HEALTH LITERACY

TECHNIQUES TO SUPPORT EFFECTIVE COMMUNICATION

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The content of my material/presentation in this CME activity will include discussion of unapproved or investigational uses of products or devices as indicated:





WHO WE ARE



THE INSTITUTE FOR FAMILY HEALTH



Who We Are:

- The Institute for Family Health (IFH) is a federally-qualified community health care network serving over 90,000 patients at 27 locations through-out New York State. Many IFH patients come from low literacy communities such as East Harlem and the South Bronx
- We are accredited by the Joint Commission and recognized by the National Committee for Quality Assurance as a Level 3 patient-centered medical home, the highest recognition available

Our Services:

We offer primary care, mental health, dental care, social work and many other services to patients of all ages.

WHAT IS HEALTH LITERACY?



HEALTH LITERACY



Health Literacy:

- The Patient Protection and Affordable Care Act of 2010, Title V, defines health literacy as the degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions.
- http://www.cdc.gov/healthliteracy/Learn/index.html

WHY FOCUS ON HEALTH LITERACY?



Health Literacy:

- Affordable Care Act (put in what article)
- Accountable Care Organizations (put in what)
- Patient Centered Medical Home (Shared Decision Making)
- eHIVQual Standards (2013)

10 ATTRIBUTES OF A HEALTH LITERATE CARE ORGANIZATION



- Has leadership that makes health literacy integral to its mission, structure, and operations.
- 2. Integrates health literacy into planning, evaluation measures, patient safety, and quality improvement. It is an effort on every level of care.
- 3. Prepares the workforce to be health literate and monitors progress.
- 4. Includes populations served in the design, implementation, and evaluation of health information and services. mychart.
- 5. Meets the needs of populations with a range of health literacy skills while avoid-ing stigmatization. Universal Precautions.
- 6. Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact. Teach-Back & Shared Decision Making
- 7. Provides easy access to health information and services and navigation assistance. Our lobby design and patient centered medical homes.
- 8. Designs and distributes print, audiovisual, and social media content that is easy to understand and act on. Everything goes through communications with white space rules.
- 9. Addresses health literacy in high-risk situations, including care transitions and communications about medicines. Brown baging and utilizing navigators.
- 10. Communicates clearly what health plans cover and what individuals will have to pay for services. Affordable Care Act information.

CHALLENGES ALONG THE WAY



HEALTH LITERACY ASSESSMENTS



- We were following a mandate by the eHIVQUAL standards
- We were looking at Health Literacy as deficits in individuals. Not at what we may have been doing.
- East Harlem is home to one of IFH's largest sites, The Family Health Center of Harlem (FHCH) In East Harlem, 17% of adults 25 and older never completed 8th grade, and another 16% never graduated from high school.
- In the Bronx, where IFH has multiple sites, 30% of people over 25 years of age never earned a High School diploma.
- Making informed health care decisions requires that patients comprehend the facts about their health and the choices in terms of care that they have.
- The "Rapid Estimate of Adult Literacy in Medicine-Short Form" (REALM-SF) is a validated assessment tool that can be used by clinicians to assess an individual's reading comprehension in a medical context. The 7-item validated word recognition test measures the degree to which individuals obtain, process, and understand basic health information and services needed to make appropriate health decisions.

OUR APPROACH TO HEALTH LITERACY NOW



OUR APPROACH TO HEALTH LITERACY



Health Literacy Universal Precautions:

- Health literacy is the ability to obtain, process, and understand basic health information and services needed to make appropriate decisions. Over a third of patients have limited health literacy, which results in their not understanding what they need to do to take care of their health. Limited health literacy is associated with poor management of chronic diseases, poor ability to understand and adhere to medication regimes, increased hospitalizations, and poor health outcomes.
- Universal precautions refers to taking specific actions that minimize risk for everyone when it is unclear which patients may be affected. For example, health care workers take universal precautions when they minimize the risk of bloodborne disease by using gloves and proper disposal techniques. Health literacy universal precautions are needed because providers don't always know which patients have limited health literacy.
- http://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/index.html

