



ST. VINCENT CHARITY
MEDICAL CENTER

A Ministry of the Sisters of Charity Health System

For the Heart of Cleveland

HEALTH LITERACY:
FINDING THE RIGHT
WORDS FOR BETTER
HEALTH

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CENTER



OBJECTIVES

- Describe the scope and implications of the health literacy problem
- Identify barriers faced by both patients and clinicians
- Identify specific strategies to enhance health literacy



DEFINITIONS

- **Literacy:** The ability to read, write, compute, think critically to achieve one's potential.



DEFINITIONS

- **Health Literacy:**

“The degree to which individuals have the capacity, to obtain, process, and understand basic health information and services needed to make appropriate health decisions.”

U.S. Department of Health and Human Services. *Healthy People 2010*



DEFINITIONS

Health Literacy:

In other words:

- Patient’s ability to understand and act on health information
- Health care provider’s ability to communicate so patients can act on the information to take better care of their health



Current Skill Levels

- Average American reads at the 8th grade level
- One out of five read below grade level five.
- Cuyahoga County: 25% read at or below the 5th grade level

(U.S. Department of Education, 2003)



Mismatched Communication

Provider process:
Giving information

Patient process:
Understanding,
remembering and acting
on information





What is it Like?

- The following passage simulates what a reader with low general literacy (NALS *Below Basic*) sees on the printed page.
- Read the entire passage out loud.
- You have 1 minute to read.
- Hint: The words are written backwards and the first word is “cleaning”

**GNINAE LC – Ot erussa hgih ecnamrofrep,
yllacidoirep naelc eht epat sdaeh dna natpac
revenehw uoy eciton na noitalumucca fo tsud
dna nword-der edixo selcitrp. Esu a nottoc
baws denetsiom htiw lyporposi lohocla. Eb
erus on lohocla sehcuot eht rebbur strap, sa ti
sdnet ot yrd dna yllautneve kcarc eht rebbur.
Esu a pmad tholc ro egnops ot naelc eht
tenibac. A dlim paos, ekil gnihsawhsid
tnegreted, lliw pleh evomer esaerg ro lio.**



- How do you clean the capstan?



WHY IS HEALTH LITERACY

- **IMPORTANT!** Up to 80 percent of medical information provided by healthcare providers is forgotten immediately by patients.
- Almost half of the information that is remembered is incorrect.
- Approximately 20 percent of American adults read at or below the fifth grade level. However, most health information materials are written at the tenth grade level or above.



SCOPE OF THE PROBLEM

- Nearly half of all American adults--90 million people--have only basic or below-basic health literacy skills and have difficulty understanding and acting on health information

Institute of Medicine Report "Health Literacy: a Prescription to End Confusion"



SCOPE OF THE PROBLEM

- 36% of the U.S. population have poor health literacy skills

These individuals cannot:

- use a graph to determine a healthy weight range,
- use a chart to find the age range for a child's vaccination, or
- read a label to identify substances that interact with the over-the-counter medication

Kutner, M., Greenberg, E., Jin, Y., and Paulsen, C. (2006). *The Health Literacy of America's Adults*



SCOPE OF THE PROBLEM

Healthcare is more complex now

<u>40 Years Ago</u>	<u>Today</u>
1 Doctor	Many Providers
1 Pharmacist	Chain Drug Stores
No Forms	Numerous Forms
In-Patient	Out-Patient
650 Medicines	24,000 Medicines



SCOPE OF THE PROBLEM

- Persons with limited health literacy skills have:
 - Higher utilization of treatment services
 - Hospitalization
 - Emergency services
 - Lower utilization of preventive services



SCOPE OF THE PROBLEM

- \$106-\$238 billion is lost every year on health care costs due to a disconnect in the delivery of health information

Vernon, J.(2007). Low Health Literacy: Implications for National Health Policy.



THE RIGHT TO UNDERSTAND

- Patients have the right to understand healthcare information that is necessary for them to safely care for themselves, and to choose among available alternatives.
- Health care providers have a duty to provide information in simple, clear, and plain language and to check that patients have understood the information before ending the conversation.

*The 2005 White House Conference on Aging;
Mini-Conference on Health Literacy and Health Disparities*



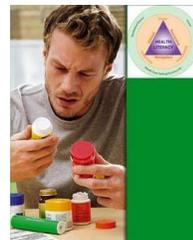
COMMON LOW HEALTH LITERACY PROBLEMS

- Not understanding Consent Forms
- Not understanding written education information
- Having trouble filling out forms



COMMON LOW HEALTH LITERACY PROBLEMS

- Not understanding how and when to take your medicine
- Not understanding your main health problem





COMMON LOW HEALTH LITERACY PROBLEMS

- Not knowing the words that the healthcare provider is saying
- Having trouble finding your way



What are the barriers to patients?

