



UNDERSTANDING AND ADDRESSING HEALTH LITERACY

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Objectives

1. What is Health Literacy?
2. How does health literacy correlate with health inequities?
3. How is Bronson Healthcare is addressing health literacy?

WHAT IS HEALTH LITERACY?



What is health literacy?



"Health literacy is the degree to which individuals have the capacity to obtain, process, and understand basic health information and services needed to make appropriate health decisions."*

*United States Department of Health and Human Services.
Healthy People 2010.

That is...

Health literacy is the ability to

- Find what you need,
- Understand what you find, and
- Use what you find to take good care of your health.

Statistics

- 36% of adults have a basic or below-basic understanding of health material
- 13% of Kalamazoo's adult population are functionally illiterate
- Low health literacy costs the U.S. economy as much as \$238 billion each year

Who has low health literacy?



- Low health literacy can affect anyone of any age, ethnicity, background, or education level.
- Low health literacy is not something you can see. You can't tell by looking.

Some people with low health literacy:



- Have completed high school or college
- Are well-spoken
- Look over written materials and say they understand
- Hold white collar or health care jobs
- Function well when not under stress

People may struggle if they:

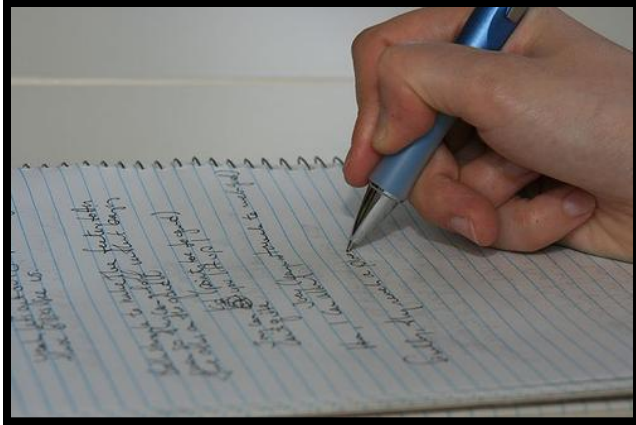


- Don't know medical terms or how their body works
- Must use numbers or health risk information to make a decision
- Are scared or confused or in pain
- Need care that is complicated
- Usually use a language other than English.

Improving each patient's health literacy is important because **this:**

- Increases each patient's ability to follow instructions after they leave our care, increasing patient safety.
- Improves each patient's access to care and health outcomes so that our health care is truly equitable.
- Increases each patient's comfort level with asking questions, keeping what we do patient and family centered.

What is Plain Language?



- Common, everyday words, not jargon.
- Using a person's primary language.
- Words with one or two syllables.
- Spoken or written words that a person with 5th grade reading skills can understand.
- Pictures that help explain ideas to persons with less than 5th grade reading skills.

For example . . .

Examples of Common Words

Instead of This:

- Sanitize
- Dermatologist
- Respiratory problems
- Monitor
- Annually
- Oral hygiene
- ICU

Use This:

- Wash
- Skin doctor
- Breathing problems
- Check
- Every year
- Mouth care
- Intensive Care Unit

Instead of this:

I, for myself and anyone entitled to act on my behalf, release the County of Kalamazoo, the City of Kalamazoo, and the Bronson Healthcare Group and its subsidiaries, whose property and personnel are used, and other sponsoring or co-sponsoring companies or individuals from responsibility for any injuries or damages I may suffer.....

RL: 26.9

Use this:

I plan on walking in the Walk Across Kalamazoo. I am physically able to participate in the walk. No person or company is responsible if I am injured during the walk. I will not hold Bronson Healthcare Group, the County of Kalamazoo or the City of Kalamazoo responsible if I am injured.

RL: 8.9

HOW DOES HEALTH LITERACY CORRELATE WITH HEALTH INEQUITIES?



Health Care Disparities

“Racial or ethnic differences in the quality of health care that are not due to access-related factors or clinical needs, preferences and appropriateness of intervention.”

IOM 2003

National Assessment of Adult Literacy

According to NAAL:

- 36% of respondents ranked at Basic or Below Basic in Health Literacy
- Whites & Asians/Pacific Islanders had higher literacy than Blacks, Hispanics, Native Americans & Multiracial Adults
- Hispanic adults scored lower than adults in any other group
- Rates of limited literacy are higher for
 - Minorities
 - Individuals with less education
 - Individuals with limited English proficiency

Is Health Literacy a Mediator of Racial & Ethnic Disparities in Health Care?

