AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

Report on the National Workshop on Health Literacy

24th November 2014

Charles Perkins Centre, University of Sydney

Background

In August 2014, the Australian Commission on Safety and Quality in Health Care (the Commission) released the background paper *Health literacy: Taking action for safety and quality* and with Health Ministers endorsement the *National Statement on Health Literacy.*

In these documents, the Commission proposes a national approach to health literacy based on:

- embedding health literacy into systems, organisational policies and practices,
- ensuring that health information is clear, focused and useable, and that interpersonal communication is effective, and
- integrating health literacy into education for consumers and healthcare providers.

To take the next step in addressing health literacy in a coordinated way, the Commission, Clinical Excellence Commission of NSW and the University of Sydney hosted a workshop to identify priority areas for action.

A range of invited stakeholders including consumers, health professionals, policy makers and researchers participated in the workshop. A list of participants can be found at Appendix A.

Structure of the day

The aim of the day was to identify strategies and issues that should be a national priority for action on improving health literacy.

The day commenced with a brief introduction from Professor Debora Picone and background on the Commission's work on consumer partnerships and health literacy by Dr Nicola Dunbar.

Following this there were four short presentations. To demonstrate the different types of actions to address health literacy in Australia, presentations were given by Mr Michael Cousins (Health Consumers Alliance of South Australia), Ms Diane Webb (Department of Health and Human Services Tasmania), Dr Imogen Mitchell (Canberra Hospital) and Associate Professor Kirsten McCaffrey (University of Sydney).

Next, Dr Karen Luxford (Clinical Excellence Commission NSW), Ms Vicki Biro and Ms Fiorina Mastroianni (Illawarra-Shoalhaven Local Health District) presented a more detailed case study about how their two organisations have worked together to address health literacy at a state and local level.

These presentations are available on the Commissions website: www.safetyandguality.gov.au/our-work/patient-and-consumer-centred-care/health-literacy

The remainder of the workshop comprised two sessions of group work; one session involved the identification of priority areas for action and the second session involved the in depth analysis and discussion of one to two of the priority areas for action. The Agenda for the workshop is at Appendix B.

Group work sessions

Details of the two group work sessions are provided in this section.

Session 1 Identification of priority areas for action

In this session, participants were placed in groups with people who had similar roles.

Groups were asked to discuss the question: What are the key health literacy issues for you, your patients and/or your organisation? Participants then used their views on this question to determine what would be the highest priority for action for them.

Each group recorded a list of their priority issues. All participants were asked to vote on what they thought were the top three highest priority issues across all of the small groups.

The following high priority areas were identified through this process:

- addressing the gap between policy and practice
- supporting and empowering consumers
- changing culture
- health literacy and cultural competence
- having systems and support to engage consumers
- building health literacy into systems
- accountability
- developing and implementing a health information standard
- supporting staff to address health literacy through the provision of training and resources.

This priority list was used as a basis for the next session activity.

Session 2 Identification solutions to priority areas

In this session, participants were placed in mixed groups with people who had different roles.

Groups were asked to choose one to two of the areas identified in the previous session and discuss aspects of the issue with the aim of clarifying the issue and determining options for potential solutions.

Groups were asked to consider the following questions within their discussions:

- Is there a known intervention for this issue?
- If yes, what is it and what is needed to implement this? Why isn't it implemented now?
- If not, is there something that could be done? What and how?
- Who is responsible for taking action?

The next session is a summary of the issues discussed and solutions proposed.

Overview of the suggested solutions

Of the priority nine areas identified in the first small group work session, participants during the second small group session focused on five main topics:

- building health literacy into systems
- developing and implementing a health information standard
- supporting and empowering consumers
- addressing the gap between policy and practice
- supporting staff to address health literacy through the provision of training and resources.

Building health literacy into systems

This area generated considerable discussion about the interaction of health literacy and the systems needed to support it. Strategies identified involved government, health care organisations, the education sector and clinicians. There was strong support for integrating strategies to address health literacy into usual business and promoting the use of health literacy ambassadors within health care organisations.

Participants acknowledged that building health literacy into systems is a fundamental requirement and for traction to occur it must be seen as essential to how people provide services.