- . Barriers to Access
- . Barriers to Diagnosis
- . Barriers to Treatment



Barriers to Access

- Intake Forms
- Insurance Forms
- Medical History Questionnaires
- Informed Consents
- ER Easiest



Barriers to Diagnosis

- Patient provides mistaken information
- Patient misunderstands physician's questions
- Physician misunderstands patient
- Time





Barriers to Treatment



- Culture and language barriers
- Misunderstanding of treatment directions may lead to serious mistakes or non-compliance



STRATEGIES TO IMPROVE HEALTH LITERACY

1. Conduct patient-centered visits
 - Engage in a dialogue with the patient
 - Listen more and speak less
 - Encourage questions (ASK Me 3)



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STRATEGIES TO IMPROVE HEALTH LITERACY

Myth: Encouraging my patients to ask more questions will increase the length of their visit. I simply can't afford to spend more time with each patient

Reality: Fearing lengthy appointments, most doctors allow patients to talk for an average of 22 seconds before taking the lead. Research shows, however, that if allowed to speak freely, the average patient would initially speak for less than 2 minutes



STRATEGIES TO IMPROVE HEALTH LITERACY

2. Explain things clearly using plain language.

- Slow down the pace of your speech
- Use analogies
 - “Arthritis is like a creaky hinge on a door.”
- Use plain, non-medical language
 - “Pain killer” instead of “analgesic”



STRATEGIES TO IMPROVE HEALTH LITERACY

Practice: Plain, non-medical language

- Anti-inflammatory
- Benign
- Contraception
- Hypertension
- Oral
- Echocardiogram



STRATEGIES TO IMPROVE HEALTH LITERACY

3. Focus on key messages and repeat.

- Limit information by focusing on 1-3 key messages per visit
- Review each point and repeat several times
- Have other staff reinforce key messages.



STRATEGIES TO IMPROVE HEALTH LITERACY

Example: Key Messages: The most important concepts
First visit for patient with newly diagnosed Type II DM

Suggested key messages in red

- How the body controls blood glucose
- **Sugar level in blood is too high**
- Self-management of diabetes medications
- **Start medicine to lower sugar**
- **Potential complications of diabetes**
- Testing the blood sugar level
- Proper diet



STRATEGIES TO IMPROVE HEALTH LITERACY

4. Use “teach back” or “show me” techniques

- Asking patients to repeat **in their own words** what they need to know or do, in a non-shaming way.
- **Not** a test of the patient, but of how well **you** explained a concept.
- A chance to check for understanding and, if necessary, re-teach the information.



STRATEGIES TO IMPROVE HEALTH LITERACY

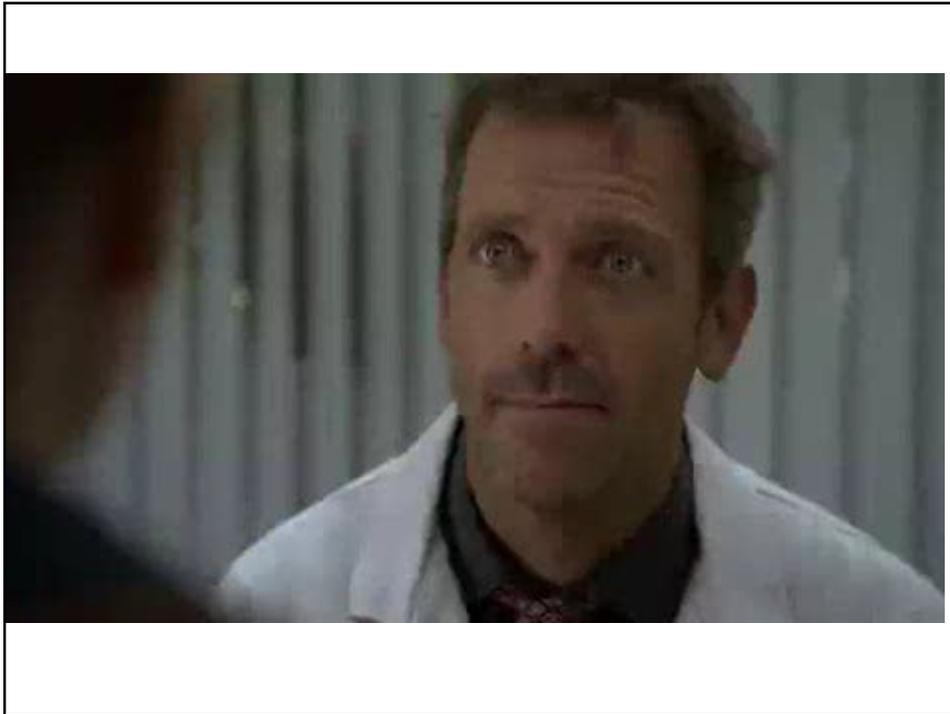
- Ask patient to demonstrate understanding
 - “What will you tell your spouse about your condition?”
 - “I want to be sure I explained everything clearly, so can you please explain it back to me so I can be sure I did.”
- Do not ask,
 - “Do you understand?”



