Teach Back Method Role Play

**Preparation:**
Review the Training Planning Form
Print handouts and assessment tools
Print and cut out enough scenario pieces for each participant

**Presentation:**
Start by showing a short YouTube video to introduce the Teach Back Method:
[https://www.youtube.com/watch?v=bzpJYF_tKY](https://www.youtube.com/watch?v=bzpJYF_tKY) (1:22)

Share with participants that regardless of our reading level or educational background, studies show that when we leave our healthcare provider’s office we immediately forget about half (40-80%) of the information he or she provided – and almost half of what we do remember will be incorrect.

The Teach Back Method allows public health workers to use open-ended questions and check for understanding by asking clients to explain information and instructions in their own words. The Teach Back Method is one of several best practice universal health literacy precautions that should be used with all clients. Other best practices include:

- creating a shame-free, client centered environment,
- listening,
- using simple language,
- using visual cues, and
- addressing all adult learning styles.

If time allows, watch the following short demonstration of the Teach Back Method with a patient newly diagnosed with asthma. As a group, discuss how well the nurse used the Teach Back Method and how she could have incorporated other universal health literacy precautions to make her communication more clear.
[https://www.youtube.com/watch?v=iNwNG5tZDAc](https://www.youtube.com/watch?v=iNwNG5tZDAc) (2:41)

Watch the following short video on the Teach Back Method being used with a patient with heart failure, and identify the strengths and weaknesses in the provider-patient interaction.
[https://www.youtube.com/watch?v=QNhulnjRmqk](https://www.youtube.com/watch?v=QNhulnjRmqk) (3:24)
Role Play Instructions:
In this role play participants should partner up. One person will play the role of the public health worker, while the other person plays the role of the client visiting the health department. The instructor should choose a scenario, separate the roles on the dotted line, and distribute the appropriate role to participants.

“Clients” should be instructed to mirror the environment created by the public health worker (rude, brusque, patient, courteous). “Clients” should answer “yes” or “no” questions with just a “yes” or “no” and not volunteer any information. They should also make note of any multi-syllable words or jargon the public health worker uses and write them down on the Client Feedback Tool during evaluation.

The instructor should emphasize that although fact sheets are being provided on each topic, this exercise is not a test of the public health workers’ knowledge about the specific health issues in the scenarios. Rather it is an opportunity for participants to practice utilizing universal health literacy precautions, including:

- creating a shame free, client-centered environment,
- listening,
- using clear communication,
- addressing all adult learning styles, and
- checking for understanding by using the Teach Back Method.

Participants will have 3 – 5 minutes to interact. At the end of that time, the person who played the role of the public health worker should complete the Teach Back Self-Assessment to evaluate their own performance, while the “client” should complete the Client Feedback Tool to evaluate the interaction.

Hold a group discussion about the role play experience and ask participants to identify areas for improvement in their Teach Back Method delivery.

If time allows, participants should trade roles and repeat the exercise using a different scenario.

Ensure everyone has signed the Sign In Sheet and collect it.

Thank them for their participation and encourage them to continue to practice using the Teach Back Method and assess themselves periodically using the Teach Back Self-Assessment tool.

Follow Up:

Add a short summary of the training to the end of the Training Planning Form, including any areas for improvement that were identified.

Attach the training Sign In Sheet to the finalized Training Planning Form and retain a copy in your records.

Share your outcomes with the appropriate supervisor(s) and/or grant staff.
**Scenario 1**

Public Health Worker:
A client who tested positive for Chlamydia is in the exam room. You need to let her know the test results, and discuss treatment, condom use, and notifying her partner(s) to let them know they need to be tested.

Client:
You have come to the health department to get the results for a recent STD test. You’re worried about what the results will show. Your partner refuses to use condoms saying they take the fun out of it. You are afraid if you share the results of the STD test he will be disgusted, break up with you, and share it on social media. You also don’t want him or anyone else to find out that you hooked up with his friend a few weeks ago.

**Scenario 2**

Public Health Worker:
The mother of a newborn is here for her first immunizations. She is unsure of the process or which vaccines her child may need. Let her know the flow of a typical visit and give some information about vaccines.

Client:
You are a young mother with your first child. You’ve brought the newborn in for her first immunizations, but you are very nervous bringing her out of the house to the health department. You are worried about germs. You don’t know what the process is at the health department or if you even want to get her any shots. You’ve read on the Internet that vaccine contains mercury and that babies can die from getting shots. You are also worried your baby will be upset by getting shots.

**Scenario 3**

Public Health Worker:
An adult patient has come in to have his blood pressure checked. He says he just started a new medication for hypertension, but he is not sure what that is or what the medicine is called. He is not sure what his blood pressure numbers usually are. He says he can feel his heart pounding, so his blood pressure must be good.

Client:
You are an 80-year old man and have come to the health department to have your blood pressure checked because your doctor said he wants you to have it checked twice a week at the health department. You’ve been feeling fine, but your doctor just started you on a new medicine for hypertension. You don’t know the name of the medicine or how often you are supposed to take it. You don’t know what your blood pressure numbers are, but you can feel your heartbeat, so you think you must be fine.