

### Health Literacy & Communication Skills

Jami van Haaften, Librarian September 2013

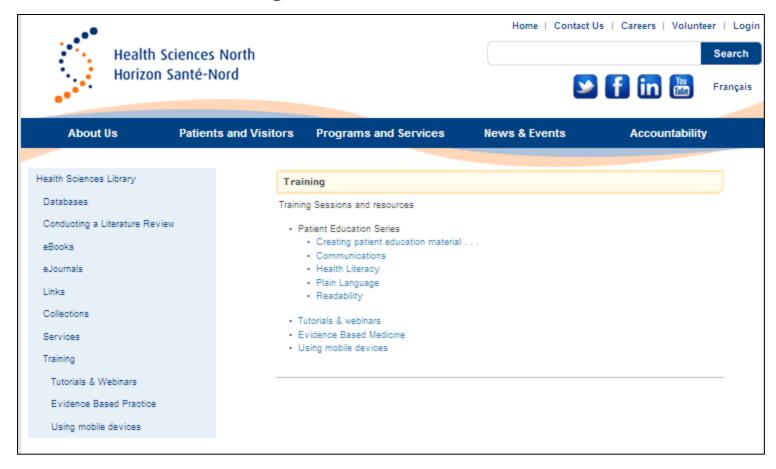
#### **Health Literacy & Communication Skills**

At the end of this session, the Learner will be able to:

- Describe how Health Literacy impacts our health status
- Recognize barriers and challenges that affect communicating your message
- Improve your patient education skills



#### **Health Literacy & Communication Skills**



http://www.hsnsudbury.ca/portalen/library/







# **Defining Health Literacy**

What is literacy?

What is health literacy?



# Elements of Health Literacy

#### **General Literacy**

- Reading ability
- Numeracy
- Listening and speaking skills
- Comprehension ability
- Critical thinking and judgment



# Elements of Literacy

#### **Prose literacy**

- Books
- Newspapers
- Magazines

Concept of Functional Literacy

#### **Document literacy**

- Forms
- Applications
- Schedules
- Maps
- Graphs/tables

#### Quantitative literacy

- Bank forms/cheques
- Purchase orders
- Bills/receipts



# Health Literacy defined

#### **Health Literacy**

- Ability to find, understand and communicate health information
- Ability to assess health information



# Health Literacy defined

The concept of poor health literacy has been coined to describe patients with an inability to obtain, process, and understand basic health information and services needed to make appropriate health decisions.

(Williams 2002 p. 383)



# Factors Influencing Health Literacy

Age
Socio-economic status
Education level
Gender
Culture
Disability



# Factors Influencing Communication

Stress
Time
Gender
Language
Culture



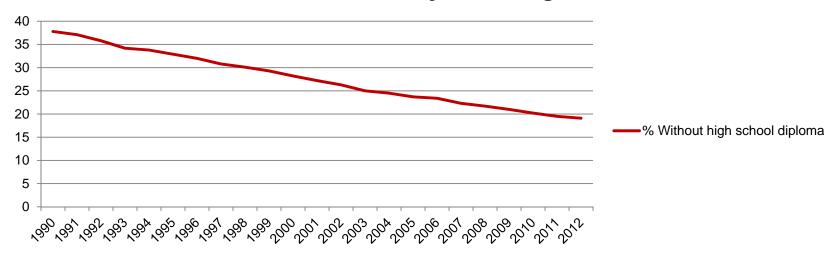
- In addition to a diagnosis of heart disease, diabetes, or cancer, the patient may suffer from depression or other mental health issues
- 8% of adult Canadians will suffer from depression
- 20% will experience a mental health illness

The Report on Mental Illness in Canada, October 2002. EBIC 1998 (Health Canada 2002), Stephens et al., 2001

http://www.cmha.ca/bins/content\_page.asp?cid=6-20-23-43



#### Level of education, Canadians 15 years of age and over



Indicators of Well-being in Canada Human Resources and Skills Development Canada http://www4.hrsdc.gc.ca/.3ndic.1t.4r@-eng.jsp?iid=29



#### Census data - mother tongue

	Ontario	Sault	Sudbury	Timmins
English	68%	86%	64%	56%
French	4%	3%	27%	37%
Other	25%	9%	6.5%	5%

(Statistics Canada: 2011 Census)



Census data - mother tongue:

Sudbury	Italian 26%	Finnish 13%	German 7%
Sault	Italian 53%	Finnish 9%	German 7%
Timmins	Italian 23%	Cree 15%	Finnish 10%

(Statistics Canada: 2011 Census)



# Health Literacy, Status and Outcomes

How does literacy impact patient education?

