



Health  
Literacy

Information  
Literacy

Janet Crozier  
[Janet.crozier@nes.scot.nhs.uk](mailto:Janet.crozier@nes.scot.nhs.uk)

“People having enough knowledge, understanding, skills and confidence to use health information, to be active partners in their care, and to navigate health and social care systems” (Scottish Government, 2014)

“Half of what a person is told is forgotten<sup>1</sup> and half of what they remember is misunderstood<sup>2</sup>”

1. Kessels RP. Patients' memory for medical information. J R Soc Med. May 2003;96(5):219-22.

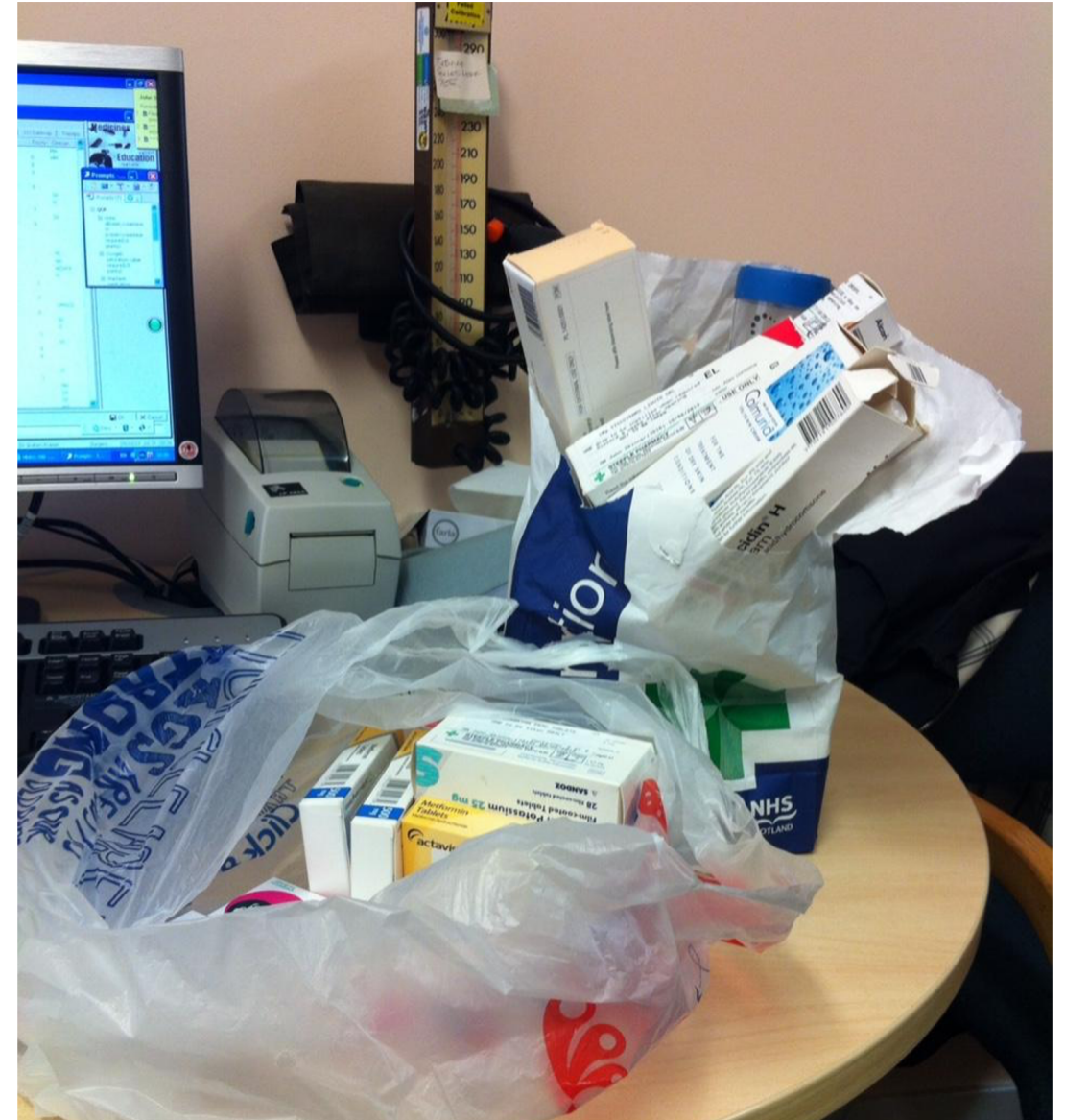
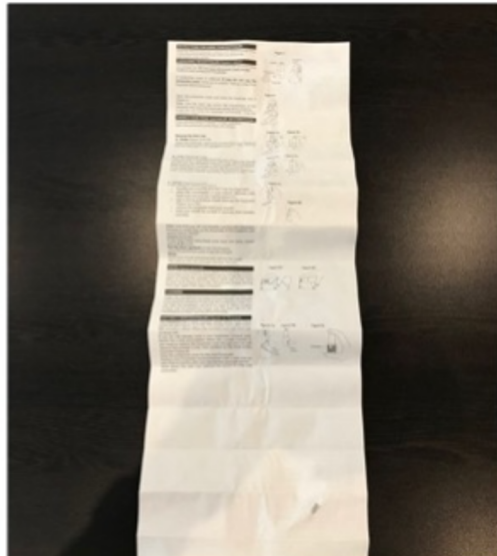
2. Anderson JL, Dodman S, Kopelman M, Fleming A. Patient information recall in a rheumatology clinic. Rheumatology. 1979;18(1):18-22.





