The Gippsland PCPs Mini Health Literacy Self-Assessment Checklist

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Acknowledgements and Overview

Acknowledgements

This resource has been adapted from the following sources:

- Brach, C., et al., Ten Attributes of Health Literate Health Care Organizations. 2012, Institute of Medicine

- AHRQ Health Literacy Universal Precautions Toolkit, Agency for Healthcare Research and Quality.

- The Gippsland Guide to becoming a Health Literate Organisation, Gippsland Primary Care Partnerships, 2015.

- A Checklist for Health Literate Organisations, Northern NSW Local Health District and North Coast Primary Health Network, 2017.

Overview (Aim of the Checklist)

This Checklist is a condensed version of *The Gippsland Guide to Becoming a Health Literate Organisation*. This condensed version has been created specifically for smaller health services, for example bush nursing centres or services where health information is only a small part of work practice, such as disability service providers or social support services.

These organisations can use this **condensed checklist** to monitor how their organisation is tracking toward best practice health literacy standards, the *Ten Attributes of a Health Literate Organisation*. The completed checklist will highlight gaps in health literacy practice and support the development of an organisational improvement plan.

What is Health Literacy and why is it important to your organisation?

The Gippsland Guide to Becoming a Health Literate Organisation

The full Guide supports a consistent approach for health organisations across the Gippsland region in their understanding, awareness and implementation of best practice health literacy. Organisations should refer to the full Guide for additional information, tools and resources which can be used to become a health literate organisation.

The full version of the guide can be accessed from:
http://www.centralwestgippslandpcp.com/projects/becoming-a-health-literate-organisation/

The Guide includes:
- A Model Policy
- A 10 Attributes of a Health Literate Organisation and Self-Assessment Checklist
- Accreditation Standards Mapped against the 10 Attributes of a Health Literate Organisation
- Resources to support implementation.

What is Health Literacy?

Health Literacy is the degree to which a person has the capacity to obtain, communicate, process, and understand health information and services to make appropriate health decisions [1].

Health Literacy is important as it shapes peoples long-term health outcomes and the safety and quality of the care they receive [2].

More than 50% of Australians have low health literacy. This means more than half of consumers who access health organisations are unsure of the information provided to them and services available to assist them to make informed decisions about their health [2, 3].

The infrastructure, policies, processes, materials, people and relationships that make up the health system have an impact on the way in which people are able to access, understand, evaluate and apply health-related information and services [2].

Health Literacy aligns with the safety and quality standards that every health care organisation is striving to achieve.

Why is it important to be a Health Literate Organisation?

- To support consumers to manage their own health effectively:
  More than half of Australians have low health literacy. Due to its associated difficulties, low health literacy leads to poorer health outcomes [2, 3, 7, 8].

- To support safe and effective use of primary health resources:
  Evidence shows low individual and organisational health literacy can impact on the quality, safety and cost of health care delivery [9-11].

The 10 Attributes of a Health Literate Organisation

10 Attributes of a Health Literate Organisation [10]

The Institute of Medicine in the United States of America released a paper in 2012 that identified ten aspirational attributes that characterise a health literate organisation. These attributes are a list of qualities that organisations can strive to achieve to ensure services provided are easy for people to navigate, understand and use.

The Gippsland PCPs have adapted the Attributes to ensure they are relevant to the Australian and Gippsland context.

A Health Literate organisation: [10]

1. Has leadership that makes health literacy integral to its mission, structure and operations.

2. Integrates health literacy into planning, evaluation measures, service user safety and quality improvement.

3. Prepares the workforce to be health literate and monitors progress.

4. Includes consumers in the design, implementation and evaluation of health information and services.

5. Meets the needs of consumers with a range of health literacy skills while avoiding making assumptions about individual health literacy levels.

6. Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact.

7. Provides easy access to health information, services and navigation assistance.

8. Designs and distributes print, audio-visual and social media content that is easy to understand and act on.

9. Addresses health literacy in high risk situations, including care transitions and communications about treatments and medicines.

10. Communicates clearly the costs that funding schemes may cover (e.g. Medicare, private health insurance) and what individuals may have to pay for services.

Adapted from: Brach, C., et al., Ten Attributes of Health Literate Health Care Organizations. 2012, Institute of Medicine [10].

