Health Literacy and Patient Safety: A Clear Health Communication Mandate

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Effective communication is key to safe, quality care and effective *self* care.

Importance often overlooked
Nearly 1/2 of American adults lack literacy skills to understand & use health information.

Aging and ↑ diversity will increase this trend.
Understanding health literacy & using plain language = key to clear, safe communication
Linking health literacy, plain language, patient safety, and clear communication

- Literacy and health literacy: Definitions and data
- The communication gap between providers and patients
- Strategies to narrow the gap
- So, what do we do now?
Literacy: The ability to read, write, compute, understand, and use information

Literacy is: • contextual • variable • motivational
2003 National Assessment of Adult Literacy

Prose Literacy Skills of American Adults

- Below Basic: 14% (30 million)
- Basic: 29% (63 million)
- Intermediate: 44% (95 million)
- Proficient: 13% (28 million)
Adult numeracy skills are even more limited.

Quantitative Literacy Skills of American Adults

- Below Basic: 22%, 47 million
- Basic: 33%, 71 million
- Intermediate: 33%, 71 million
- Proficient: 13%, 28 million
Our most vulnerable populations typically have the most limited literacy skills.

- Elders (age 65+)
- Hispanic/Latino populations
- Immigrant groups
- The poor
- Adults with chronic physical or mental conditions
Health literacy: Using literacy & numeracy skills to accomplish health-related tasks.

Health literacy challenges:
- Media
- Formats
- Locations
- Topics
- Tasks

Health literacy includes oral skills.
For most adults, healthcare is a foreign country.

Only 12% of American adults have Proficient health literacy skills.

Elders: 2/3 have Basic or Below Basic health literacy.
from Stan Hudson, Health Literacy Missouri
The IOM 2004 report defined health literacy as a *shared* responsibility.

“We envisage a society in which people have the skills that they need to obtain, interpret, and use health information effectively, and within which a wide variety of health systems and institutions take responsibility for providing clear communication and adequate support to facilitate health-promoting actions.” (p241)
“Patient-centered communication is the linchpin of patient-centered care.” (p 31)

“65% of sentinel events have been found to have communications failures as the underlying root cause.” (p 48)
Impact on Patient Safety: Consumer Misunderstanding of Rx Labels

38% of adults with adequate literacy skills (reading at grade 9 or above) misunderstood dosage instructions for common medications.

“Take one teaspoonful by mouth three times daily.”

Despite limited adult literacy skills, most health information ➔ 10th grade level+.

Verbal information often given too quickly without checking for understanding.
Results of the gap between adult skills and system demands are serious.

Patients with limited literacy skills have:

- Inability to read and use medication instructions, appointment slips, consent forms
- ↓ Knowledge and poorer compliance with medication and self-care regimens for hypertension, diabetes, asthma, HIV/Aids, anti-coagulation therapy, weight control
- ↓ Knowledge and likelihood of getting a mammogram or pap smear
- ↓ Glycemic control and ↑ rates of retinopathy for those with diabetes
- ↑ Hospitalizations, costs, and deaths
National experts agree on 2 evidence-based strategies to improve communication

2 Evidence-Based Strategies

• Plain language for all written and verbal communication

• ‘Teach-back’ to assure understanding of patient teaching
Plain language writing integrates multiple elements to increase reading ease.

- **Content**
  - Limited, culturally sensitive

- **Organization/structure**
  - Reader-focused

- **Writing**
  - Clear, using simple terms and proven techniques

- **Design**
  - Layout and graphics support key messages
Teach back is the final step in a series of best practice patient teaching techniques.

**Teaching Strategies:**
- Create a ‘shame-free’ setting
- Slow down
- Limit points (about 3)
- Use living room words
- Invite other listeners
- Use pictures, models, diagrams, etc.
- Use teach back
Will better communication work? Evidence is growing. *Example*: Iowa Health System

Efforts spearheaded by 2 ‘champions’: Physician and Risk manager

- Used data to create awareness
- Used a system approach to change
- Created easy ways to “buy-in”
- Engaged adult new learners as partners
- Measured results
National carrots and sticks: Supports and regulations to move this agenda along

The Carrots
- ‘Hot topic’ status; increased visibility of state and national coalitions & conferences
- Internet tools
- Research dollars
- Link to high priority health issues

The Sticks
- Federal requirements
- Medicare reimbursement
- Legal liability
- CAHPS survey
- Joint Commission regs
The Challenge:
Demographic, health technology, and health delivery trends clear communication need.

Health systems and health professions curricula need to adapt to 21st century cultural and linguistic access challenges
The Opportunity:

Align health communications with core national and elder health issues:

– Reduce health disparities/provide culturally sensitive care
– Prevent and manage chronic conditions
– Improve the safety and quality of care
– Prevent hospital readmissions
– Save time and money
– Enhance consumer/provider and community relationships
– Provide opportunity for academic practice, projects, and research
“Health literacy can save lives, save money, and improve the health and well-being of millions of Americans. All of us—government, academia, health care professionals, corporations, communities, and consumers—working together can bridge the gap between what health professionals know and what patients understand, and thereby improve the health of all Americans.”