HEALTH LITERACY UNIVERSAL PRECAUTIONS: THE IFH APPROACH



- Health center signage
 - Interior, exterior
- Materials promoting services
 - Brochures, posters, flyers, palm cards, etc.
 - Digital displays at practices
 - Social media and web content
- Educational materials
 - Decision aids
 - Website features
 - Brochures, posters, flyers, palm cards, etc.
- Giveaways for events

Department
Drives most of our
Health Literacy work
and all print work
here comes through
them including
many slides

HEALTH LITERACY UNIVERSAL PRECAUTIONS: THE IFH APPROACH



- Multidisciplinary
 - EHR analysts, medical providers, communications associate
- Meeting Style
 - Bi-weekly meetings where we meet
 - and can see what others are working on .
- Goals
 - To improve patient activation
 - Clear communication

The Patient Enagement.
MyChart
Group

HOW DO WE DO THIS?



The communications department uses tools, guidelines and professional services to create materials that are:

Clear

Factually accurate

Culturally sensitive

Thoughtfully formatted

Useful

Literacy
appropriate (6th
grade reading
level whenever
possible)

Professionally translated

Consistent in design to reinforce brand recognition

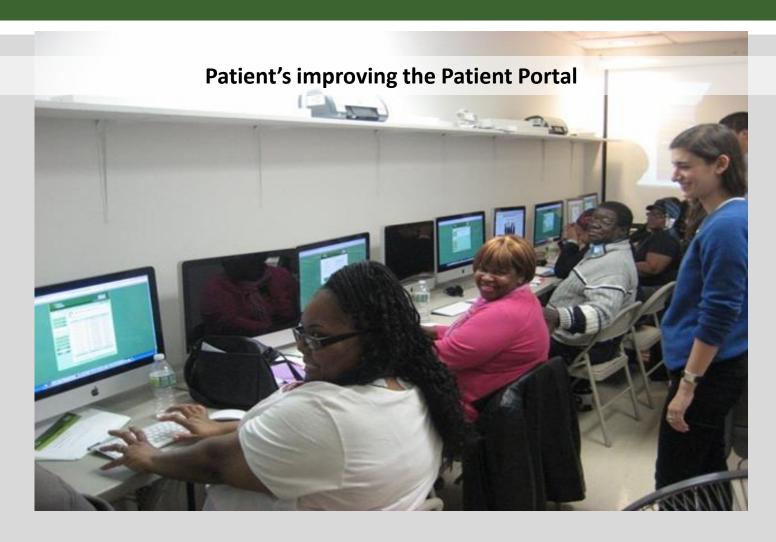
HEALTH CENTER SIGNAGE





PATIENT INPUT: THE PATIENT PORTAL





INTERNAL POLICIES



Plain Language Policy

Teach Back Policy

Plain Language and Teach **Back**



Policy: Plain Language Policy

Poncy	
Subject	Plain language policy and guidelines
Department	Planning and Development Department Planning and Development Department
Applicable to	Institute employees Planning and Development Department, Communications Office
Prepared by	Calub SVP
Approved by	3/11/14
Date	3/11/11

This policy exists to assure that all materials are written clearly and can be understood by patients at varying literacy levels. The Institute is committed to understood by patients at varying meracy revers, are managed to our improving patients' health literacy. This is a service provided by the communications office, and ALL communications materials that will be publicly displayed or distributed should be reviewed by the communications office for health literacy.

The plain language policy applies to all Institute employees that would like to produce written materials for patients. This includes forms, flyers, brochures, web content, etc.

All documents to be read by patients should be written in plain language. Materials An uncuments to be read by patients should be written in prain language, states and should be written at a 6th grade reading level whenever possible and should never be written at a 6th grade reading level whenever possible and should never the state of the property of exceed an 9th grade reading level unless clinical accuracy would be sacrificed. Please email Kate Fahy, director of development communications, at kfahy@institute2000.org, to request a plain language edit.



