

Health Literacy: Writing for Understanding



HEALTH LITERACY AND THE ROLE OF HEALTH CARE PROVIDERS AND SYSTEMS

Definition is Evolving



Individual (2000)

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



Interaction-System (2010)

Is the product of the interaction between individuals' capacities and the health literacy demands and complexities of the health care system.

1. Institute of Medicine (US) Committee on Health Literacy; Nielsen-Bohlman L, Panzer AM, Kindig DA, editors. Health Literacy: A Prescription to End Confusion. Washington (DC): National Academies Press (US); 2004.
2. Parker, R., & Ratzan, S. C. (2010). Health literacy: a second decade of distinction for Americans. Journal of health communication, 15(S2), 20-33.

Health Literate Professionals

As clinicians, what we say does not matter unless our patients are able to understand the information we give them well enough to use it to make good health-care decisions.

Otherwise, we didn't reach them, and that is the same as if we didn't treat them.

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You Have a Role

- **Individuals can be health literate** by using the skills needed to find, understand, evaluate, communicate and use information
- **Health care professionals can be health literate** by presenting information in ways that improve understanding and ability of people to act on information.
- **Systems can be health literate** by providing equal, easy and shame-free access to and delivery of health care and health information.

Patient and Provider Communication



Information Exchange

- Identify needs
- Mutual Understanding
- Build self-efficacy
- Access to care

Shared Decision

- Satisfaction
- Self Management
- Commitment to Treatment
- Engagement

Build Relationship

- Respond to Emotions
- Build Trust
- Manage uncertainty
- Feeling "known and respected"
- Rapport

Barriers to Practice

- Effective communication is a learned skill
- Not prioritized by health care systems
- Jargon and medical terms are abundant
- Not modeled by senior physicians and nurses
- Not emphasized in continuing education
- Assume patients understand
- Fast-paced health care encounters



LOW HEALTH LITERACY PREVALENCE AND IMPACT

Health Literacy Skills

Read

- Understand and follow written instructions

Write

- Answer a questionnaire

Numeracy

- Calculate the amount of sodium in a serving

Speak

- Communicate symptoms

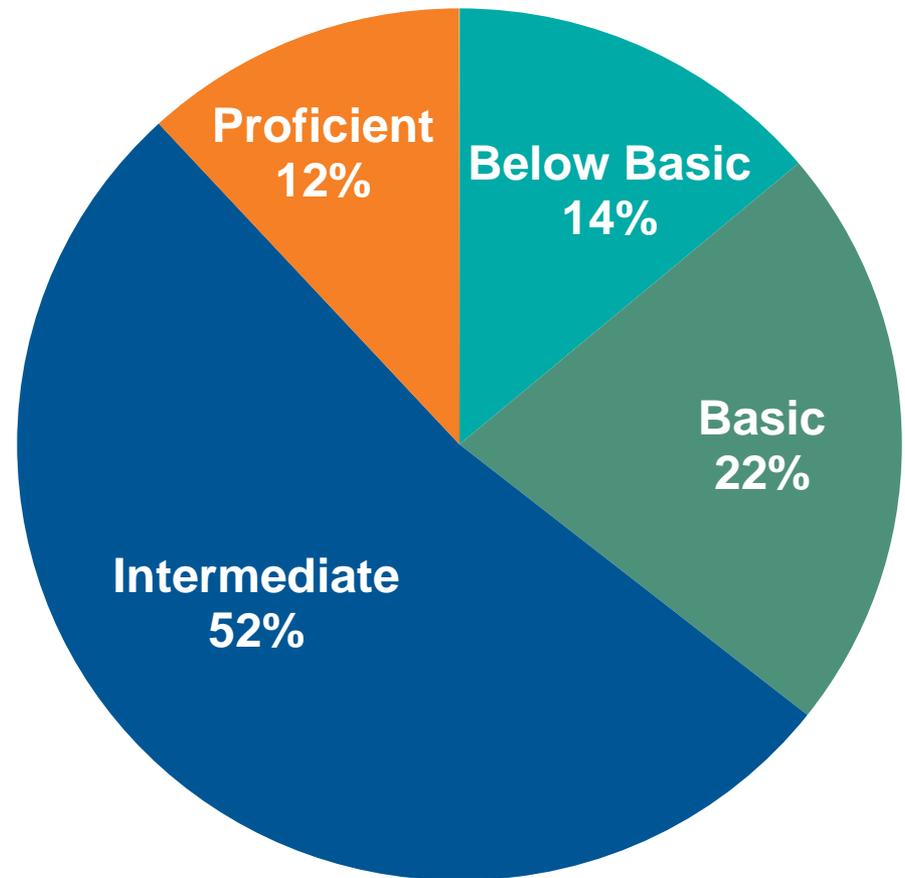
Listen

- Understand and follow verbal instructions

Prevalence

2003 National Assessment of Health Literacy

88% adults may lack the skills needed to manage all the demands of the current health care system



If you have low health literacy, you are

- Less likely know about health promoting behaviors
- Less likely to use preventative services
- More likely to have a preventable hospital visit and admission
- Less likely to know when your next medical appointment is
- More likely to have a chronic health condition
- Less likely to be able manage your chronic health condition
- More likely to misinterpret warnings on prescription labels
- Have a higher risk of mortality if you are a senior