- Literacy can be predictive of health status
- Health literacy can mediate the effect of race on health outcome
- Causal relationship is uncertain

Health Literacy & Health Disparities

- Focus on improving communication
- Address language barriers by using:
 - plain language
 - interpreters
 - written translations
- Both can be impacted by health beliefs

Quality Improvement Initiatives

- Improve patient education materials
 - Increase readability
 - Reduce complexity
 - Make translations available
- Examine complexity of health messages and demands made of patients in the healthcare setting

HOW IS BRONSON HEALTHCARE IS ADDRESSING HEALTH LITERACY?



Patient Education

What are our challenges?



How we are approaching education?

- Ask Me 3 (Education Plans)
- Every interaction is a teachable moment
- Include another learner
- All staff are teachers
- Teach Back

What to Teach?

AskMe3[©] is a programmed way to help patients and staff focus on what is important.

- What is my main problem?
- What do I need to do?
- Why is it important for me to do this?



Education Plans

Page 1 is a reference page for staff

- Resources for staff
- Teaching Tools
- References
- Authors
- Approval
- Revision Date

Message to Patients and Family

Appendectomy

Getting Ready to Learn About an Appendectomy

Learning something new can be hard. It is even harder if you are not feeling well. The purpose of this education plan is for you and the staff to review this information together. Here are some good things to tell the staff:

- Who you want to learn with you. We would like to have someone who will be helping you at home learn with you.
- The best way for you to learn. Do you learn best by reading a book or pamphlet, or by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus on learning right now.

This information is important to your health. We will be giving you information in small bits over several days. We may explain something more than once. If there is something you don't understand **it's OK to ask** us to explain.

Content of Education Plan

- What is my main problem?
- What do I need to do about it?
- Why is this important to me?

What I Need to Learn About an Appendectomy

By the time I leave the hospital I will be able to tell the staff how:

1. I will be active.
2. I will care for my incision(s).
3. I will eat in order to heal.
4. I will manage my pain.
5. I will contact the doctor's office with questions and/or problems.

The staff will use three questions to teach me about an Appendectomy:

1. What is my main problem?
2. What do I need to do?
3. Why is this important to me?

What is my main problem?

What is my main problem?

An appendectomy is surgery to remove the appendix. The appendix is a small finger-shaped pouch where the large and small intestines join. I have either a small 2-3 inch incision or 3 very small incisions (laparoscopic) on my belly. I am at risk for problems because I have had surgery.

Digestive System



What do I need to do?

What do I need to do?

I will be able to tell the staff how I will be active after surgery.

- I will slowly increase my walking. My doctor will decide how much I should walk.
- I will not sit or lie down for long periods of time.
- I will not drive until my doctor says I can.
- I will not lift more than 15 pounds. My doctor will tell me when I can lift more.

I will be able to tell the staff how I will care for my incision after surgery.

- I will wash my hands before touching my incision or bandage.
- Keep incision clean and dry. I will not take a bath until my doctor says it is okay.
- I will change the dressing as ordered by my doctor.

What is this important to me?

Why is this important to me?

Following these directions will help me heal and keep me safe after surgery.

As part of my care I have received this education plan.

When do you teach?

All of the Time

Class on the Run: Teaching patients in a time crunch

- Step 1 – Make it a facility-wide policy that everyone does patient education.
- Step 2 – Make sure everyone has the skills to teach patients.
- Step 3 – How do you do it without it being a burden?
- Step 4 – Doing it quickly and effectively.
- Step 5 – Preparing for patient education.

Ginger Kanzer-Lewis (Patient Education Update: News, Views, and Resources in Health Education. Winter 2008)

Who do you teach?

- Patient
- Family member (as defined by the patient)

Who is a teacher?

EVERYBODY

Teach Back

Teach-back is a way to confirm that you have explained to the patient what they need to know in a manner that the patient understands.

Teach Back as an Assessment of Learning



It Takes a Village

Patient Education Council

- Nursing
- Rehab. Services
- Education Services
- Corporate Communications
- Patient and Family Advisors
- Pharmacy
- Health Literacy Coach
- Dietitian
- Safety and Quality

Health Literacy Committee

The goals of the Health Literacy Committee are to:

- bring the reading level of our forms and educational materials to the average reading level of our community
- educate staff on how to use health literacy tools and recognize learning barriers when conducting patient education
- partner with community organizations to advocate for health literacy for Bronson's patient population

**What questions do you
have for us?**



Thank You!

bronsonhealth.com