



UNIT II - SECTION 5

HEALTH LITERACY
INSTRUCTOR'S GUIDE

1. Goals

- Goal 1: To introduce the concept of health literacy
- Goal 2: To examine the connection between health literacy and patient health outcomes, including in audiology
- Goal 3: To introduce the concept of health literate materials, and review research on health literacy in audiology counseling
- Goal 4: To emphasize the importance of using appropriate health literate patient materials, including counseling and decision aids, across multimodal domains

2. Concepts to Master

- a. Limited health literacy is associated with poor patient adherence, medication errors, and increased healthcare costs.
- b. In order to make appropriate hearing health decisions, patients need to understand instructions that are pertinent to their health and rehabilitation.
- c. Audiologists tend to overestimate the health literacy of their patients, and risk increased patient misunderstanding and non-compliance.
- d. Clear communication and health literate materials can improve patient understanding and patient outcomes.

3. Reading

- a. Nair, F.L. and Cienkowski, K.M. (2010). The impact of health literacy on patient understanding of counseling and education materials. *International Journal of Audiology*, 49, 71-75
- b. Caposecco, A., Hickson, L., and Meyer, C. (2014). Hearing aid user guides: Suitability for older adults. *International Journal of Audiology*, 53(s1), S43-S51

4. Lectures

- PowerPoint: “Health Literacy and Hearing Healthcare”

5. Class Activity

- SILS Screening, Reflection on Patient Understanding: “In a Pickle” and “Kathleen and Her Family” (Associated Handouts Provided). To access the videos, please log in to the Ida website, use the following link and go to the section called “Health Literacy”.

http://idainstitute.com/toolbox/university_course/videos_and_handouts/unit_ii/

6. Reflection

- a. How did this lesson inspire you to think of new ways to approach patient counseling?
- b. What are some ways you can adapt your clinical routines to ensure patient understanding of their hearing status and discussions of the patient journey?

7. Assignment

- a. Rate the clinical materials you use when counseling patients in terms of health literacy levels.

LESSON OVERVIEW: WHAT ARE WE DOING TODAY?

1. Establish learning mind-set.
2. Talk about the factors that influence the clinical encounter between the client, their communication partner and the audiologist. A fundamental issue influencing the outcome of a clinical encounter is how well patients understand the information that is provided by Audiologists, either in written or oral formats. Discuss ways of improving our ability to discover the patient perspective, through better understanding of their health literacy.
3. Begin by going over the goals and objectives. Remind students that one of the key factors in achieving patient centered care is to communicate clearly and verify patient understanding of information provided.
4. **Class Activity**
Establish the Patient Perspective through exploration of your own health literacy and your experiences with misunderstanding communication in healthcare settings.
5. **Reflective exercise**
 - a. Video: “In a Pickle” and associated handout.
 - b. Video: “Kathleen and her family” - regarding the confusion created when audiologists do not communicate clearly.
6. **Reflection**
 - a. How did this lesson inspire you to think of new ways to approach patient counseling including health literacy principles?
 - b. What are some ways you can adapt your clinical routines to ensure patient understanding of their hearing status and intervention options?
7. **Closing**
 - a. Announcements
 - b. Assignment: Rate the readability of your counseling materials and propose ways in which you can improve upon them.

CLASS ACTIVITY
(INSTRUCTOR COPY)

For this activity we will explore the patient mindset by reflecting on your own personal experiences with poor communication with a healthcare provider. The goal of the exercise is to actively engage the students by exploring personal experiences in which person-centered care was not experienced because shared meaning was not established between patient and provider. We would like to explore the possible negative effects this type of experience had on your understanding of your own condition, and how that may make you feel.

In this activity students will (a) think about a specific situation they have experienced with a provider (specifics described below), (b) pair up and discuss these experiences, and (c) share experiences with the rest of the class to begin to reach a shared understanding of how common these experiences are across health care settings, and to explore how these experiences have negative outcome for patients.

1. Think about a time in which you visited a physician or other healthcare provider and the diagnosis, test results, or treatment plan was discussed in ways you did not clearly understand. Answer the questions in the associated handout.
To help you think about this, consider a time in which you received written test results that used technical medical jargon with which you were not familiar. Or consider a time in which the doctor discussed a treatment plan in terms in which you did not understand, either verbally or in written format.
2. **Pair:** Have students write on sticky notes or a whiteboard the factors that they feel contributed to their misunderstanding, inability to adhere with recommendations, and how that made them feel
3. **Share:** Have a discussion in class and ask different groups to share the results of their discussions

Questions on the handout can be discussed as a group.

CLASS ACTIVITY
(STUDENT COPY)

For this activity we will explore the patient's mindset by reflecting on our own personal experiences with poor communication with a healthcare provider. The goal of the exercise is to actively engage you by exploring a personal experience in which person centered care was not practiced because shared meaning was not established between you and the provider. We would like to explore the possible negative effects this type of experience had on you, as the recipient of health services, and how this affected your understanding of your own condition, and how that made you feel.

