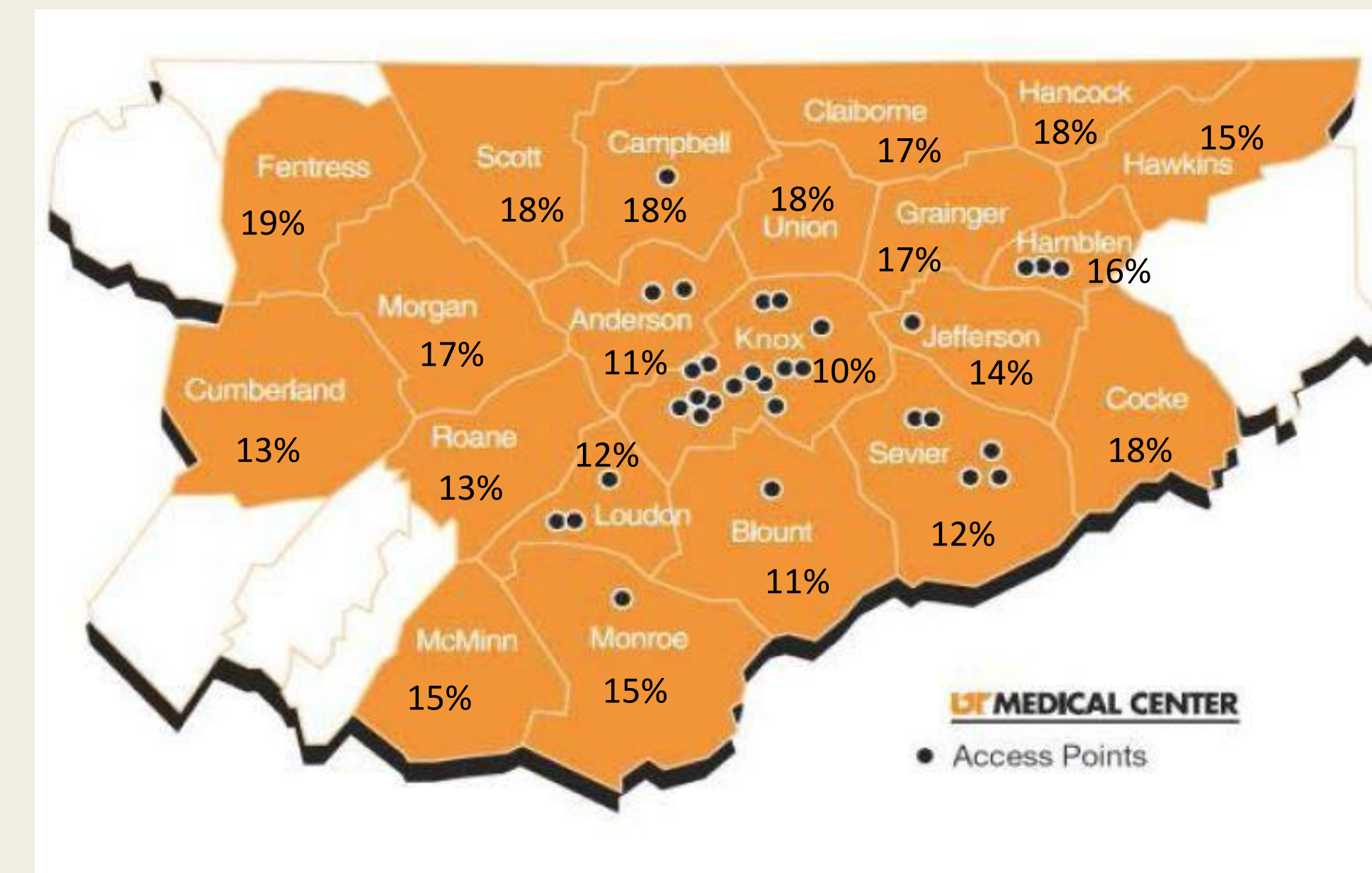


Promoting Changes in the Health Care Delivery System through Systematic Assessment

Kelsey Leonard, MSIS, AHIP; Jennifer Russomanno, MPH; Sandy Oelschlegel, MLIS, AHIP; Emily Pollard, BS; R. Eric Heidel, PhD
 University of Tennessee Graduate School of Medicine, University of Tennessee Medical Center
 Knoxville, TN