POTENT CASE FOR TEACH-BACK

- Video clip





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STRATEGIES TO IMPROVE HEALTH LITERACY

5. Use Patient –friendly educational materials to enhance interaction
 - Focus only on key points
 - Emphasize what the patient should do
 - Minimize information about anatomy and physiology



STRATEGIES TO IMPROVE HEALTH LITERACY

- Limit use of contractions (can't) and hyphenated words (low-budget)
- Avoid use of abbreviations (lbs.) and acronyms (CDC)
- For telephone numbers, use numbers instead of letters (1-800-633-4225 rather than 1-800-medical)



STRATEGIES TO IMPROVE HEALTH LITERACY

- 10-15 words per sentence
- Not all capitals or italics
- Instead of statistics, use general words like most and many
 - A survey showed that most Americans (90%) believe the risk from vaccines is very small.



STRATEGIES TO IMPROVE HEALTH LITERACY

Formatting

- Leave white space
- Short paragraphs or sections
- Different font sizes for subtitles and headings
- Text body in both upper and lower case letters 12-14 point serif font
- Dark print/light paper



STRATEGIES TO IMPROVE HEALTH LITERACY

Illustrations

- Use pictures to draw attention, replace words and reinforce message
- Use simple images to communicate health information
- Simple drawings can work as well as photos
- Make sure the picture addresses the issue



STRATEGIES TO IMPROVE HEALTH LITERACY

Lists and Graphs

- Most people cannot read charts and graphs (especially a graph with symbol key)
- Use a bullet list, not commas
- Limit bullet list to 3-5 items



STRATEGIES TO IMPROVE HEALTH LITERACY

Readability

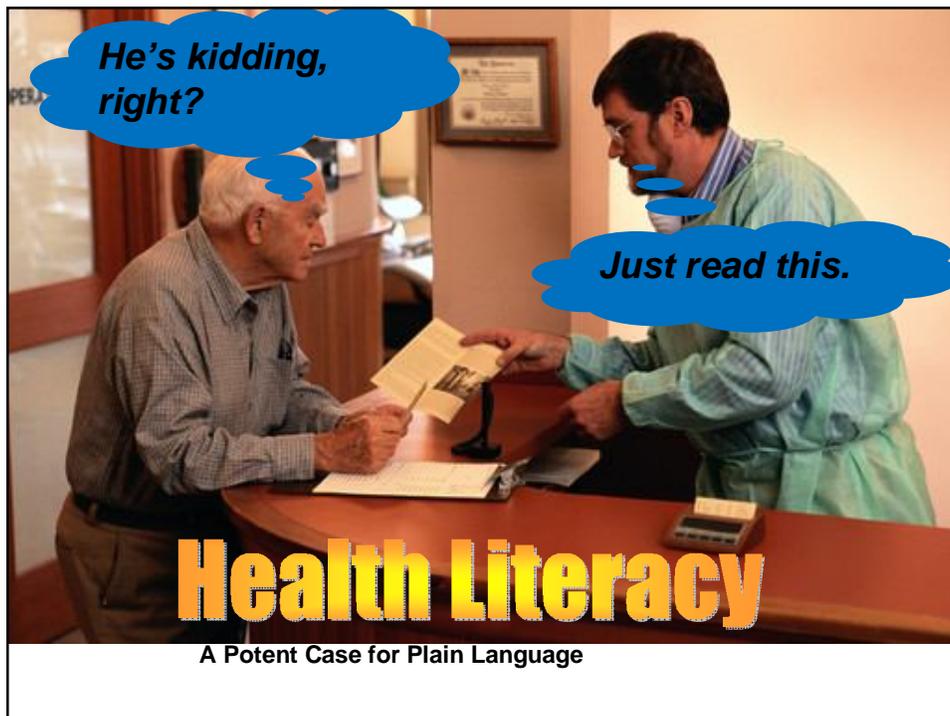
- Readability is a way to measure the grade level of a document.
- Aim for 6th grade reading level
- Reading scales do not measure
 - the complexity of concepts
 - Cultural and relevancy to your audience
 - Layout and design can also affect the readability of a document



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Health Literacy 101

Your role as a healthcare provider



SPEAK SLOWLY

Take time to understand the patient's concerns. Limit the amount of information provided at each encounter.

