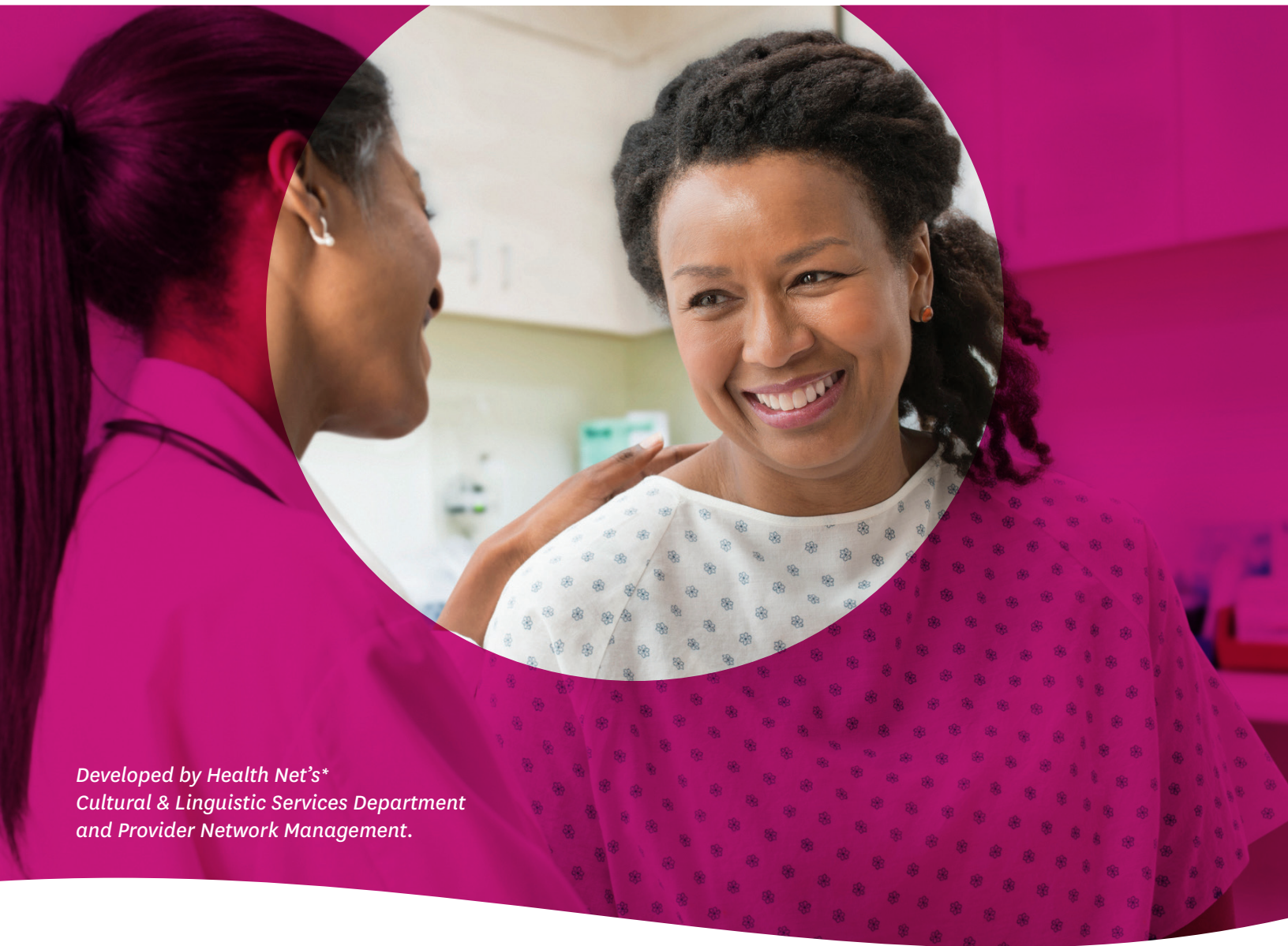


Improve Patient-Provider Communication

A HEALTH LITERACY RESOURCE GUIDE FOR PROVIDERS



Developed by Health Net's
Cultural & Linguistic Services Department
and Provider Network Management.*

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Purpose of this guide

This guide can help support medical staff to communicate with patients in a way that makes written and oral information easier to understand.

How to use this guide

1. Review this guide in detail with your staff.
2. Use plain language strategies with your patients.
3. Encourage team accountability.



1 What Is Health Literacy?

Health literacy is defined by *Healthy People 2030* as follows:

- **Personal health literacy:** The degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.
- **Organizational health literacy:** The degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

For more information on Healthy People 2030, visit www.health.gov/healthypeople.

Why is health literacy important?

