



Guidance for conducting "Patient education" – Checklist

Announcement of Patient Education (e.g. by the healthcare professionals or nursing staffs)
Prevalent cases started with baseline evaluation questionnaires before visit Incident cases started with the list of issues
Next, list of subjects fill in before visit
Collect baseline evaluation questionnaires and list of issues (before visit)
Patient education preparation
Definition of the most important information needs Patient Education
Conduct the Patient education session
Involve the Information booklet
Post assessment: questionnaire fill in by patients and caregivers directly after patient education session
Assessment of physicians: fill in after conduct one patient education session at least
Documentation of medical variables from the register or worksheets
Mailing self-efficacy questionnaires for re-assessment (between 4 to 6 weeks after patient education session)





How to educate patients? - Detailed Information about implementation and evaluation

Clinics for Pilot testing:

- 1 Munich
- 2 Hannover

Criteria for inclusion for Pilot testing:

Criteria for inclusion of patients:

- (1) interstitial lung disease (chILD) is clinical suspected
- (2) age of children and adolescents is between 0 to 18 years
- (3) sufficient German language knowledge to answer the questionnaires and fill in the list of topics as well to understand the information of the patient education session and information material

Criteria for inclusion of parents:

- (1) presence of a child/foster child (≤18 years) with the medical reasonable suspicion if interstitial lung disease (chILD)
- (2) sufficient German language knowledge to answer the questionnaires and fill in the list of issues as well to understand the information of the patient education session and the information material

Conduct Patient education

The subsequent section give practical advice for a possible design of a patient education session.

1. Step: Patient information about the programme and baseline assessment

Patients and/or their caregivers should point to the methology of the programme and its evaluation, before they start with the patient education session.

Prevalent cases start with the baseline assessment. Subsequently, they fill in the list of issues. **Incident cases** start with the list of issues. All patients 8 years and above and his/her caregiver should complete the evaluation questionnaires and list of issues.

2. Step: Provide the list of issues for Patient education

To assess patients' needs, all patients of 8 years and above and caregivers are filled in the list of issues prior consultations and clinical visits. In a free text, the patient and/or his/her caregiver has the possibility to specify further questions. This list of issues should be filled from patient and/or his/her caregiver before clinical visits. It should be chosen a maximum of 3 items. These items should be prioritized from 1 to 3.





Before consultation, the physician should be oriented to questions of the patient and/or his/her caregiver.

Patients should make a note of the time before beginning and at the end of the patient education session.

3. Step: Targeted individually Patient education session

Before the education session starts, questionnaires and list of issues will be collected. Patient education should basically happen during clinical visits. For the scheduling, a timeslot of 30 minutes should be reserved at least, to assess the information needs, to conduct the educational session, and to evaluate this session.

Incident cases have probably more information needs and a larger time frame shall be provided.

Questions and needs should have priority in this treatment. Patient education should be conducted based on the prioritized items of the list of subjects. Patient education should be structured and individualized. Relevant chapters of the patient information booklet should be integrated into the educational session. Provided images and illustrated examples of patients affected with chILD should be used, to illustrate medical issues. The use of flipcharts or adhoc produced graphics is useful to illustrate medical information.

Questions of the patient and/or his/her caregiver are arising during the patient education session, but not related to the actual subject, should be noted and picked up at the end of the session or during another visit.

Existing knowledge, age, developmental stage and medical background should be considered. A patient-and family-centered communication is recommended. For patient education with **younger children** we recommend a child-centered approach and the integration of the caregivers. Patients who have reached **school age** should already be treated as experts of their illness. As early as possible they should become the focus person in therapy, parallel to their caregivers. Education for **adolescents** should primarily work with the patients, caregivers can be secondarily integrated and should be informed after the educational session with their child about learning contents.

4. Step: Examination of goal-attainment

An evaluation of the patients' satisfaction with his/her received education is performed immediately after the session. The assessment of the patient information materials as well as self-efficacy should be conducted between 4 to 6 weeks after the educational session.





The assessment of the healthcare professionals should be conducted once they have conducted at least one educational session.

5. Step: Patient education as continuous process

Previous steps can be repeated if necessary with the scope of further appointments in the clinic.





Checklist for parents of patients with chILD

Hello,

Thank you very much!

Youre child has a interstitial lung disease. This forms of diseases called chILD. Please read the following list of subjects. For our today's consultation we will ask you to circle 3 chosen subjects, such you need more informations (a maximum of 3). Please specify how important this subject is for you, to marke with numbrs from 1 to 3. 1 (= "That is particular important for me to get further information!"), 2 (= "That is important to me to get further information!"), 3 (="That is less important for me to get further information!") You can write down your own questions if you needed. If you filled this list of subjects, we are requested to return this list to the healthcare rofessionals.

		7	
Please make a note of the:			
time for beginning:		4	
time for the end:		₹	
Structure and function of the respiratory tract		Everyday life with chILD	
		Feeding and nutrition	
What is chILD?		By which I perceive impaiment?	
What are the symptoms of chILD?		avoid complications	
What are the forms of chILD		emergency procedures	
Which degrees of severity there are?		School/kindergarten/free time	
What are the causes of chILD?		Traveling on holidays	
Diagnostic		Social and emotional suppport	
How the diagnosis is made?		Self-help groups	
How I can prepare my child for consultation in the		Stress-management (handling stress, anxiety	
clinic?		and negative thoughts)	
It may something else as chILD?		Familie life	
Which diagnostic tests my child must unerwent?		social law	
The diagnosis is definit, and now?			
chILD-treatment			
Who is involved in my treatment?			
Oxygen therapy			
treatment by medication			
Additional non-medicational treatment			
If you have any questions? Please specify!			



COOPERATION

Checklist for patients with chILD (< 8years)

Hello,

you have a interstitial lung disease. This forms of diseases called chILD. Please read the following list of subjects. For our today's consultation we will ask you to circle 3 chosen subjects, such you need more informations (a maximum of 3). Please specify how important this subject is for you, to marke with numbrs from 1 to 3. 1 (= "That is particular important for me to get further information!"), 2 (= "That is important to me to get further information!"), 3 (="That is less important for me to get further information!") You can write down your own questions if you needed. If you filled this list of subjects, we are requested to return this list to the healthcare rofessionals.

Γhank you very much!			
Please make a note of the:			
time for beginning:			
time for the end:			
Structure and function of the respiratory tract		Everyday life with chILD	
		Feeding and nutrition	
What is chILD?		By which I perceive impaiment?	
What are the symptoms of chILD?		avoid complications	
What are the forms of chILD		emergency procedures	
Which degrees of severity there are?		School/kindergarten/free time	
What are the causes of chILD?		Traveling on holidays	
Diagnostic		Social and emotional suppport	
How the diagnosis is made?		Self-help groups	
How I can prepare for consultation in the clinic?		Stress-management (handling stress, anxiety	
		and negative thoughts)	
It may something else as chILD?		Familie life	
Which diagnostic tests I must unerwent?		social law	
The diagnosis is definit, and now?			
chILD-treatment			
Who is involved in my treatment?			
Oxygen therapy			
treatment by medication			
Additional non-medicational treatment			
If you have any questions? Please specify!			