

What is Patient Activation Measure – PAM?

It is widely acknowledged that people who have the knowledge, skills & confidence to manage their own health tend to have better health outcomes than those who have a more passive approach. Clients/patients with high levels of activation understand their role in the care process and feel capable of fulfilling that role. Individuals with long term conditions, who are more highly activated, are more likely to engage in positive health behaviours and to manage their health conditions more effectively.

On the other hand, people who have low levels of activation are less likely to play an active role in staying healthy. They are less good at seeking help when they need it, at following advice given by healthcare professionals and at managing their health when they are no longer being treated. Their lack of confidence and their experience of failing to manage their health often means that they may prefer not to think about it.

There is also growing evidence that, while individuals may have an underlying level of ability and inclination to be active in managing their own health, patient activation can be increased by offering support and providing opportunities to develop both condition specific and general health knowledge and skills. The key to self-care is a new relationship that puts the needs of the individual first.

The use of PAM can make a valuable contribution to assessing a patient's ability to self-care at any given time. This assessment helps support next steps on what would be needed to increase their levels of knowledge, skills and confidence in order to improve their health and wellbeing outcomes. It can be used to tailor interventions to individual needs, significantly increasing the likelihood that people will adopt behaviours that contribute to better health

PAM is a tool that measures people's knowledge, skills and confidence (this is referred to as 'patient activation') in managing their own wellbeing. PAM is a validated questionnaire comprising 13 questions and is licensed from Insignia Health. The responses match the respondents to **one of four levels of 'activation'**, each of which reveals insights into a range of health-related characteristics, including behaviours and outcomes. PAM should be used in conjunction with care and support planning and a range of interventions to support self-care.

PAM Level 1	PAM Level 2	PAM Level 3	PAM Level 4
The client/patient is : Disengaged and overwhelmed	The client/patient is: Becoming aware, but still struggling	The client/patient is: Taking action	The client/patient is: Maintaining behaviours and pushing further
Individuals are passive and lack confidence. Knowledge is low, goal orientation is weak, and adherence is poor	Individuals have some knowledge, but large gaps remain. They believe health is largely out of their control, but can set simple goals.	Individuals have the key facts and are building self-management skills. They strive for best practice behaviours, and are goal orientated.	Individuals have adopted new behaviours, but may struggle in times of stress or change. Maintaining a healthy lifestyle is a key focus.
Their perspective: “My doctor is in charge of my health”	Their perspective: “I could be doing more”	Their perspective: “I am part of my health care team”	Their perspective: “I am my own advocate”

Why is knowing the PAM score useful?

- Services and support can be tailored to ‘meet patients where they are’
- The right intervention can help to increase their knowledge, skills and confidence and so, improve their ability to look after their wellbeing
- Higher activation levels correlate to healthy behaviours (Activated people are significantly more likely to attend screenings, check-ups and immunisations, to adopt positive behaviours (e.g. diet and exercise), and have clinical indicators in the normal range (e.g. body mass index, blood sugar levels, blood pressure and cholesterol).
- Studies of interventions to improve activation have shown that clients/patients who start with the lowest activation scores tend to increase their scores the most, suggesting that effective interventions can help engage even the most disengaged

Where PAM can support self-care

Person-centred care is based around developing a patient-professional relationship that seeks to understand and value equally the perspectives of both parties. The process of changing the relationship begins with the initial conversations clinicians and others have with patients. The initial conversation includes a systematic exploration of the patient’s readiness to begin to take charge of their health. This exploration paves the way for the joint creation of an individualised health plan, reflecting the patient’s preferred outcomes and agreed timescales and measures. Some of these measures may be biometric indicators, for

instance lowered blood pressure, while others reflect the patient's own goals and desired outcomes, for instance, effective use of public transport to maintain a social life for a patient no longer able to drive a car. Adding PAM data introduces an evidence based and consistent measure to help further inform this process.

Methods of administering the PAM

There are many ways in which the PAM can be administered.

A one-to-one mediated session provides the best chance for patients to fully understand the questions and produce the most consistent responses. This can be done face-to-face or on the telephone. It provides an opportunity:

- For the client/patient to clarify the PAM's purpose or the meaning of questions
- For the doctor/social prescriber/mentor/support person to provide useful feedback to the client/patient and to set expectations about future data collection

What to do with PAM results

The decision to share the PAM score with clients/patients routinely will depend on the context in which it is being used. Scores should always be shared with clients/patients who wish to know their results as part of the ongoing conversation. The purpose of the measure is to help ensure that services and support is tailored to the individual's needs.

Examples of how the PAM score can help to tailor services and support include:

- Clients/patients with a low activation could be given longer appointment times and more frequent follow up appointments
- Receive self-management education and access to more/wider support opportunities
- Be encouraged to make small behaviour changes to help build their confidence (small changes can make big differences)
- Clients/patients with high activation could be given more choice around attending routine follow up appointments and make greater use of telephone consultations.

PAM Workshops are therefore suitable for anyone clinical and non-clinical, working with clients/patients across Lancs & South Cumbria to enable those individuals to take a more active role within their own health & care.

If you are interested in finding more information about PAM please e-mail:

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