Only 12% of adults in the United States have good health literacy skills. One in three U.S. adults have basic or below basic health literacy skills. Limited health literacy (LHL) affects everyone, from all race and ethnic groups, as well as high school and college graduates. Those with LHL often experience difficulty with common health tasks, such as following directions on a prescription drug label or reading childhood immunization schedules.

Studies show that individuals with LHL will:

- Have poor health status.
- Be less likely to use preventive services.
- Incur higher rates of hospitalization and use of emergency services.

Limited health literacy is not the same as low literacy

- Your patient may be well educated and still have low health literacy.
- Low health literacy is the result of limited or incomplete understanding of specialized health care concepts and vocabulary used to access health care services.

Who is at risk for having LHL?

- Older adults.
- Racial and ethnic minorities.
- People with less than a high school degree or GED certificate.
- People with low-income levels.
- Non-native English speakers.
- People with compromised health status.

Know your patients

Up to 80% of patients forget what their doctor tells them as soon as they leave the doctor's office.

Nearly 50% of what patients do remember is recalled incorrectly.

Patients may not ask questions because they are ashamed to admit they don't understand or cannot match the provider's vocabulary.

2 Plain Language Communication Strategies

These communication strategies can help you communicate in a clear and simple way. Clear and simple communication helps your patients understand the information you provide.

Verbal and non-verbal communication

Look for verbal and non-verbal communication cues about the patient's health literacy.

Examples:

- **Saying “yes” or nodding instead of a verbal answer.**
- **Consistently avoids reading or filling out forms in the office with responses, such as “I forgot my glasses” or “I’ll take this home for my family to read.”**
- **Recognizes medications by color and shape instead of common use name.**

Mirror the patient's body language, position and eye contact.

Examples:

- **Sitting face-to-face, making eye contact throughout the conversation, and having open arm postures can communicate to the patient that you are interested and empathetic.**
- **Focusing on the computer screen or writing medical notes while talking to the patient may show disinterest or that you are distracted.**

Skip clinical jargon when possible.

When appropriate, use plain language terms instead of medical or clinical jargon. When you need to use clinical terms, explain them using plain language as much as possible.



Say this:	Not that:
<ul style="list-style-type: none">• Medicine for pain.• Bruise.• Birth control.• The medicine might give you diarrhea (the runs).	<ul style="list-style-type: none">• Analgesic.• Contusion.• Contraceptive.• You may experience bowel disturbances while taking this antibiotic.



Use empathy, listen and ask permission.

Using empathy with listening to and asking permission from the patient are part of motivational interviewing techniques. Motivational interviewing is a technique in which you become a helper in the change process and express acceptance of your patient. It is a way to interact and communicate, that can help resolve doubt and resistance.

Some patients do not want to speak up. It helps to provide them an opportunity to say something.

Give your patients a chance to express how they feel and to tell the story of their illness.

Examples:

- **You seem upset that it is taking so long to get better.
Would you like to talk about it?**
- **You look worried.
Is there something else you wanted to talk about today?**

Explain procedures and ask permission during examinations.

Example:

- **The dizziness you've been feeling may mean you have an ear infection. I'd like to take a look in your ear to see if I'm right. Is that okay?**



Use alternative forms of communication, such as video and audio media.

In busy health care settings, a great deal of information is delivered verbally. Providers can use alternative forms of communication to reinforce learning and confirm the patient's understanding.

Alternative communication, such as audible content and videos, can be highly effective – even for patients who have the skills and ability to read. According to Health Literacy Universal Precautions, videos are an effective way to demonstrate self-care activities, such as injecting insulin, using an inhaler or exercising.

Examples of alternative communication:

- **Patient education videos.**
- **Screen readers.**
- **Graphics or pictures.**



Use written information to support verbal communication.

Example:

Here's a brochure that will help you remember the things we talked about today. I will underline or highlight the most important parts in the brochure.

Use pictures, posters, models or physical demonstrations.

The following visuals can be very effective tools to help support verbal communication with patients:

- Show or draw simple pictures.
- Use posters, models or physical demonstrations.

Create shame-free acceptance of the patient's communication style.



- Because communication styles are unique, the best approach is to be open and supportive of your patient's communication style. This may include speech volume, speed, vocabulary and literacy level of the patient. Use as much plain language as possible to give your patient a sense of comfort while still maintaining your role as the medical authority.
- Have policies in place to provide shame free assistance to patients that need support to fill out forms or answer patient intake questions.

Speak slowly and try not to raise your voice.

- Be comfortable with moments of silence while patients may be processing information.
- It may take elderly or limited English proficient patients a little longer to process information or to answer questions. Or, it just may be that their cultural norm is slower paced communication.
- Please be patient if they are taking a little longer to respond. If patients aren't allowed enough time, some may perceive it as a sign of disrespect.
- Focus on clear enunciation of words so that patients have an easier time understanding you. Many words sound similar.
- Repeat important information, if needed.

