# Tools to Deliver Health-Literate Clinic Services

HEALTH LITERACY INITIATIVE AT THE KANSAS CITY CARE CLINIC

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#### Today's Discussion:

- Health Literacy: What is it and why is it important?
- Health Literacy Evidence-based Tools
  - -Teach-Back
  - -Ask me 3
  - -Plain Language
- Kansas City CARE Clinic's Health Literacy Initiative
  - -Committee Formation
  - -Mission, Vision, and Priorities
  - -Lessons Learned



# Health Literacy:

What is it and why is it important?



# Health Literacy is...

"The degree to which an individual has the ability to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions."

-Affordable Care Act, 2010



# In Plain Language...

"Health literacy is the ability to make good health decisions every day."

-Health Literacy Missouri



# **Impact**

Low health literacy has a greater impact on health than socioeconomic status (income, education, occupation).

-American Medical Association, 2007



#### Prevalence

**Nationally:** Nearly 9 out of 10 adults have difficulty understanding and utilizing everyday health information available in health care settings.

- United States Department of Health and Senior Services

Locally: The Clinic's zip code (64111) has among the lowest health literacy ratings in Missouri.

- Missouri Foundation for Health



## Health Literacy is a National Priority

- National Action Plan to Improve Health Literacy,
   U.S. Dept. of Health & Human Services, 2010
- Affordable Care Act, 2010
- Plain Writing Act, 2010
- CDC, HHS, and CMS priority

Note: Additional Resources on Resource List.



# Research Support

- Berkman, et al. Low Health Literacy and Health Outcomes:
   An Updated Systematic Review (2011)
  - Low health literacy is associated with poorer health outcomes and poorer use of health care services.
- Andrus, et al. Health Literacy: A Review (2002)
  - Low Health Literacy is associated with poorer health status, lower use of preventive medical services, poorer self-reported health, poorer medication adherence rates, increased hospitalizations, and increased health care costs.



# **Implications**

https://www.youtube.com/watch?

v=BgTuD7l7LG8



#### Universal Precautions

Low-income and uninsured patients are more likely to have 'below basic' health literacy skills.

-USDHSS

Universal Precautions: Taking specific actions to minimize risk for everyone when we're not sure who's affected.



# Health Literacy Tools

How we improve health literacy



#### Ensuring Clear Verbal Communication

#### Teach-Back: A tool for providers

 A way to make sure you, the provider, explained information clearly.





# 10 Core Competencies for Using Teach-Back\*

#### Non-Verbals

- Use a caring tone of voice
- Display comfortable body language and make eye contact.

\*Adapted from "Always Use Teach-Back"



# 10 Core Competencies for Using Teach-Back\*

#### Framing Questions & Language

- Use plain language
- Ask the patient to explain back, using their own words
- Use non-shaming, open-ended questions
- Avoid asking questions that can be answered with a simple yes or no



## 10 Core Competencies for Using Teach-Back\*

#### **Approach**

- Emphasize that the responsibility to explain clearly is on you, the provider.
- If the patient is not able to teach back correctly, explain again and re-check.
- Use reader-friendly print materials to support learning.
- Document use of and patient response to teach-back.

\*Adapted from "Always Use Teach-Back"



#### Ensuring Clear Verbal Communication

Ask-me-3\*: A tool for patients

\*Registered trademark of the National Patient Safety Foundation

- I) What is my main problem?
- 2) What do I need to do?
- 3) Why is it important for me to do this?



### Ensuring Clear Written Communication

#### **Plain Language**

Plain language is communication your audience can understand the first time they read it or hear it.

Written material is in plain language if your audience can:

- •Find what they need;
- Understand what they find; and
- •Use what they find to meet their needs.



### Ensuring Clear Written Communication

KC CARE's Plain Language Checklist is organized around three core concepts:

- I) Clarity—Do I understand what this document is for?
- 2) Navigation—Is it easy to make my way through this document?
- 3) Language—Can I understand it the first time I read it?

**Note:** Sharing copies of checklist



# Health Literacy at KC CARE

The Clinic's Initiative & Notes on Approach



#### Brief Overview of KC CARE

 Just as it was formed to do in 1971, the Kansas City CARE Clinic exists to promote health and wellness by providing quality care, access, research and education to the underserved and all people in our community. Today the clinic provides health care services in general medicine, HIV prevention and primary care, behavioral health, and dentistry to approximately 10,000 people per year. We accomplish this with a staff of 110, plus an army of over 900 volunteers.

• One of the largest charitable health clinics in the country, we are located here in the heart of Kansas City at 3515 Broadway.

# Health Literacy Committee

- As we were doing work with our patients, we identified low health literacy as a pervasive problem.
- We then recognized that as an organization, we had a lot of room to improve to deliver health literate services, but we had no money to pay a consultant to help us improve.
- A student completed a HL assessment of the agency.
   It got the attention of senior leadership and we created a committee to address this issue.



#### Committee Structure

- Broad Committee comprised of a cross section of staff from most departments and service areas.
  - Includes a volunteer.
  - Meets monthly
- Sub-committees
  - Plain Language Review Committee meets twice monthly
  - Staff Training Committee



#### Committee Mission & Vision

**Mission:** To ensure every client accessing the Kansas City CARE Clinic has the ability to obtain, communicate, process, and understand basic health information and services in order to make appropriate health decisions.

#### **Initial Priorities:**

- Initial and ongoing Clinic-wide assessment of how we're doing with health literacy. In other words, how 'health literate' is the Kansas City CARE Clinic?
- Ongoing staff and volunteer training around topics including "Ask Me Three", "Teach Back", etc.
- Establishing a plain-language review board, comprised of trained Clinic staff and volunteers, for Clinic materials/forms in both English and Spanish

# Ongoing Committee Priorities & Recent Activities

- Work plan development
- Staff training
- Plain Language Review

- Created a Clinic-Wide Health literacy month for September – four key messages
  - Speakers and trainings
  - Tools for staff to employ
  - Awards for "leaders"



#### Lessons Learned

- Routinely update Clinic leadership on Committee Progress
- Plain language process is time consuming
- Ensure vocal and active buy-in from providers
- Consider Committee's relation/collaboration with other Clinic priorities



# Questions?

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#### Works Cited

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