

Front page (document to be linked to Health Inequalities page on Sharepoint)

## **Personalised Care - Enabling people to make informed health decisions and reduce health inequalities: health literacy guidelines**

**Who is this guidance for?**

**The aim of this guidance is to ensure that Worcestershire Acute Hospitals Trust staff are aware of how to best communicate with our patients who have low to no literacy and to be aware of health inequalities.**

**This guidance should be read and utilised by any staff member who communicates with patients/carers and families in any capacity.**

This guidance outlines the approach to Health Literacy at Worcestershire Acute Hospitals Trust to support and enable the delivery of safe and effective, person-centred care.

We have systems and processes in place to support us to communicate with patients in the best way possible for those patients. These guidelines are intended to sit alongside these processes. For further information, these guidelines should be read alongside the **Patient Access Policy**

These guidelines support our aim that all of our policies, procedures and forms will be designed to be understood by all.

It is recommended that these guidelines are read alongside the Reasonable Adjustments information: [Reasonable Adjustments - What you need to know...](#)

**Contents page with quick link clicks to pages**

**Did you know?** Around 43% of the adult population in England are unable to understand routine health information (**Rowlands et al, 2015**). An estimated 41% of adults in Herefordshire and Worcestershire have low health literacy, increasing to 60% when numbers are involved (**Health Literacy Tool, 2016**).

**This document contains information about the importance of health literacy and what we can do as staff to support our patients, their carers and families to ensure good healthcare outcomes and deliver safe, effective, personalised care.**

**Quick links:**

- **Free half-hour e-learning:** <https://www.elfh.org.uk/programmes/healthliteracy/>
- **Health Literacy Awareness Sessions** are available to teams and small groups. Contact: [hw.personalisedcare@nhs.net](mailto:hw.personalisedcare@nhs.net)
- Use the **NHS Document Readability Tool** to check the reading age of your document.
- Reach out to the **Patient and Public Forum** to review new patient information via: [wah-tr.syst-keydocs@nhs.net](mailto:wah-tr.syst-keydocs@nhs.net)

## What is health literacy?

Health Literacy is "The personal characteristics and social resources needed for individuals and communities to access, understand, appraise and use information and services to make decisions about health" [World Health Organisation, 2014](#).

Health literacy levels in England are low. 42% of working age adults (16-65 years) are unable to understand or make use of everyday health information. This rises to 61% when numeracy skills are required ([Rowlands et al, 2015](#)).

**Personal Health Literacy:** The degree to which individuals have the ability to find, understand, and use information and services to inform health-related decision and actions for themselves and others.

The average reading age of the working age population in England is thought to be between 11 and 14 years old ([Skills for Life Survey, 2011](#)).

**Organisational Health Literacy:** The degree to which organisations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

**If people cannot understand information, they will not be able to participate in shared decision-making conversations with healthcare professionals, they will not be able to attend appointments or understand treatment that is required. This can have serious implications for patients.**

## Why is Health Literacy Important?

Lower levels of health literacy are associated with:

- **Lower levels of health** including a higher risk of long-term conditions ([Williams et al, 1998](#)) and reduced uptake of prevention services (e.g., immunisation and cancer screening programmes) ([Berkman et al, 2011](#)).
- **Lower patient activation:** In people with a chronic disease, those with "inadequate health literacy knew significantly less about their disease than those with adequate literacy". ([Gazmararian, 2003](#))
- **Barriers to personalised care:** Low health literacy is a barrier to shared decision-making, supported self-management, and informed consent.

Help to raise awareness of the importance of health literacy by sharing the briefing report below.

[Health Literacy Infographic \(2\).pdf](#)

[Why does Health Literacy matter to me - Briefing Report \(3\)\(1\).pdf](#)

In summary, low health literacy is associated with poor health behaviours and outcomes. Working towards becoming a more health literate system has the potential to reduce inequalities, by improving access to support services, improving people's experience of our services and to improve their health and wellbeing outcomes. Raising awareness and training our workforce is the first step to achieving this goal.

## Written Information

### Readability

Almost half the adult population (43%) in England have a reading ability at or below level 1, which is the level expected of a typical 11-14-year-old. 15% are at or below entry level 3 (typical 9-11 year old) ([Skills for Life Survey, 2011](#)). To ensure written information is accessible, aim at a reading age of 11 or below.