How does it relate to health status?

Does it affect health outcomes?



# Health Literacy and Health Status

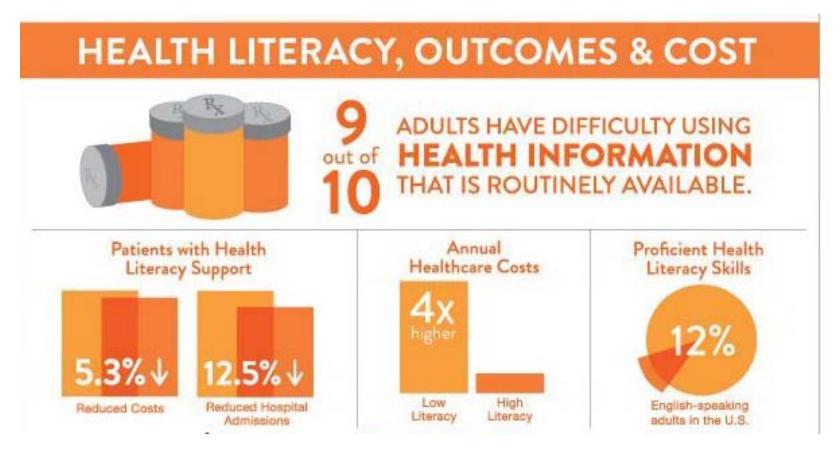
**American Medical Association** 

Health literacy and patient safety: Help patients understand - YouTube

Or http://www.youtube.com/watch?v=cGtTZ\_vxjyA



## Health Literacy and Health Status



Infographic: Are your patients health literate? Make it easier for patients to understand health information. http://www.healthcarecommunication.com/Main/Articles/11712.aspx



#### Health Status

Health literacy is the biggest predictor of health status, ahead of education or economic status.

- 42% of Canadian adults between the ages of 16 and 65 have low literacy skills.
- 55% of working age adults in Canada are estimated to have less than adequate health literacy skills.
- 88% of adults over the age of 65 appear to be in this situation
- All About Literacy in Canada Canadian Literacy and Learning Network http://www.literacy.ca/literacy/literacy-sub/



## Health Literacy and Communication

Confusion and miscommunication due to patient's difficulty in understanding:

- Physician's vocabulary
- Patient education pamphlets
- Online information
- Instruction from clinicians

(Williams 2002 p.384-5:)



#### Health Status and Communication

Confusion and miscommunication due to a patient's difficulty in understanding:

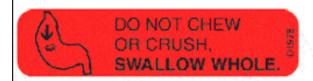
- Prescription label
- Follow-up appointment slip
- Self-care instructions
- Informed consent forms



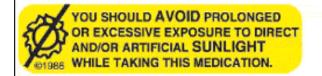
#### Health Status and Communication

#### **Reading Confusion Into Drug Warnings**

When researchers asked consumers to interpret prescription warning stickers, these are among the responses they gave:







"Chew pill and crush before swallowing."

"Chew it up so it will dissolve, don't swallow whole or you might choke."

"Use extreme caution in how you take it."

"Medicine will make you feel dizzy."
"Take only if you need it."

"Don't take medicine if you've been in the sunlight too long."

"Don't leave medicine in the sun."

A Picture is Worth 1,000 Words <a href="http://intouchlabels.com/blog/a-picture-is-worth-1000-words/">http://intouchlabels.com/blog/a-picture-is-worth-1000-words/</a>



# Health Literacy and Health Status

"Individuals with low literacy are more likely to be hospitalized and less likely to seek early medical advice or treatment, to follow up with medical care, or to engage in preventive health behaviors." (Freidman 2004)



## Health Literacy and Health Status

- Poor compliance with recommended treatments
- Adverse effects in treatment or follow-up plans
- Validity of medical history
- Validity of medical tests
- Poorer health outcomes and health status
- Higher health care costs (Williams 2002 p.385)



## Health Literacy and Health Outcomes

- ER patients with low literacy skills are twice as likely to be hospitalized than those with better skills
- Patients with low literacy skills are five times more likely to misinterpret their prescriptions than those with better skills
- Low literacy skills have four times greater annual health costs than those with better skills



## Health Literacy and Health Outcomes

"Low-literate patients may receive ineffective care because they do not understand providers' directions for their care. Thus, they could actually need more visits to achieve the same therapeutic goal." (Baker et al., 1997)



# Health Literacy Preconceptions

How can you identify patients at risk?