**Jason Leitch**  
@jasonleitch

Seriously?? Instructions  
inside a steroid inhaler today.  
[#healthliteracy](#)





## Risk levels

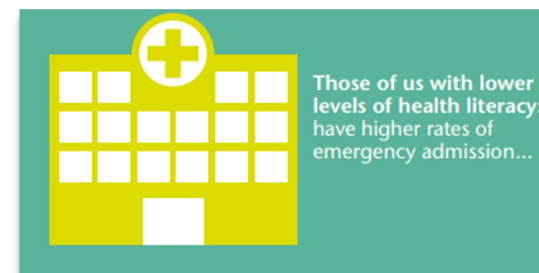
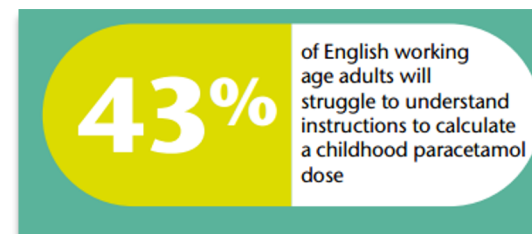
- critical - major risks to your independent living or health and well being which are likely to require immediate or imminent provision of services
- substantial - significant risks to your independent living or health and well being which are likely to require immediate or imminent provision of services
- moderate - risks to your independent living or health and well being\*
- low - issues around your quality of life but low risks to your independence and well being\*

\*resources are not available to meet these needs. However, we will provide you with information and advice about alternative sources of support with appropriate arrangements for review, if required.



## Impact of poor Health Literacy

- Poor understanding of medicines info
- High cost to economy
- Higher emergency admissions
- Impact to our own and others health



Scottish Government Health Literacy Action Plan, 2014



## Policy Context

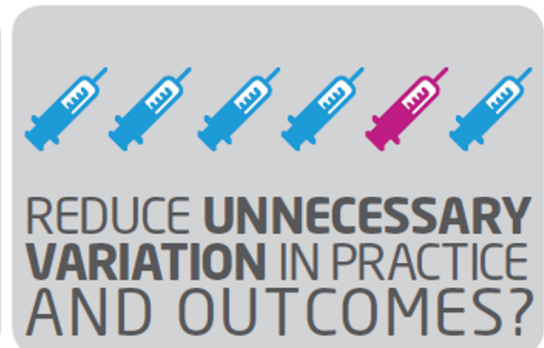
- Making it Easy: national health literacy action plan (Scottish Gov, 2014)
- 2020 Vision (Scottish Gov, 2011)
- Making it Easier (Scottish Gov, 2017)
- Health Literacy and WHO sustainable development goals (SDGs)
- Realising Realistic Medicine (Scotland) (2017)



## Realising Realistic Medicine (Scotland) (2017)

# REALISTIC MEDICINE

CAN WE:



## Digital Information Literacy

- Access online health and social care information
- Know how to avoid scams and fake information
- Able to book appointments online
- Use video consultation tools such as Near Me
- Use Apps for mental wellbeing or behaviour change
- Use wearable technologies for emergency support or prompts for self managing conditions
- Access online support forums





Good health literacy



Limited digital skills



Good digital skills



Poor health Literacy





# Universal precautions

- Everyone can be at risk
- Never assume
- Embed in practice



Scottish Government Health Literacy Action Plan, 2014



## Target groups

Whilst a universal approach to health literacy is recommended, there are some groups that may be at more risk of poor health literacy. For example:

- People with Learning disabilities/autism
- Older adults



## Older adults

- 71% of older adults have difficulty using print materials
- 80% have difficulty using documents with forms or charts
- 68% have difficulty interpreting numbers and performing calculations

(National Network of Libraries of Medicine)



## Activity

Are there particular words/terminology that you use that could be confusing for people?

For example: Radiology – X-ray

Cellulitis – skin infection

Personal outcomes

Advocacy

Support Plan

List them and think of alternative terms you can use.