Health Literacy Self-Assessment Checklist

How to use this Checklist

This checklist uses the 10 attributes of a Health Literate Organisation as a measure to assist Organisations identify how they track against best practice health literacy standards. This includes areas of work practice where there are gaps and therefore opportunities for improvement, as well as areas that are on track and working well. The Checklist also provides examples of activities that will support your journey to becoming a more Health Literate Organisation.

Step 1. Against each question on the checklist mark whether your organisation never, sometimes, or always fulfils the question being asked.

Step 2. Where relevant check the box next to the health literacy opportunities and activities you believe your organisation could adopt and/or improve on.

Step 3. When you have completed the checklist, look over your answers and prioritise the improvement activities, i.e. those you will include in your Organisation's Quality Improvement Plan.

Attribute 1: Has leadership that makes health literacy integral to its mission, structure and operations.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
1A. Do you commit to Health Literacy in your mission statement, policies or plans?				☐ Develop/review your health literacy policy ☐ Add health literacy into your mission statement and work plans.
1B. Does leadership prioritise clear and effective communication across the entire organisation? This includes between colleagues and between health professionals and consumers.				☐ Conduct an Organisational Health Literacy assessment to assess communication at all levels of your organisation. ☐ Develop communication and language policies and procedures.
1C. Do you have trained Health Literacy Champions active in your organisation?				☐ Assign and train organisational champions who are responsible for improving health literacy in your organisation.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
				☐ Establish a health literacy working group to bring together Champions from different teams.
1D. Do you allocate resources to improve health literacy in your organisation?				☐ Allocate financial resources to support the work of the health literacy champions. ☐ Allow staff to dedicate time to implementing health literacy improvements into their work.

Other notes or improvement ideas:

Attribute 2: Integrates health literacy into planning, evaluation measures, service user safety and quality improvement.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
2A. Do you utilise your quality improvement data to create and/or review consumer information and resources?				☐ Use data from client feedback systems to update or design services and resources. ☐ Consider health literacy factors when reviewing services that are not meeting KPIs e.g. are people able to easily locate the service? Does the signage and web presence clearly explain the purpose of the service?
2B. Do you design consumer satisfaction surveys that are clear and easy to complete?				☐ Review consumer satisfaction surveys to ensure they are easy to complete? ☐ Ask for consumer feedback and interpretation of the questions before distributing to a wider group.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
2C. Do you provide assistance to consumers to complete forms or surveys?				☐ Train staff to always offer assistance to all consumers when asking them to fill out forms or surveys.
2D. Do you allow enough time in appointments, and flexible timing to ensure consumers receive and understand the information they need?				☐ Conduct a review with consumers to determine if their appointment length was satisfactory. ☐ Develop ways to identify and book longer appointments for people with complex health needs.

Other notes or improvement ideas:

Attribute 3: Prepares the workforce to be health literate and monitors progress.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
3A. Do you have a person responsible for identifying workplace health literacy needs and developing, implementing and resourcing strategies to address these needs?				☐ Appoint a Health Literacy Champion (or champions) to drive Health Literacy quality improvement activities and training within the organisation. ☐ Integrate this into the organisations training department's roles and responsibilities.
3B. Do you conduct health literacy training for all your staff members and in new staff orientation?				☐ Consider mandatory health literacy training for all staff, and built it into staff orientation. ☐ Ensure all clinical staff have attended health literacy communication training.

				☐ Include health literacy activities in staff meetings or development days. ☐ Ensure staff are trained to access and use spoken and written language assistance services and resources, interpreters and translators. ☐ Integrate the www.vicpcphealthliteracycourse.com.au/ into staff training
3C. Do you incorporate health literacy into other types of training e.g. consumer safety, cultural competence, person-centred care?				☐ Incorporate health literacy into other relevant training currently provided or offered to staff
3D. Do you support staff to attend internal and external health literacy training?				☐ Encourage, support and provide opportunity for staff to access and attend health literacy training. ☐ Encourage staff to access other regional health literacy networks.
3E. Do you include knowledge and understanding of health literacy in position descriptions?				☐ Include having a 'good understanding of health literacy' in position descriptions or selection criteria, and include relevant questions in employee interviews.
3F. Do you support staff to review their health literacy knowledge and skills?				☐ Support staff review their health literacy knowledge and skills and ask if they have any health literacy training needs. ☐ Integrate review of health literacy skills into staff supervision.