Suggested strategies:

- strengthen health literacy by including in the National Safety and Quality Health Service Standards
- integrate health literacy into organisational key performance indicators, service agreements and performance frameworks
- support organisational self-assessment tools similar to Enliven Victoria's *Enliven Organisational Health Literacy Self-Assessment Resource*
- establish health literacy ambassadors at all levels
- ensure that core principles of designing systems to improve health literacy match community needs
- consider barriers to health literacy in the design of buildings of health services
- build health literacy into the education of clinicians
- develop a single Australian plain English guide to assist organisations in developing their consumer resources
- facilitate more collaboration across all sectors employment, education, housing and health
- ensure that health literacy principles are applied everywhere that health information is provided – such as welfare, social services, legal, education, licensing agencies, Aboriginal agencies, libraries, TAFEs, refugee health, English as a second language and family centres.

Developing and implementing a health information standard

Participants were concerned about the inconsistency in the health information available and the quality of communication resources available for both clinicians and consumers. Strategies discussed focused on development of a national standard on good quality health

information as well as, ways of measuring, monitoring and regulating it. The development of a framework for best practice in health information was also suggested which would include resources for both clinicians and consumers.

Suggested strategies:

- development of a framework for best practice in health communication to support clinicians and consumers
- advance research about consumer expectations and what consumers want from health information
- reach agreement at a national level about what is good quality health information (example is the international standard for decision aids DISCERN – UK).

Supporting and empowering consumers

There was consensus amongst participants that the issue of empowering or supporting consumers to make decisions about their health care was central to any action on improving health literacy. Strategies discussed included the development of tools and resources to facilitate good quality communication between the patient and the practitioner, improved medication labelling and establishing a place for consumers to access good quality health information.

Suggested strategies:

- development of systems and supports to empower consumers at point of interaction with the health system so that they can be supported to be part of the process of care, ask questions, make choices and speak up when they don't understand
- facilitating the use of e-health and health websites
- have a nationally agreed resource for health literacy tools and resources, such as the Commission
- recommend that clinicians encourage consumers to use tools such as Ask me 3
- support the involvement of patients in bedside handover
- have whiteboards in patient's rooms that say
 - o your doctor is...
 - \circ your room is...
 - o important things for the day...
 - space for family questions.

Addressing the gap between policy and practice

There was a consensus amongst participants that to improve health literacy, action is required to address the gap between policy and practice. Strategies suggested include development of various tools to support clinicians and consumers. Participants also acknowledged that whilst there are tools that exist to begin action, there are limitations to their scope and issues such as a lack of support, funding and authority to act often impose barriers.

Suggested strategies:

 promote the use available tools and resources to improve knowledge of health literacy amongst critical health staff so that they are empowered to take action

- recommend the level of basic skills (technical support, communication) required of clinicians
- have prompt sheets available for consumers
- build a culture of supporting health literacy with health services.

Supporting staff to address health literacy through the provision of training and resources

In this area, participants identified inter-linked themes with the priority of addressing the gap between policy and practice. As a starting point, participants highlighted the need to promote greater awareness of health literacy amongst clinicians and health care services.

Participants also discussed the use of various tools for training staff using a universal precautions approach and toolkits that supported health care services to remove literacy-related barriers from organisational systems and resources. The key stakeholders involved in developing action in this area are the leadership group from health care organisations who can encourage a culture that supports improving health literacy.

Suggested strategies:

- universal precautions approach to staff training and development (AHRQ universal precautions toolkit is an example)
- provide tools to support clinicians on how to offer information and anticipate questions
- recommend tools to encourage reflective practice. These help clinicians with health literacy and communication. Examples of tools: video tutorials, case studies, quality assurance package for managers and patient stories
 - link the use of tools to obtaining professional development points, accreditation and standards
- organise workshops for clinicians to raise awareness of health literacy and give practical tips about how to build partnerships with patients.

What will the Commission do next?

The workshop has provided an opportunity for consumers, policy makers, researchers and health professionals to identify priorities and potential strategies for taking action to address health literacy. The Commission will now consider how these can support the implementation of the *National Statement on Health Literacy*.

There are a range of organisations that have a role in addressing health literacy in Australia. The information gathered from the workshop will inform the development of the Commission's implementation strategy for the *National Statement on Health Literacy*. This strategy will look at the priority areas identified and outline the Commission's role in each of these areas including how it can leverage change. In addition, the Commission will work with other relevant bodies to promote the strategies identified in the workshop and support a coordinated and systematic approach to health literacy in Australia.

