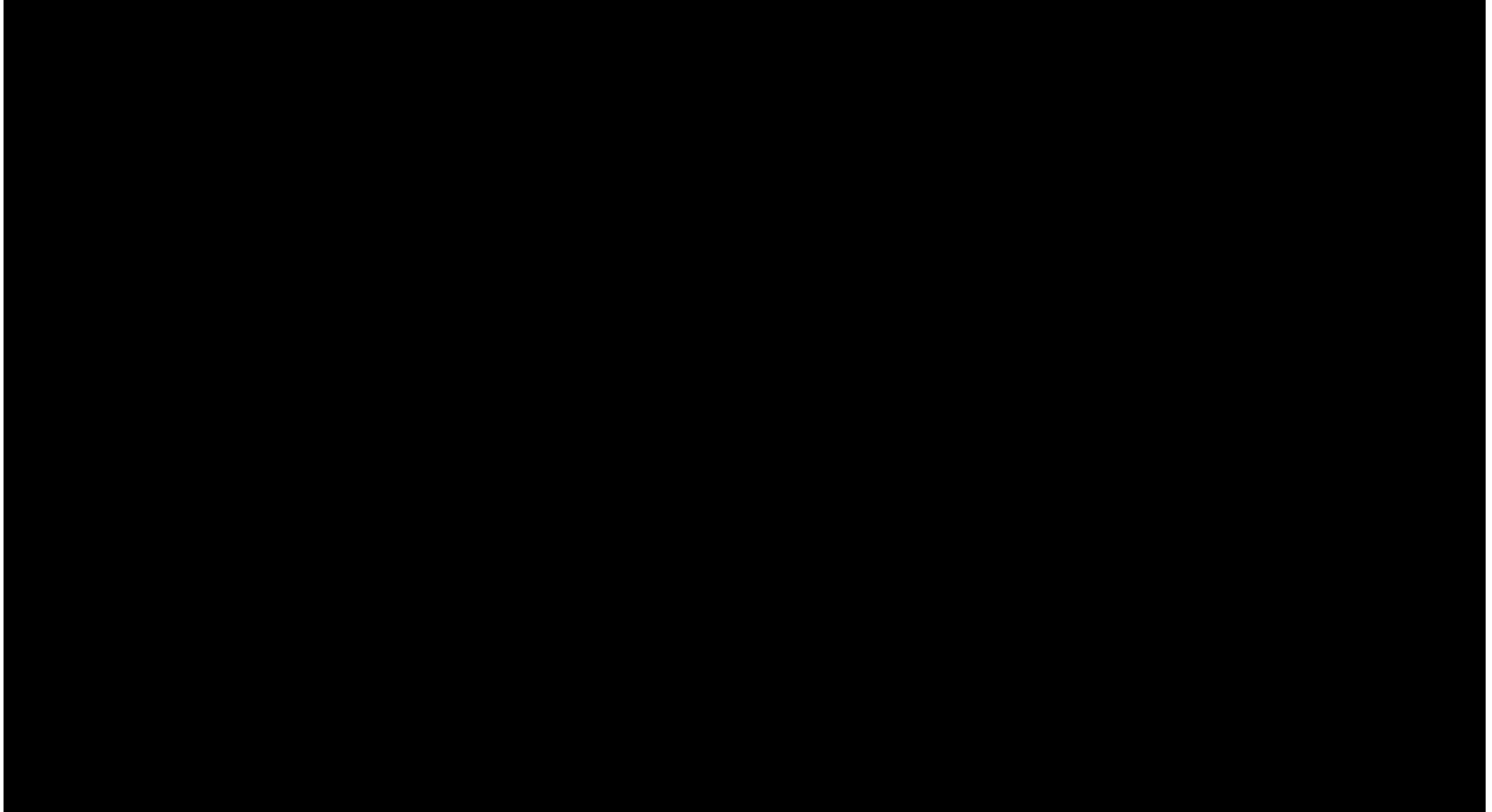
‘Status quo’: making no change in respect of hearing situation

‘Change’: adopting instruments/strategies to hear better

Hearing care at a glance



Naomi & Paul



Putting Theory Into Practice



3 Practical Take Away Tips

Ida Tools Website

Ida Learning Hall (CPD)

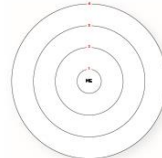
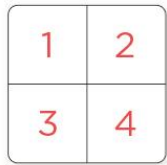
Inspired by Ida (you & your clinic)

Visit www.idainstitute.com/tools

Tools

Our tools help open communication between hearing care professionals and their clients. Clinicians can gain a better understanding of their clients' needs and wants, involve their clients in the rehabilitation process, and improve outcomes. For people with hearing loss, the tools are a way to help prepare for appointments, emphasize their hopes and concerns, and take an active role in their hearing care. Explore our tools below.

EXAMPLES OF IDA TOOLS



Motivation Tools

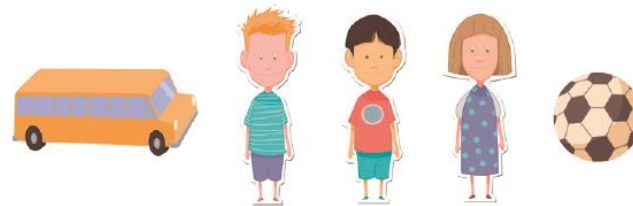
Increase client motivation with the Line, the Box & the Circle

Communication Partners

Involve the family and other communication partners

Living Well

Help people manage hearing loss in daily life



Tinnitus Management

Provide Hope for Tinnitus Patients

Pediatrics

Support children with hearing loss and their families

Ida Telecare

Improve and extend care beyond the appointment

Ida Learning Hall

- On-the-go, bite-sized learning opportunities about person-centered care and Ida tools
- World-wide network of hearing care professionals
- Discuss and explore new topics
- Ask questions – and get answers
- Earn CEU/CPD points
- Free learning platform