Use the [NHS Medical Document Readability Tool](#) to estimate the reading age required to understand your content. A readability audit template is attached below to help measure and prioritise items for improvement.

Tips to help improve readability include:

- Writing in plain English. Avoid jargon and choose the simplest words you can. See the [How to write in plain English guide](#) from the Plain English Campaign for guidance. More tools are available from page 16 of the [Health Literacy Toolkit \(NHS, 2023\)](#).
- Use short sentences and bullet points for lists.
- Use 'active' verbs.
- Use 'you' and 'we'.

Focus on the quality of patient information, taking steps to ensure that sufficient processes and resources exist to support this.

- **NHS standard for creating health content:** “Outlines some essential requirements and best practice guidance”.
  - **Accessible Information Standard (AIS)** All publicly funded health and adult social care services are required to meet this standard. The **Accessible Communications Policy Checklist (NHSE)** outlines what should be included in an organisations' policy and processes for following the AIS. Resources to supported with this have been collated by NHS England, [here](#).
  - **2020 Guide to Producing Health Information for Children and Young People (pifonline.org.uk)** Guidance on producing health information for children and young people.
  - **Patient Information Poster V2 (3).pdf** Poster showing a checklist for making sure patient information meets requirements. Can be displayed in offices.
- **Readability Audit Template (2)(1).xlsx**

## Learning

[Health Literacy E-learning module](#) from E-learning for health. This module is a good introduction to health literacy. It includes techniques which can be used in everyday practice to improve communication and check understanding.

**Trainer-led Health Literacy Awareness Seminars** are available upon request to groups of more than six or more. The sessions are trainer led by local staff passionate about health literacy. It provides a more detailed overview of health literacy than the e-learning module, and the opportunity for questions and discussion. To arrange, please email:

[hw.personalisedcare.nhs.uk](mailto:hw.personalisedcare.nhs.uk)

Health Literacy Awareness

60-75 minute sessions for teams and small groups.

- Trainer-led
- Face to face or via Teams
- Tailored content based on training needs

Contact us at [hw.personalisedcare@nhs.net](mailto:hw.personalisedcare@nhs.net) with your request, including the expected number of attendees.



User involvement to design and test information is a good indicator to improve access. If you do not have access to a patient group, you can ask the Patient and Public Forum. Email: [wah-tr.syst-keydocs@nhs.net](mailto:wah-tr.syst-keydocs@nhs.net)

## Techniques to support effective communication:

1. Teach Back: [Use and Effectiveness of the Teach-Back Method in Patient Education and Health Outcomes - PMC](#)
2. Chunk and Check: [Chunk and check - The Health Literacy Place](#)

The links above will give staff the tools to assist in promoting understanding with patients and carers. When we speak to patients there is often a lot of information to be discussed and we may have to explain more than one concept. People can struggle to take on board a long list of things they are being asked to take in or do, and yet this is often how information is presented.

Case studies, a “How To” guide and additional information can be found here: [Improving health literacy | NHS England | Workforce, training and education](#)

## Becoming a more health literate organisation (HLO)

### Things you can do

- Check prevalence of low health literacy in your area: [HEALTH LITERACY - Home \(geodata.uk\)](#)
- Check the readability of your content using the NHS Readability Tool: [NHS Document Readability Tool \(newcastlelse.github.io\)](#)
- Complete training via [Course: Resource Library: Health Literacy \(hubkencore.com\)](#)
- Nominate/become a Health Literacy Champion for your organisation.
- Review your organisation's process or policy around creating information. How does it ensure information can be understood (by people with limited literacy).

### Resources from Health Literacy Matters

Organisations can strive to become 'Health Literate Organisations'. The following resources are owned and kindly shared by Health Literacy Matters, as part of their Health Literate Organisation training programme. Please use for information purposes only.

- [HLO Journey Planner Version 1](#) (KHUB) The Health Literate Organisation Journey Planner and Checklist provides a detailed process for "Health Literacy Champions" helping to make their organisation (or department or team) more health literate.
- [Health Literacy Knowledge Hub \(KHUB\)](#) A platform created as part of the Midland's Change Management Approach. Created for discussing and sharing resources, reflections and learning on how to be a health literate organisation.