Examples:

- **What questions can I answer?**
- **Which part would you like me to explain?**

Speak in chunks.

If you are giving information that requires steps or sequence, it is helpful to speak in chunks and give information in steps. This will help patients retain and better understand information.

Example:

I am going to tell you the four steps you need to follow when you take care of your son's burn.

- 1. Take off the old bandage.**
- 2. Clean the burn.**
- 3. Put on the antibiotic cream.**
- 4. Put on a new bandage.**



3 Teach-Back

What is teach-back?

Teach-back is a research-based health literacy intervention that promotes adherence to medications, any type of doctors' orders or recommendations, quality of care, and patient safety.



- It is a way to make sure the patient understood what you told them; and reteach or explain, if necessary.
- It is NOT a test. It is a way to let you know how well you've explained a concept.
- It needs to be completed in a non-shaming way.
- It is important that the patient understands you are asking to make sure you explained everything correctly.



How do I use teach-back?

Ask patients to demonstrate understanding.

- “What will you tell your spouse about your condition?”
- “I want to be sure I explained everything clearly, so can you please explain it back to me so I can be sure I did.”
- “Show me what you would do.”

Chunk and check.

- Summarize and check for understanding throughout the discussion.
- Don't wait until the end.
- Use open-ended questions to confirm understanding.
- Do not ask, “Do you understand?”

Sample teach-back questions.

- “What will you tell your husband/wife about the changes we made to your medications today?”
- “We've gone over a lot of information. Let's review the information and I can answer any questions you may have.”
- “I want to make sure that I have answered all of your questions; what questions do you think that your family members may ask of you about your doctor's visit?”
- “Let's practice checking your blood sugar. Can you show me how you will check your blood sugar levels?”



Tips for using teach-back.

- Ask open-ended questions. Avoid questions that can be answered with a simple yes or no.
- Emphasize that the responsibility to explain clearly is on you, the provider.
- Use reader-friendly print materials or videos.
- Document the patient's response and use of teach-back.

Three important questions about your health.

Health care and health insurance can be hard for patients to understand. Many people find health information and the health care system complex. Encourage your patients to ask questions and be an active member of their health care team.

Patients can use these three important questions to ask providers to be sure they understand their health care:

- 1 What is my main problem? This question refers to the patient's diagnosis.**
- 2 What do I need to do? Explain their treatment plan and any actions the patient needs to take.**
- 3 Why is it important for me to do this? Explain why it is important for them to continue the treatment plan and stay healthy.**

Encourage patients to bring a notebook to medical appointments and write down the answers to questions.

Here are examples of ways patients can use a notebook:

- Write down the treatment plan.
- Write down the questions, instructions and test results.
- Patients can also ask the provider to write important information in their notebook.



4 Culture Communication and Health Literacy

There is a strong relationship between a patient's culture, how they communicate about health and health literacy.

Culture affects how patients do the following:



- 1. Select their providers and take their medication.** Some cultures have a range of healing practices and treatment options that they select from. Encourage your patients to let you know all of the healing practices and treatments that they may be using. Check botanical or home-based treatments for contraindications to prescribed medications.
- 2. Talk with their providers.** Each culture has its own way of expressing health-related information. For example, depression may be expressed as lethargy, or pain may be expressed as a burning sensation. Refer to the Three Important Questions about Your Health to help you understand your patients' needs.
- 3. Involve their families.** The family plays an important role in many cultures. Ask your patient if involving family members would be helpful.
- 4. Make food choices.** Foods that are commonly eaten by certain cultures may need to be restricted due to patients' conditions. Provide low health literacy resources, such as videos or print materials that explain how to modify intake of these foods.
- 5. Advocate for their health.** Some cultures feel that speaking up is disrespectful to the doctor. Frequently encourage your patients to speak up and ask you questions.





Access for people with disabilities

Health Net* requires participating providers to maintain reasonable accommodations for members with disabilities, including seniors and persons with disabilities (SPD), in accordance with the Americans with Disabilities Act (ADA) of 1990. Access generally includes assistance moving from a wheelchair to an exam table, ramps, elevators, restroom equipment, designated parking spaces and drinking fountain design.

Reasonable accommodations ensure that:

- Individuals with disabilities can participate in services and programs.
- Facilities are accessible to people with disabilities.
- Services are provided in the most integrated setting appropriate for a person's needs.

Examples of reasonable accommodations can include, but are not limited to:

- Flexible scheduling.
- Modification of policies.
- Interpreter or translation services.
- Accessible methods of communication.
- Safe and appropriate physical access.
- Wheelchair-accessible weight scales, bathrooms and exam rooms – and, if requested or needed, any assistance for individuals to safely transfer out of a wheelchair and onto an exam table.