The screenshot displays the Ida Learning Hall website. At the top is a red banner with the text "IDA LEARNING HALL" in white, and the "ida institute" logo on the right. Below the banner, the main content area is divided into several sections. On the left, there is a video player titled "Welcome to the Ida Learning Hall" showing a man in a white shirt. To the right of the video is a grey box titled "WELCOME TO A NEW LEARNING EXPERIENCE" with the heading "DISCOVER" and three bullet points: "Bite-sized learning", "Knowledge sharing", and "Connecting with peers". Below the video player are two buttons: "HOW-TO VIDEOS" and "COURSE OVERVIEW". To the right of these buttons is a section titled "CHOOSE YOUR COMMUNITY" with a "Go To" button. Further right is a "Recently added content" section with a dropdown menu set to "All" and a list of four items, each with a thumbnail and text: "Arabic-Speaking professionals? Eman Bugshan", "Are you using your country's consumer resources? Dusty Jensen", "Anna Pugh on Person-Centered Care Bridgitte Harley", and "Bridgitte Harley on Person-Centered Care Jeanette Blom". The last item is followed by "Make Auditory Rehabilitation Work in Any Practice : The Hearing Journal Dusty Jensen". A "VIEW MORE" link is at the bottom of this section.

A NEW BENCHMARK FOR PERSON-CENTERED CARE

What is Inspired by Ida?

Inspired by Ida is a program which offers training to practitioners and clinics in how to apply person-centered methods and tools.

By completing the program, they receive the Inspired by Ida label – a benchmark of quality that signals their dedication to person-centered care.

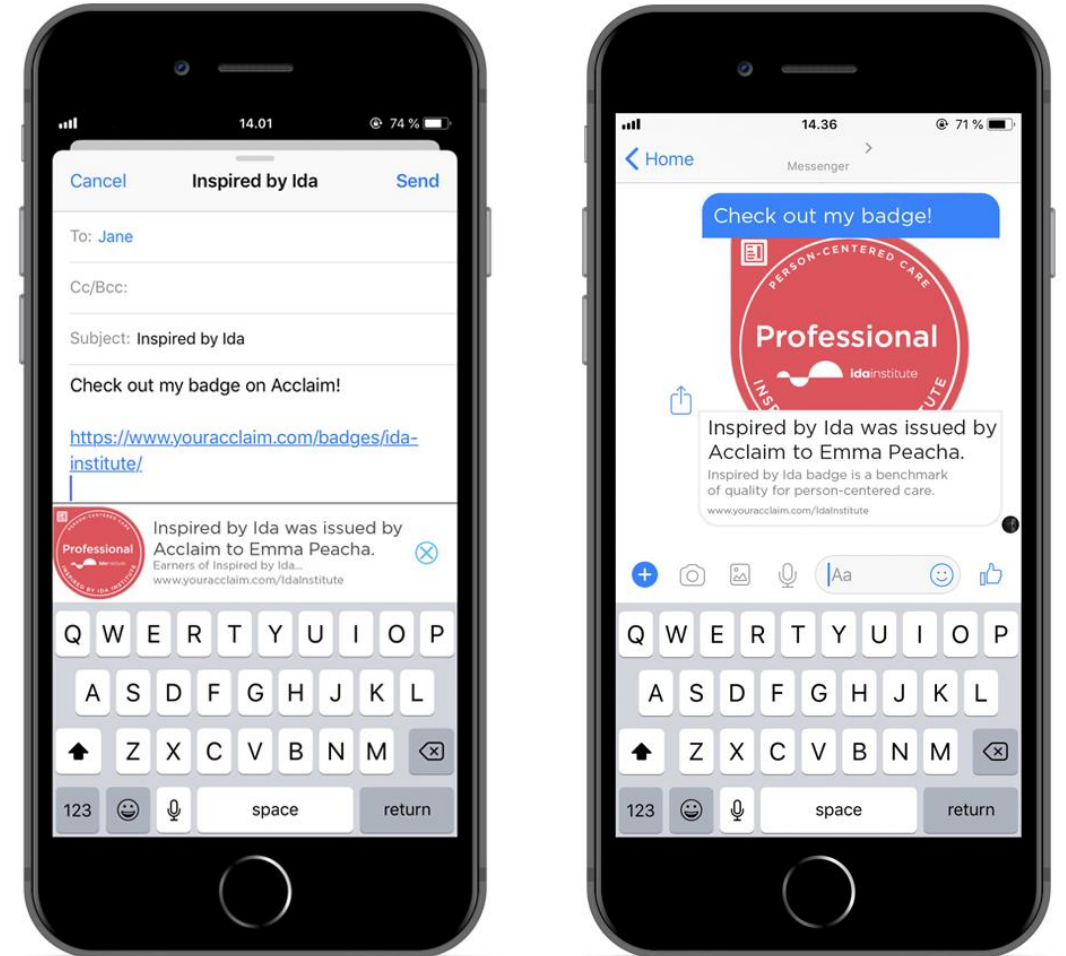
The goal of Inspired by Ida is to encourage HCPs worldwide to apply a person-centered approach to hearing care.



SHARE YOUR ACCOMPLISHMENTS ONLINE

The Inspired label allows for seamless sharing across online channels:

- FB, Twitter, LinkedIn
- Emails (with customized message) and email signature
- Mobile sharing: WhatsApp, Messenger
- Embedded on website



My Ida Moment



As you reflect on your own motivation, what can you do tomorrow to make your work with patients / clients even more person-centered than it is today?



Questions and feedback:
crut@idainstitute.dk

References