### Health Literacy Tools & Resources

- [NHS Health Literacy Toolkit \(2023\)](#) Health literacy guidance and tools from the NHS.
- [Our Resources \(pifonline.org.uk\)](#) Collection of resources from the Patient Information Forum (PIF).
- [Patient information \(Knowledge and Library Services\)](#) Webpage with guidance on how to support patients and members of the public.
- [Health Literacy UK - Delivering health literacy through informed practice](#)
- [Health-literacy-how-to-guide.pdf \(HEE\)](#) Guide that describes the practical tools and techniques that can be implemented to support people with low levels of health literacy.
- [Guide to producing health information for children and young people](#) from the Patient Information Forum

## Video Library

Videos can be used as an alternative (or in addition to) written information. For video library resources, see the Supported Self-Management section of the Personalised Care Toolkit.

### [Health Information Video Library](#)

- [Personalised Care Toolkit](#)

## ICB Health Literacy Project Documents

A range of documents as outputs from the project.

- [Health Literate Organisation project survey 2023-24\(0\).pdf](#)

Thank you to the Herefordshire and Worcestershire Integrated care System (ICS) for the development and creation of the links and resources in these guidelines.

## Our Procedures

- All staff are expected to have read and understood these guidelines.
- All staff are to be aware that patient alerts on PAS will identify which patients have literacy needs or require audio for example. All staff booking appointments can see these alerts on the system.
- All staff are to be aware that flags on EPR will identify those inpatients who require reasonable adjustments. More information can be found on the Sharepoint here: [Reasonable Adjustments - What you need to know...](#)
- Letters for Ophthalmology patients are to be sent out size 14 on contrast paper as standard. White paper is recommended to provide the greatest contrast.
- The trust is progressing appointment letters being generated via Synertec (and linked to the portal project). The trust is progressing with appointment letters being sent through this system so that all letters can be linked to particular alerts – for example, if a patient has an alert for ‘sight impairment’ the system will trigger the dispatch of a large-font letter and if a patient needs an audio letter (via email) or Easy Read for people with a literacy alert. Please note that this is currently in development.



**How these guidelines will be implemented into practice:**

- **All staff are expected to have read this guidance** to increase awareness of the impacts of lower levels of health literacy
- **This guidance will be shared with Patient and Public Forum volunteers who support the trust with reviewing patient leaflets and information (these volunteers have attended Health Literacy Awareness Training)**
- **All staff responsible for writing, developing or sending out communication to patients are encouraged to have attended Health Literacy Awareness Training**
- **Additional effective communication training will be developed by the trust and made available to staff through the Patient Voice and Involvement strategy roll out**
- **All staff are expected to use everyday language when speaking to the people who use our services**
- **Staff are encouraged to use techniques such as Teach Back, Chunk and Check, when talking to people who use our services (information available links in these guidelines)**
- **Ensuring that new written information produced by the trust is in line with guidance provided in these guidelines and has been user tested (patient/carer groups/Patient and Public Forum)**
- **Staff are encouraged to review key existing information with people who use our services to test out whether they understand it**
- **Staff are asked to commit to stocking information and resources which are suitable for all levels of Health Literacy, including those who may need more technical resources as well as those who require simpler ones**
- **Everyone is encouraged to share how they have implemented these guidelines with The Head of Patient, Carer and Public Engagement: [Anna.Sterckx@nhs.net](mailto:Anna.Sterckx@nhs.net) so that good practice and progress can be shared, highlighted and showcased in local and annual reporting.**

It is the responsibility of the Chief Nursing Officer to ensure that all members and all staff are aware of and familiar with these guidelines. It is the responsibility of all staff to ensure that they understand and implement these guidelines.

**Further reading:**

- **The World Health Organization Health Literacy Toolkit:**  
<https://www.who.int/publications/i/item/9789290224754> which contains a series of information sheets to support the incorporation of health literacy responses into practice and service delivery.
- **NHS Improving Health Literacy pages:** <https://www.hee.nhs.uk/our-work/knowledge-library-services/improving-health-literacy> which explains the impact of adults not being able to understand written health information.

**References:**

The information contained in these guidelines has been taken from the ICS Exchange page: [Course: Resource Library: Health Literacy](#) and specifically: the [Health Literacy Teamnet page](#)

All other references are directly linked throughout these guidelines.