## Health Literacy Preconceptions

- Low literacy is a hidden problem: most adults have developed coping skills that let them function well in most situations
- Low literacy does not relate to low intelligence
- Not related to appearance



# Red Flags for Low Literacy

- Eyes wander over a page of text
- Shows a lack of interest in written materials
- Expresses frustration or impatience
- Takes a long time or doesn't complete forms



# Red Flags for Low Literacy

- Looks at the pills instead of reading the label
- Says "I forgot my glasses" or "Can you read it to me?"
- Says "I'll take this home and read it later" or "I'll discuss it with my family."



- Problems in doctor-patient communication
- Learning styles & Communication style
- Effective listening techniques
- Communication protocols
- Communication strategies for patients
- New developments
- Tutorial



#### Problems in doctor-patient communication

- 45% of patients' concerns are not elicited
- 50% of psychosocial and psychiatric problems are missed
- In 50% of visits, patient and physician do not agree on the main presenting problem
- Patients' most common complaint is the lack of information provided by physicians
- Majority of malpractice suits arise from communication errors, not incompetence

The Science of Doctor-Patient Communication: http://videos.bravewell.org/files/Introductory%20Lecture%20PowerPoint.pdf



# Communication Skills Problems in doctor-patient communication

Doing it wrong . . . .

Link to Video - with Dr. Robert Buckman and actor, John Cleese

http://www3.mdanderson.org/streams/FullVideoPlayer.cfm?xml=FacDev/config /Comm\_HowNotToDolt\_Cleese\_cfg



#### **Learning styles**

There are four primary learning styles:

Visual Auditory Kinesthetic Thinkers

Most adults will have a preference for one or two of these styles. Some people will be comfortable using all four learning modes.

Maximizing Your Patient Education Skills Part 1: Learning and Communication Styles, University Health Network.



Visual Key words: See it	Auditory Key words: Hear it	Kinesthetic Key words: Do it	Thinkers Key words: Think about it
	9		
Visuals see colour, size and shape.	Auditories prefer details, clear vocal presentations and audiotapes.	Kinesthetics -prefer to put their hands on and touch something.	Thinkers want to analyze, categorize, review, reflect and ask questions.
They create diagrams of what they hear. They like pictures, illustrations & visual cues (i.e., note takers-refer to it later).	They pay attention to the speaker's voice - the tone, energy, pitch, enthusiasm and modulation.	They like participating in groups and moving about doing several different activities at the same time.	They like to have time to process information and make decisions.
They run movies in their minds and like to read.	They play a tape recorder in their minds. They like written text so they can hear what they are reading	The relive the sensation or the feeling they experienced.	They want the facts with a credible source of data. They like models, logic, data, information, and knowledge.

(Adapted from Langevin Learning Services, 2002)

Maximizing Your Patient Education Skills - Learning and Communication Styles



21

#### **Communication styles**

There are four primary communication styles:

Driver

Expressive

Amiable

#### Analytical

Maximizing Your Patient Education Skills Part 1: Learning and Communication Styles, University Health Network.



## Communication Skills

### **Communication Style Strengths**

Direct and Efficient	Influential and motivating
Candid	Persuasive
Independent	Enthusiastic and outgoing
Decisive	Good storyteller
Pragmatic	Prefers the big picture
DRIVER	EXPRESSIVE
ANALYTICAL	AMIABLE
Persistent	Effective listener
Precise/Exacting	Cooperative
Logical	Supportive
Serious demeanour	Diplomatic
Systematic/Orderly	Patient.



## Communication Skills

### Your communication style affects:

- What you talk about
- The way you talk
- Your tone
- Pace of your speech
- Your body language
- Your responsiveness
- Your listening pattern

Maximizing Your Patient Education Skills Part 1: Learning and Communication Styles, University Health Network.



# Communication Skills Effective listening techniques

- Furthering responses
- Questioning
- Clarifying

- Paraphrasing
- Empathy
- Summarization

Maximizing Your Patient Education Skills Part 1: Learning and Communication Styles, University Health Network



### Communication protocols, models and strategies:

- L.E.A.R.N.S. model (RNAO)
- S-P-I-K-E-S communication protocol (Dr. Buckman)
- Macy Model / PEARLS Statements (NOSM)
- Teach-back techniques



#### L.E.A.R.N.S. Model

#### Listen

- Establish
- Adopt
- Reinforce
- Name
- Strengthen

#### **Macy Model**

**Use PEARLS Statements** 

**P**artnership

**E**mpathy

**A**pology

Respect

Legitimization

Support

#### **Teach-back Technique**

- Asking a patient to explain in their own words what they need to know or do
- Check for understanding
- If needed, re-explain and check again.