Policy: Plain Language Policy

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	Plain language policy and guidelines
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Departmen	amployees applications Office
Applicable to	planning and Development Department, community
Prepared by	colub SVP
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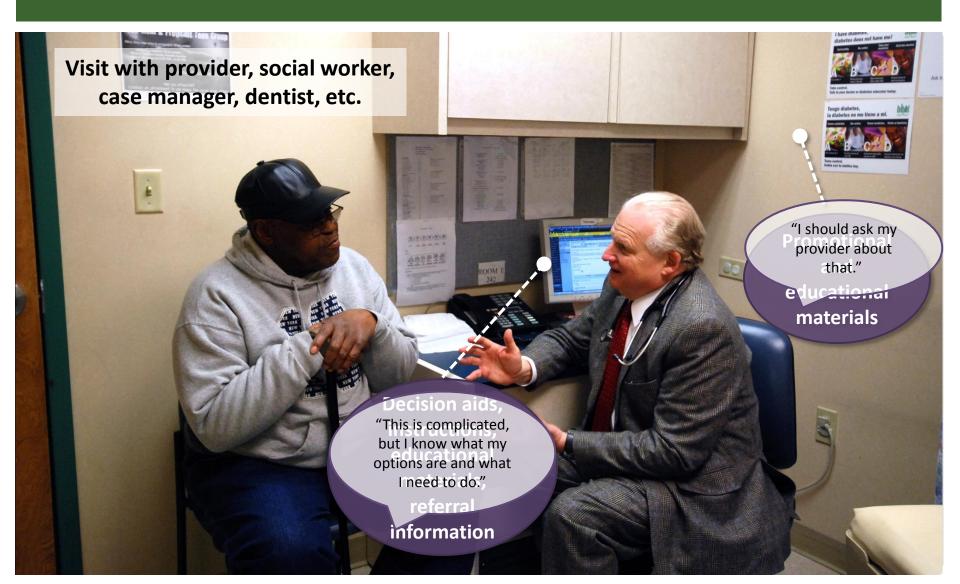
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PROVIDER VISITS





REQUEST!



As part of our designation as an Accountable Care Organization we began creating Decision Aids to be given to patients during the summer of 2014.

KEY QUESTIONS



- Who is the audience?
- What is the main message?
- What is the "ask" or the "call to action" of the material?



How will this be distributed?

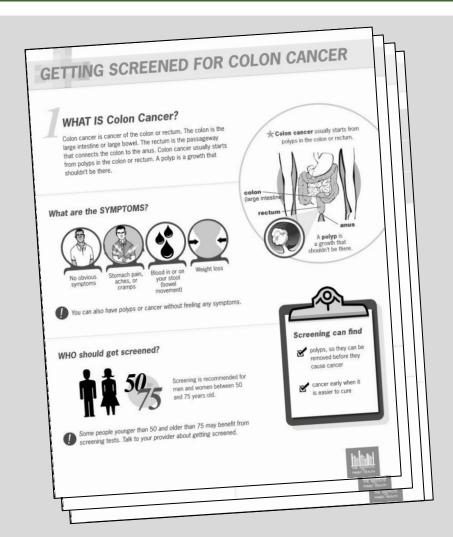
ANSWERS!



- Who is the audience?
 - Anyone eligible for a colon cancer screening.
- What is the purpose of the material?
 - To educate people about their colon cancer screening
- What is the "ask" or the "call to action" of the material?
 - What is the colon?
 - What is colon cancer?
 - Who should be screened?
 - What are your options?
- What is the best format for this information?
 - On paper
 - Driven by Electronic Medical Record

POINT-OF-CARE EDUCATION





Shared Decision Making Tool

TEAM CARE – PATIENT CENTERED MEDICAL HOME





Family Health Center of Harlem

1824 Madison Avenue (at 119th St.) New York, NY 10035 (844) 434-2778 for appointments (212) 423-4500





Mi Proveedor de Atención Primaria	
My Patient Services Representative:	
Mi Representante de Servicios al Paciente	
(212) 423-4500 x	
My Nurse:	
Mi Enfermera	

THINGS TO CONSIDER



- Everyone struggles with Health Literacy!
- It's an approach every corner of the organization must take

THANK YOU! QUESTIONS?