Other notes or improvement ideas:

Attribute 4: Includes consumers in the design, implementation and evaluation of health information and services.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
4A. Do you have a consumer advisory group who you consult for feedback on your service?				☐ Consider creating a consumer advisory group. ☐ Improve utilisation of your organisations consumer advisory group.
4B. Do you collaborate with members of consumer groups when designing, implementing and evaluating new programs or projects?				☐ Review how your organisation utilises consumer perspectives and input. ☐ Develop consumer participation policies and procedures.
4C. Do you collaborate with members of consumer groups when designing, implementing and evaluating new consumer health information or other materials?				☐ Enlist a group of consumers to help you develop new consumer information or update existing resources. ☐ Use a health literacy consumer feedback form to check if your current information resources are meeting consumer needs.

Other notes or improvement ideas:

Attribute 5: Meets the needs of consumers with a range of health literacy skills while avoiding making assumptions about individual health literacy levels.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
5A. Do you provide accessible information to every service user that can be understood by people of all levels of health literacy?				☐ Use health literacy principles to update or develop new consumer information.
5B. Is your physical environment welcoming and easy to navigate?				☐ Conduct a health literacy environment audit.
5C. Do you provide assistance to people who need help to find their way around?				☐ Train staff to always offer assistance to all consumers.
5D. Do you design your physical spaces to support effective communication? e.g. privacy for confidential conversations				☐ Conduct an audit of all work spaces, including waiting rooms, treatment rooms, and open plan office spaces, and assess how appropriate these areas are for confidential conversations to occur. ☐ Engage consumers in the planning and design of new buildings or spaces.
5E. Is it easy for people to look up information about your organisation?				☐ Check with consumers how they find your organisations contact information. Consider both high-tech (online) and low-tech (phone book) users. ☐ Check and update information on the National Health Services Directory so that consumers can find your service's contact details on sites such as the Better Health Channel. ☐ Undertake a First Impressions Audit to review your organisations phone system and website.

Other notes or improvement ideas:

Attribute 6: Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
6A. Do you build a culture that promotes the importance of verifying consumer understanding?				☐ Include a discussion about communication with consumers and safety in all staff meetings. ☐ Train staff in 'Teach-Back' and monitor use of this method of confirming understanding. ☐ Promote an organisation wide 'Drop the Jargon' day.
6B. Do you ensure that all staff are trained in good health literacy and communication strategies?				☐ Support your staff to undertake training and review their interpersonal communication skills on a regular basis. ☐ Include health literacy communication skills in new employee and student orientation.
6C. Do you use and provide easy to understand written information, summaries, diagrams or visual resources to reinforce spoken/verbal communication?				☐ Develop or re-design written information that is given to consumers. ☐ Ensure every consumer is provided with a summary of information about their visit that is easy to read and understand.
6D. Do you keep on hand good quality education materials in a variety of formats? e.g. audio visual, print, 3D models, photos, cartoon illustrations.				☐ Encourage staff to develop or purchase resources that will enable them to provide consumers with information in a variety of ways.
6E. Do you use multiple channels to distribute health information? e.g. face-to-face, electronic portals, website.				☐ Ensure easy-to-read information is used on your website, newsletter, social media and local newspaper.
6F. Do you ensure adequate time is given to each interaction?				☐ Conduct a review for time allocated to all consumer interaction, and make recommendations based on best practice. ☐ Encourage and support staff to allocate time to verify understanding of information and answer consumers' questions.

	Never	Sometimes	Always	
6G. Do you implement campaigns to educate and empower consumers to ask for more information, clarify information, and ask questions of their health care providers?				☐ Implement 'Ask Me Three' or 'Ask, Share, Know' campaigns.

Other notes or improvement ideas:

Attribute 7: Provides easy to access health information, services and navigation assistance.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
7A. Do your facilities have signs with consistent, east-to-understand language and symbols to help people find their way?				☐ Review cultural appropriateness of signs and symbols ☐ Consider a communication access assessment by Scope
7B. Do you provide staff to assist consumers with scheduling appointments with other service providers and completing forms and documents?				☐ Train staff to always offer assistance for making appointments and filling in forms.
7C. Do you support consumers to understand services and programs that are available to them and the benefits of their participation?				☐ Review your intake/care coordination practices to determine how much assistance consumers require to navigate your services and the options available to them.