#### S.P.I.K.ES.

- Setting up
- Perception
- Invitation
- Knowledge & information
- Emotions
- Strategy and summary

### **Communication Strategies**

**CLASS** is the fundamental protocol for all clinical interviews.

**EVE** is a special strategy to use inside of other protocols when responding to emotions within any type of interaction.

**SPIKES** is a protocol to use when you must break bad news.

**CONES** is a variation of the SPIKES protocol that is useful for error disclosure.

#### Videos:

http://www.mdanderson.org/education-and-research/resources-for-professionals/professional-educational-resources/i-care/complete-library-of-communication-videos/basic-principles.html



#### L.E.A.R.N.S. Model

Listen to client needs
Establish relationships
Adopt intentional approach
Reinforce health literacy
Name new knowledge via teach-back
Strengthen self-management

Developed by the RNAO Expert Panel for the Best Practice Guideline "Facilitating Client Centred Learning".



### **Macy Model**

Provides a framework for the medical interview and uses the PEARLS statements for communication

**P**artnership

**E**mpathy

**A**pology

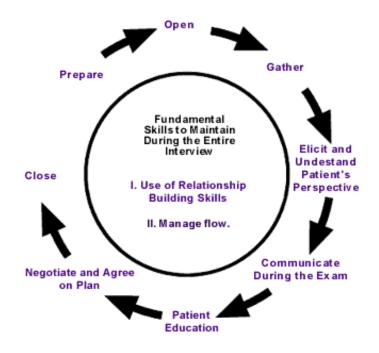
Respect

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Support



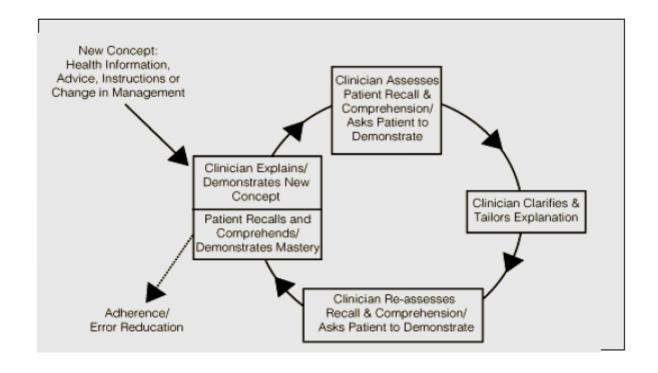
Overview of the Structure and Sequence of Effective Doctor Patient Communication



Website - http://nyumacy.med.nyu.edu/curriculum/model/m04.html



#### Teach-Back





## Communication strategies . . . patients



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

www.npsf.org/for-healthcare-professionals/programs/ask-me-3/



## Communication strategies . . . patients

## Ask. Listen. Talk.

Before you meet your doctor or health care provider, prepare a list of questions you want to ask:

What is this test for?

When will I get the results?

Why do I need this treatment?

Are there any alternatives?

What are the possible complications?

How do I spell the name of that drug?

Are there any side effects?

Will this interact with medicines I am already taking?

Visit asklistentalk.ca for more information









# Communication Skills New developments

#### **Communication Climate Assessment Toolkit (C●CAT)**

- Developed by the American Medical Association in 2010
- Meets U.S. Joint Commission's new patient-centered communication standards

C.CAT provides a 360-degree organizational assessment to demonstrate whether an organization's policies, practices and culture promote effective, patient-centered communication.

Reference: The Joint Commission (2009) *Patient-Centered Communication Standards for Hospitals.* Effective July 2012. –

http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/the-ethical-force-program/patient-centered-communication/patient-centered-communication-framework.page



# Communication Skills New developments

### **Beyond words**

Beyond Words will produce

- a pictogram-based toolkit to improve wayfinding on hospital campuses
- a simplified discharge summary to improve the comprehension of medication and care instructions

Video . <a href="http://www.thecicc.com/">http://www.thecicc.com/</a>



# Communication Skills Tutorial

#### Teach-back communication technique

- Asking a patient to explain in their own words what they need to know or do
- Check for understanding
- If needed, re-explain and check again.

#### 45 minute tutorial -

http://www.teachbacktraining.com/interactive-teach-back-learning-module