Appendix A: List of Participants

Name	Organisation
Ms Wendy Ah Chin	Department of Health Northern Territory
Ms Anne Axam	Clinical Excellence Commission
Ms Lauren Bais	ISIS Primary Care
Ms Mary Bent	Tasmanian Medicare Local
Ms Janice Biggs	Healthdirect Australia
Ms Vicki Biro	Illawarra Shoalhaven Local Health District
Mr Anthony Brown	Health Consumers NSW
Ms Denise Chapman	Epilepsy Australia
Ms Brigid Clarke	Department of Health (VIC)
Mr Michael Cousins	Health Consumers Alliance of SA Inc.
Ms Darlene Cox	Health Care Consumers Association (ACT)
Ms Lilly Crino	Australian Commission on Safety and Quality in Health Care
Ms Maree Cuddihy	Kyneton Hospital
Ms Tere Dawson	Health Issues Centre VIC
Dr Nicola Dunbar	Australian Commission on Safety and Quality in Health Care
Ms Sandy Edwards	SA Health and Community Services Complaints Commissioner
Ms Elizabeth Harnett	St Vincents Hospital
Ms Jennifer Hill	Australian Commission on Safety and Quality in Health Care
Dr Sophie Hill	La Trobe University
Dr Safeera Hussainy	Monash University
Ms Maureen Johnson	The Royal Women's Hospital
Dr Zsuzsoka Kecskes	Centenary Hospital for Women and Children
Mrs Robyn Ludowici	Australian Commission on Safety and Quality in Health Care
Dr Karen Luxford	Clinical Excellence Commission
Ms Samantha Marnell	Barwon Health
Ms Fiorina Mastroianni	Illawarra Shoalhaven Local Health District
A/Prof Kirsten McCaffery	University of Sydney
Ms Shannon McKinn	University of Sydney
Ms Jaklina Michael	Royal District Nursing Service
Dr Imogen Mitchell	Canberra Hospital
Ms Michal Morris	Centre for Culture Ethnicity and Health
Dr Judy Mullan	Illawarra Health and Medical Research Institute
Ms Clare Mullen	Department of Health Western Australia

Prof Richard Osborne	Deakin University
Ms Hanna Pak	Cancer Australia
Ms Sally Percy	Royal District Nursing Service
Prof Debora Picone	Australian Commission on Safety and Quality in Health Care
Ms Naomi Poole	Australian Commission on Safety and Quality in Health Care
Mr Fraser Powrie	Cancer Australia
Ms Liz Robertson	Queensland Health
Ms Vannary Sar	Australian Commission on Safety and Quality in Health Care
Ms Vanessa Simpson	NPS MedicineWise
Dr Sian Smith	University of NSW
Mr Adam Stankevicius	Consumer Health Forum
Ms Michele Sutherland	Department of Health SA
Ms Diane Webb	Department of Health and Human Services Tasmania

Appendix B : Workshop Agenda

9:00 - 9:30	Registration and coffee
9:30 – 9:50	WELCOME & INTRODUCTION
9:50 – 10:00	SETTING THE SCENE
10:00 - 10:40	WHO HAS A ROLE IN ADDRESSING HEALTH LITERACY?
	Presentations by:
	Mr Michael Cousins – Consumer representative perspective
	Ms Diane Webb – State government policy perspective
	Dr Imogen Mitchell – Clinician/educator perspective
	A/Prof Kirsten McCaffery – Research perspective
10:40 - 11:00	Morning tea
11:00 – 11:30	TAKING ACTION TOGETHER
	Presentations by Dr Karen Luxford, Ms Vicki Biro and Ms Fiorina Mastroianni
11:30 – 12:15	IDENTIFICATION OF PRIORITY AREAS
	Small group work
12:15 – 1:15	Lunch
1:15 – 2:30	IDENTIFICATION OF SOLUTIONS
	Small group work
2:30 - 2:45	Afternoon tea
2:45 – 3:45	PRESENTATIONS ON FINDINGS FROM GROUPS
3:45 – 4:00	SUMMARY AND CLOSE