			☐ Provide education and create opportunities for staff to learn more about what services are available for consumers. ☐ Establish service and referral links and maintain a current list that can be shared or discussed with consumers.
7D. Do you respond to navigational queries patiently and effectively without assuming map reading skills or car ownership?			☐ Include a map of your facility, car parking options, directions to your service and public transport options with appointment letters.
7E. Do you support consumers to use their My Health Record?			☐ Increase awareness and offer assistance to consumers to use My Health Record.
7F. Do you ensure consumer information exchange occurs (with consumer consent) between services/organisations in line with service coordination practices?			☐ Review processes to ensure that staff only collect essential information from consumers and eliminate the need to collect this information more than once. ☐ Provide education in service coordination principles.

Other notes or improvement ideas:

Attribute 8: Designs and distributes print, audio-visual and social media content that is easy to understand and act on.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
8A. Do you develop consumer information that is easy to understand, accessible, current, and meets the best practice health literacy requirements?				☐ Include a 'plain-English', 'drop-the-jargon', or 'developing consumer information' activity in staff meetings. ☐ Review all existing consumer information using a health literacy checklist for designing consumer-friendly health information. ☐ Ensure all written information is screened using readability tools such as Hemmingway.
8B. Do you involve consumers in the design and testing of all resources?				☐ Invite consumers to give feedback on written information.
8C. Do you audit and update consumer information based on best practice health literacy requirements?				☐ Develop a regular document review cycle for all printed and electronic health information that is available or given to consumers.
8D. Do you provide high quality consumer information in a variety of formats to meet consumer needs? e.g. printed information, web, email and SMS content, photos, videos etc.				☐ Survey consumers from variety of age groups and cultures to identify how your service can improve the way they provide and communicate information. ☐ Utilise and promote already existing sources of information such as the Better Health Channel. ☐ Expand the variety of formats that your resources are currently being provided to consumers. Would your consumers benefit from an e-newsletter, social media updates, website updates, SMS reminders?
8E. Do you provide easy access to documents that are available for reading or downloading in languages other than English?				☐ Develop and provide consumer information in languages that are common to your local community. ☐ Create a procedure for producing written information in other languages so that all materials are consistent and aligned to health literacy standards.

Other notes or improvement ideas:

Attribute 9: Addresses health literacy in high risk situations, including care transitions and communications about treatments and medicines.

	Never	Sometimes	Always	Suggested activities to improve in this area include:
9A. Do you identify high-risk communication situations and implement safeguards and processes to ensure no miscommunication in these situations? e.g. medication self-management, hospital admission and discharge.				☐ Identify with staff what is considered a high-risk communication situation and ensure safeguards are in place.
9B. Does your organisation foster a culture that values and practices meaningful informed consent? Are staff supported to verify the consumers understanding of a treatments benefits and risks, not just to gain a signature on a form?				☐ Review your informed consent documents for readability. ☐ Create a brief and clear one-page summary to go with your informed consent package. ☐ Ensure staff are discussing consent with Clients and are using the 'teach-back' method when doing so.
9C. Do you consider communication failures as service user safety issues and track or investigate to find and address the sources of error?				☐ Encourage staff to report a communication failure as a safety incident so that it can be properly investigated and corrected.
9D. Do your staff educate individuals and their caregivers and confirm understanding throughout their consult, treatment or hospital stay? e.g. end of life care decisions, pre- and post-surgery, newly diagnosed chronic or terminal illness, self-management education, person centred discharge planning.				☐ Provide services or ensure consumers have access to services that provide patient safety education, for example, pill boxes to increase understanding of how to take medicines etc. ☐ Provide advance care planning training – assisting clients to make well-informed decisions about future medical treatments (or non-treatments) and wishes.

Other notes or improvement ideas:

Attribute 10: Communicates clearly the costs that funding schemes may cover (e.g. Medicare, private health insurance) and what individuals may have to pay for services.

	Never	Sometim	Always	Suggested activities to improve in this area include:
10A. Do your staff understand what treatments are covered by a funding scheme and can provide clear, correct information about out-of-pocket expenses and private health insurance item numbers?				☐ Ensure staff have quick and easy access to accurate information regarding the costs of services and available rebates.
10B. Do you communicate out of pocket expenses to the consumer before they attend their visit, accept a procedure, or agree to service provision?				☐ Review when and how staff communicate costs of care to the consumer to ensure that this is consistent and provided well in advance of any service provision. ☐ Ensure staff are confident in their knowledge of service cost information, and can clearly explain to consumers in a way that is easy to understand and using teach-back methods to check for understanding. ☐ Provide written information about costs of services and rebates that is easy to read and understand. ☐ Review or update appointment letter templates sent to clients to ensure fee schedule is included.

Other notes or improvement ideas:

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