## 5 tips for making it easy

- Teach back
- Chunk and check
- Use pictures
- Use simple language
- Routinely offer help with paperwork



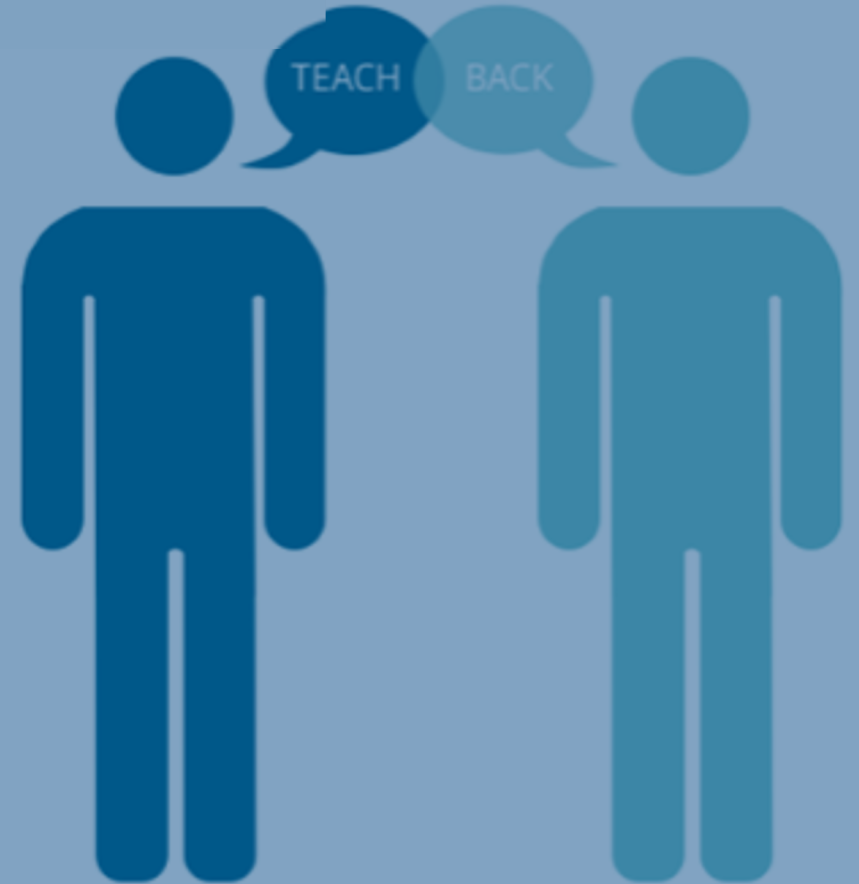
[www.healthliteracyplace.org.uk](http://www.healthliteracyplace.org.uk)

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## Check understanding - Teachback

- Ask person to use their own words
- Confirm your explanation
- Not a test



- ✓. I would like to check that I have explained things properly, would you mind telling me what it is we have discussed and what I've asked you to do?
- Can you tell me how you are going to explain things to your family when you get home tonight?

- ✗. I want to make sure you have understood, can you tell me what I've asked you to do?
- Have you understood everything we have discussed?

## Teach-back technique

Improving communication | Improving patient safety  
Improving self management | Improving health literacy

Clear communication is essential for effective healthcare relationships and patient safety. Yet patients remember and understand less than half of the information they are given.

**Poor understanding can lead to serious health problems.**

Simply asking 'is that clear?' or 'have you understood everything?' doesn't work.

**Use teach-back, it's an easy and effective way to check patient's understanding.**

**NHS**  
SCOTLAND

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**Teach-back is a really simple way to check patient's understanding.**

It involves asking patients to explain or demonstrate, **in their own words**, what you've discussed with them – for example:

*'To be sure I've explained this consent form clearly, can you tell me what you are agreeing to?'*

Or

*'Please show me how you will use the asthma inhaler, so I can be sure I have given you clear instructions.'*

Or

*'We discussed a lot today. Can you tell me what you found most important?'*

- If patients don't restate the information correctly, then try explaining again using different words, drawing a diagram or simplifying instructions, then use teach back again.
- If, after two or three attempts, the patient still does not "get it," then ask a colleague for help or look for another explanation such as the need for an interpreter.