TEACH BACK

Use this method to make sure patients truly understand what you are teaching them. Ask, "How will you describe this to your family?" Do not ask, "Do you understand?"

ENCOURAGE QUESTIONS

Empower patients to ask questions about their health care.

PLAIN LANGUAGE

Use language that is easy to understand. All patients appreciate information that is clear and concise.

SHOW EXAMPLES

Draw or show a picture to patients to help convey a complex concept or a body part.

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National Efforts

- **Healthy People 2020** – Health Communication and health information technology
- **Joint Commission** – Advancing Effective Communication, Cultural Competence, and Patient- and Family-Centered Care: A Road Map for Hospitals
- **National Action Plan** – U.S. Department of Health and Human Services, Office of Disease Prevention and Health Promotion



National Efforts

AHRQ– Universal Precautions Toolkit

- Tools to start on the path to improvement
- Tools to improve spoken communication
- Tools to improve written communication
- Tools to improve self-management and empowerment

AHRQ, 2010



Universal Precautions

- Many patients are at risk of misunderstanding, but it is hard to identify them.
- Testing general reading levels does not ensure patient understanding in the clinical setting.
- **Everyone** benefits from clear information.

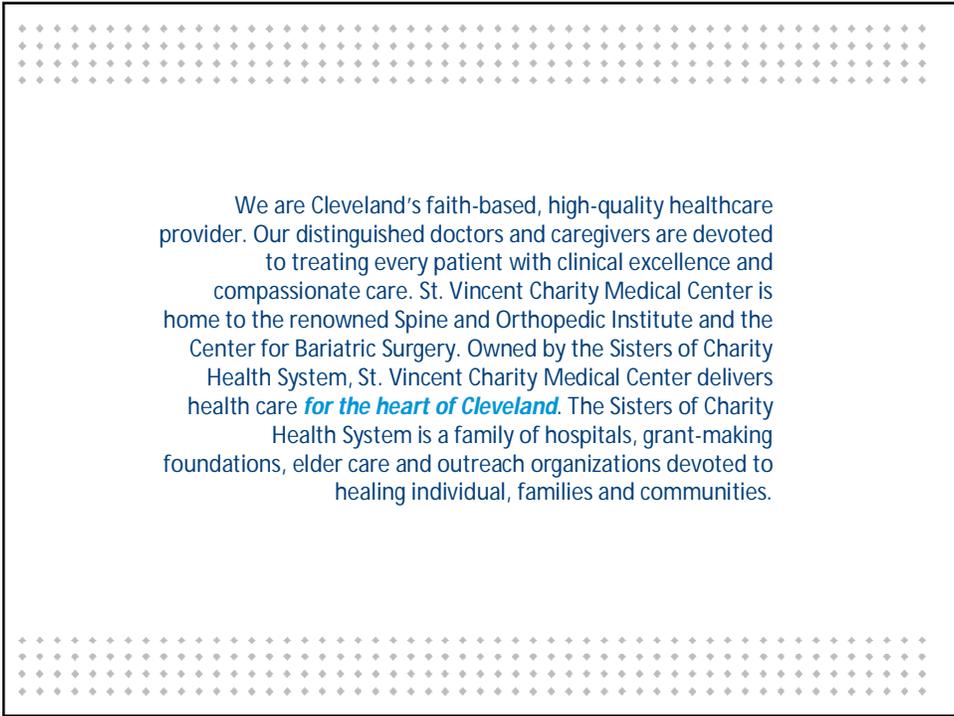


RESOURCES

- National Action Plan to Improve Health Literacy
<http://www.health.gov/communication/hlactionplan/>
- Health Literacy Universal Precautions Tool Kit
<http://www.ahrq.gov/qual/literacy/>
- The Joint Commission: Advancing Effective Communication, Cultural Competence, and Patient-and Family-Centered Care
http://www.jointcommission.org/Advancing_Effective_Communication/

THANK YOU!

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We are Cleveland's faith-based, high-quality healthcare provider. Our distinguished doctors and caregivers are devoted to treating every patient with clinical excellence and compassionate care. St. Vincent Charity Medical Center is home to the renowned Spine and Orthopedic Institute and the Center for Bariatric Surgery. Owned by the Sisters of Charity Health System, St. Vincent Charity Medical Center delivers health care **for the heart of Cleveland**. The Sisters of Charity Health System is a family of hospitals, grant-making foundations, elder care and outreach organizations devoted to healing individual, families and communities.