Health Literacy is Dynamic

Anyone can face health literacy challenges when they

- Are scared or confused
- Are required to make sense of unfamiliar medical terms and jargon
- Don't know how our bodies work
- Have to interpret numbers or risk to make health care decisions
- Have complex conditions that require complicated self-care



HEALTH LITERATE WRITING FOR UNDERSTANDING



Importance of Written Information

- 40–80 % of the medical information communicated by health care practitioners in the doctor's office is completely forgotten by the time they get home
- The greater amount of information presented, the less patient recall
- Half of the information remembered is incorrect

Written Communication Matters

Discharge Instructions Support

- Understanding of DX
- Understanding of RX changes
- Self-maintenance of health
- Follow-up care and conversations with primary care provider

Patient Emails Support

- Medication Adherence
- Self-maintenance of health
- Accuracy of patients' medical information
- Patient satisfaction
- Reduction of unneeded office visits
- Reduction of missed appointments

Words to Watch For

Types	Definition	Examples	The Fix
Medical, technical jargon	Words, phrases and concepts with meaning only in a clinical context	Abdomen AVS Cardiologist Chronic	Growth Hypertension Lesion PCP ✓ Common words ✓ Explain
Concept	General terms to describe a concept without being specific	Abnormal Clear liquids Empty Stomach Fever Increased risk	Low, normal, high Twice daily Unlikely ✓ Be specific ✓ Explain ✓ Use Examples
Value Judgement	Have different meanings based on the individual's perception of the word	Excessive Heavy Negative Positive Persistent	✓ Be specific ✓ Explain ✓ Use Examples

Email Communication

	To Do	Examples
Patient Centered	<ul style="list-style-type: none">• Recognize question, concern or needs• Be friendly and empathic• Personalize	<ul style="list-style-type: none">• Sounds like you are worried about...• Sorry you're not feeling better• Thank you for your message (opening). In good health (closing)
Plain Language	<ul style="list-style-type: none">• Use common words, explain medical, concept and value words• Use short sentences & paragraphs• Paragraphs cover one topic	Bronchitis is when your airways swell and make mucus. That's what makes you cough. Your coughing and sore throat can last about 3 weeks.
Actionable and Motivating	<ul style="list-style-type: none">• What does the patient need to know and do?• Break down tasks, use bullets• Why is it important?	Bronchitis almost always gets better on its own without antibiotics. Using antibiotics when there aren't needed can be risky. To feel better: <ul style="list-style-type: none">- Get rest- Drink plenty of liquids
Connection and Next Steps	<ul style="list-style-type: none">• What should the patient do if they feel worse, better or have more questions• Close the loop	<ul style="list-style-type: none">• If you still have a fever in 2 days...• If you continue to feel better, I don't need to see you for 6 months• If you have more questions, call my office for a visit.• I'm not sure what is going on, but we can figure this out together.

Discharge Instructions (AVS)

Before

You were **admitted** with **altered mental status** that we think is due to **hepatic encephalopathy** (build up of ammonia in your body). You were **accumulating ammonia** in your body because of your **liver disease**. The only way to get rid of this is through your **bowel movements**. To prevent this from happening in the future, it is very important that you take **lactulose** at least 3 times a day (more often if needed) to have a **bowel movement** 3 to 4 times a day. We also found that you had an **urinary tract infection** so we sending you home with an **antibiotic** called **ciprofloxin** to **complete in a 7 day course**; you need to take it **twice a day** for 4 more days. It is very important that you take all of the **antibiotics** that we are prescribing to make sure the **infection** is **adequately treated**.

Flesch-Kincaid grade level: 12.0

After

You were put in the hospital because you were confused. This is because your liver is not working well. You have liver damage called "**cirrhosis**." This makes it hard for your body to get rid **ammonia**. The only way to get rid of it is by having at least 2-3 **bowel movements** every day. Take a **lactulose** medicine 3 or more times every day to make this happen. If you don't, you will get confused again.

You also have an **infection** of your bladder. We have given you an **antibiotic** called **ciprofloxin** for this. Take this every morning and every evening for 4 more days to make sure the infection is gone.

Flesch-Kincaid grade level: 5.7



Patient Emails



Patient Email

MD Response

My mom is doing pretty poorly. She has two questions for you. One: should she be taking a prescription potassium supplement? Two: Now that she has lost 70lbs and is on chemo her blood pressure is always pretty low. The new chemo meds are really making her sick ...and I hope she can get through these treatments without getting weaker. Thanks for your help.

Hi (Name), glad your mom is doing well; she's pretty strong really. Have her stop the amlodipine for blood pressure...You may want to ask the Oncologist about the potassium. Take care. (MD)

I've been diagnosed with tendinopathy in both shoulders. I now have swelling in my elbows. I fell twice last month and now have extreme pain in my hips and legs when I try to walk. I literally can't move or support my weight.

Please schedule an appointment for an evaluation (RN)



Patient Emails



Patient Email

I had a not from the Home Health Care nurse that my dad should let the nurse know if his glucose level goes below 70. Yesterday it was 68. I would like to know what your instructions would be if his glucose level goes below 70. Thank you.

MD Response

Hi (Name), I'm not worried about a glucose less than 70 if he is feeling fine. If he is having symptoms of low blood sugar then you would need to treat him.

Symptoms include

- Cold sweats
- Confusion
- Weakness
- Extreme hunger

For treatment, you need to give him sugar: orange juice, hard candy or regular soda.

If this happens more than 2 times per week, then let me know and maybe we should adjust his insulin dose.