In this activity you will (a) think about a specific situation (described below), (b) pair up with another student and discuss your experiences, without revealing any personal medical information, and (c) share your experience and the answers to the questions with the rest of the class.

Scenario

Think about a time in which you visited a physician or other healthcare provider and the diagnosis, test results, or treatment plan, and evidence was discussed in ways you did not clearly understand.

To help you think about this, consider a time in which you received written test results that used technical medical jargon with which you were not familiar. Or consider a time in which the doctor discussed a treatment plan in terms in which you did not understand, either verbally or in written format.

Questions

1. What factors do you think contributed to your lack of understanding.
2. What did the provider do to contribute to your lack of understanding?
3. How did your inability to understand what the provider was communicating affect
 - a. Your ability to understand your own health issue?
 - b. Your state of mind around the health issue?
 - c. Your level of trust for the provider?
 - d. Your compliance with the doctor recommendations?
4. Consider your SILS screening result in the context of this negative experience. Would you adjust your answer on the SILS based on this exercise, and if so, how?

CLASS ACTIVITY
(INSTRUCTOR COPY)

For this activity we will explore the patient mindset by reflecting on a clinical encounter in which communication between the patient and the audiologist is not clear.

The video-re-enactment can be accessed through the following link: http://idainstitute.com/toolbox/university_course/videos_and_handouts/unit_ii/

Please log in to the Ida website, use the link, go to the section called “Health Literacy” and play the video called “In a Pickle”.

Please instruct the students to watch this reenactment and to listen specifically for evidence that Sophia, the patient, is not understanding several aspects related to her hearing/hearing aids.

Questions for Discussion

1. Specifically, what is the problem being experienced by the client?
2. What terminology used by James, the audiologist, does Sophia not seem to be understanding?
3. What patient related factors do you think may be contributing to Sophia’s lack of understanding?
4. How do you think Sophia feels about her lack of understanding of her hearing aids?
5. What may the outcome be for Sophia and her hearing aid use if the confusion is not addressed soon?
6. What Audiologist related factors do you think could be contributing to Sophia’s lack of understanding?
7. What inferences can you make about the oral or written materials that may have been used to counsel her during the hearing aid fitting process?
8. Based on what you observed, what do you think this patient might score on the SILS, had it been administered?
9. What could the audiologist do to improve understanding in this situation?

**HOMEWORK
ASSIGNMENT**
(1/2)

1. Rate the counseling materials you give to your patients for suitability relative to literacy. It could be their understanding of the hearing loss, hearing aids, tinnitus, cochlear implants, BAHA, etc.
2. Go to the following website http://www.online-utility.org/english/readability_test_and_improve.jsp
3. Enter the text of the counseling materials you use into the text box.
4. Click on Process Text and write down the following indices:
5. If you do not have access to the internet but you have access to Microsoft Word, you can get these readability indices by going to preferences, selecting spelling and grammar check settings, and checking “show readability statistics”. Please note these stats will show only after you complete the entire grammar check.

Rate your materials.

1. What is the Flesch-Kincaid Grade Level?
2. What is the Flesch Reading Ease Index calculated?

Interpret the suitability of the scores above:

- a. **0-29 - Very Confusing**
understood by university graduates
 - b. **30-49 - Very Difficult**
 - c. **50-59 - Fairly Difficult**
understood by 10-12th grade students
 - d. **60-70 - Standard Ease**
understood by 8-9th grade students or 13-15 year old students
 - e. **80-89 - Easy**
 - f. **90-100 - Very Easy**
understood by the average 5th grader, or an 11 year old student
3. Caposecco et al. (2012) suggest a reading level of 3-6 grade be used. Do your materials meet this standard according to the FKGL score?
 4. The mean reading level of the materials rated by Caposecco et al. (2012) was 9.6. How do your materials compare to the mean of the reading levels of the 36 manufacturers studied by Caposecco et al. study?
 5. If the materials you use for counseling are above a 3-6 grade level, then re-write these materials to achieve the appropriate levels. This may take some time and thought, but it will be worth it!
 6. Evaluate your materials using SAM: Go to the following website and consider the suitability of your materials in the context of the SAM rating. http://www.cancerpatienteducation.org/health-literacy/hcp-training/StM-PrincesMgt_Librarians_SAM_Scoring_Sheet.pdf

**HOMEWORK
ASSIGNMENT**
(2/2)

7. A score of 40-70 is adequate material and a score of 70-100 is considered superior. What is the SAM score of your material? What are the major weaknesses of the material in your opinion, and how can you fix them?

Please print your work and bring it to class for discussion.