Further copies of this postcard are available from:  
knowledge@nes.scot.nhs.uk

This postcard is based on information from the American Medical Association, [www.ama-assn.org](http://www.ama-assn.org) May 2011

**NHS**  
SCOTLAND



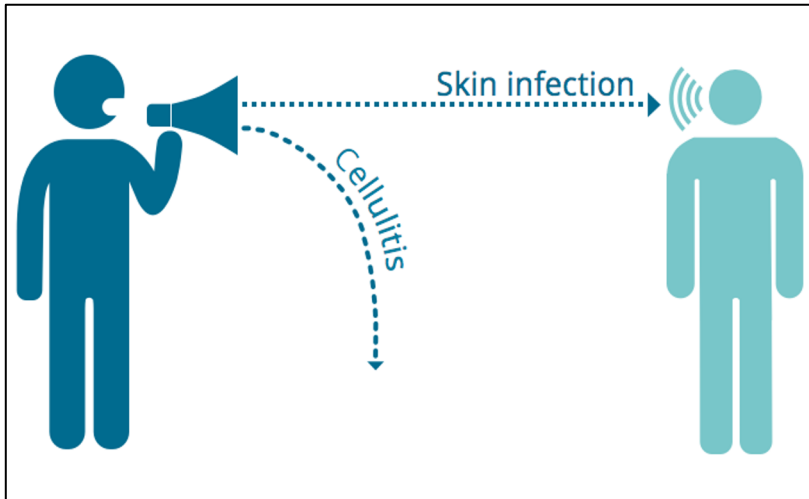
# Chunk and Check.....



Break the information down into small pieces or chunks and check for understanding after each piece



# Use Simple Language



Within health and social care, a lot of jargon, terminology and acronyms are used.

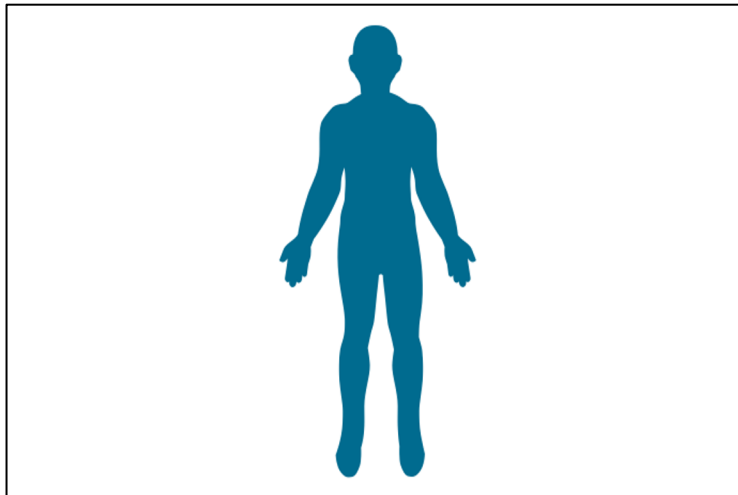
This can be challenging for people to understand.

We should use plain and simple language to explain things.





# Use Pictures



**Some concepts can be difficult to explain eg Self-directed Support and the 4 options that are available for support. Graphics and pictures can sometimes help communication.**



# Routinely offer help

<input checked="checked" type="checkbox"/>	Question A.
<input type="checkbox"/>	Question B.

It is not possible to tell by looking at someone whether they might have problems with paperwork or understanding information.

# Activity

- Think about where you can use Teach Back in your own setting.
- Are there particular instructions that you give to people?
- Can you use Teach Back to make this easier for people and to check their understanding?

## Tips for building relationships remotely

- Short calls might be better than one longer session to build up trust and familiarity
- Find new ways to build rapport, icebreaker maybe meeting online
- Subtle social cues and non verbal cues can be missed – telephone and small screens
- Can't rely on physical senses to build bigger picture
- Who else is present?



## Tips for building relationships remotely

- Plan ahead for difficult conversations, people becoming upset or ending call abruptly
- What support is available for the person after the call?
- Practical issues such as how to end the call – 5 minute warning? Wrap up with Teachback? Anything we have not covered?
- Try not to do back to back calls. Schedule in time to reflect as you would have done travel time.



## Send out information beforehand ....

- . Use plain English (average reading age of UK population is between 9 and 11 years).
- . Avoid jargon and define abbreviations especially if using IT terms.
- . Explain a complex term if it has to be used.
- . Use short sentences (Readability Checker)

# Think about.....

How to make Near Me information user friendly for example, translated leaflets, awareness about how to make test calls, and clearer information about how to involve interpreters or family members for support in video calls.

Use of Pictures!

## Practical Issues ....

- Guidance about how the appointment will work
- How long it will take
- Clear joining instructions
- What to do if something goes wrong

## Practical Issues ....

Schedule a telephone call beforehand to go through process to:

- Reduce anxiety
- Break down barriers
- Build trust and rapport

## Practical Issues ....

- Send a text reminder the day beforehand with telephone support details



## Take action

- Visit Health Literacy Place
- Get involved
- Contribute a blog or case study
- Follow on Twitter  
@healthlitplace