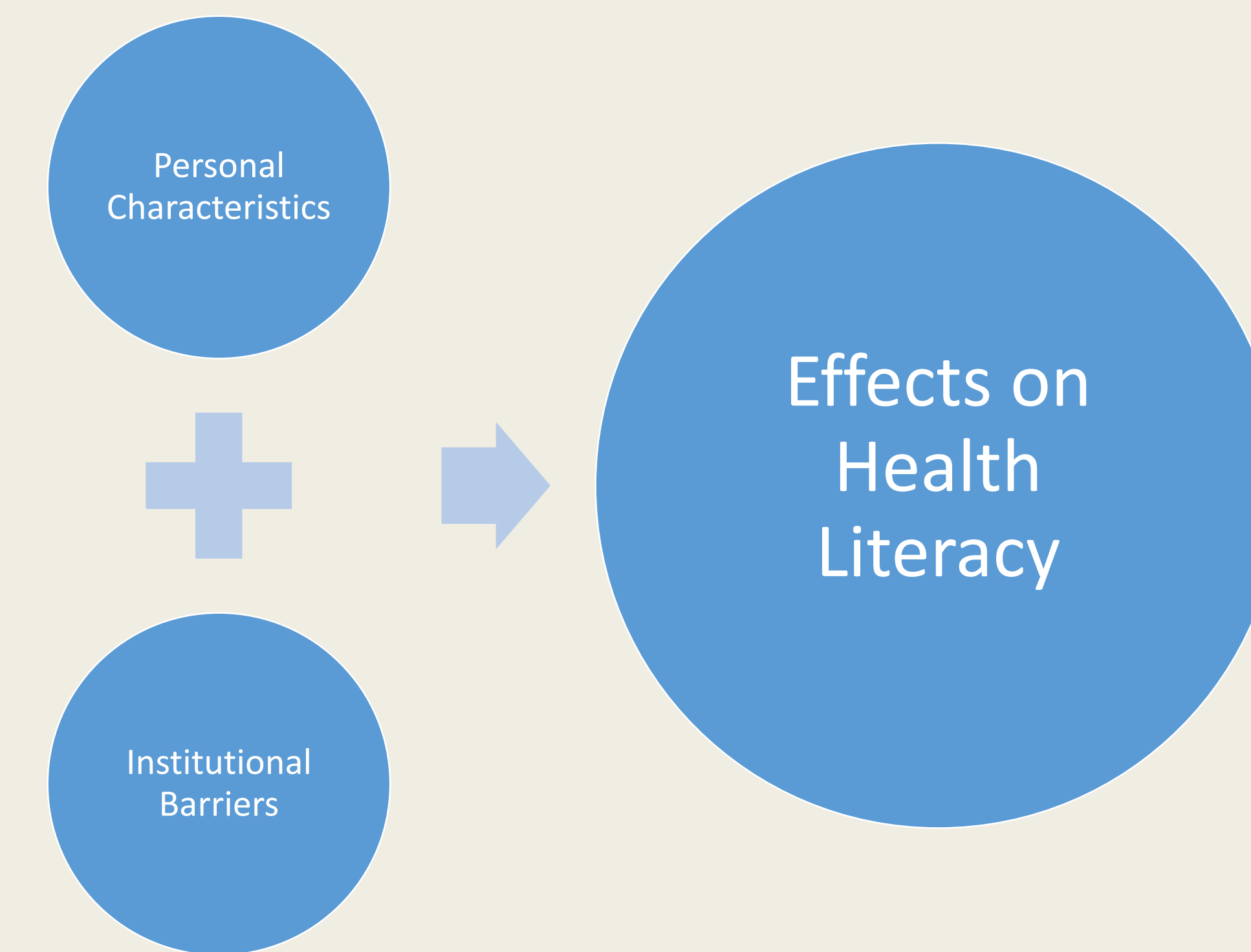
Background: Health literacy affects people of all ages and education levels. The National Action Plan to Improve Health Literacy was the first to focus on systematic problems rather than potential shortcomings of patients. In the National Action Plan, Goal 2 called healthcare organizations into action to “promote changes in the healthcare delivery system.” At the University of Tennessee Medical Center (UTMC), a task force was created in 2016 to assess the organization’s current state of health literacy using the Health Literacy Environment of Hospitals and Health Centers (HLEHH) document. The HLEHH offered a set of tools to measure five aspects of the health care organization that impact patients with low health literacy. The document is comprised of five categories: Print Communication, Oral Communication, Navigation, Policies and Protocol, and Technology.



Percentage of population who lack basic prose literacy by county in the 21 county region

Methods: A rigorous approach was taken to the research project, beginning with applying for and receiving exemption from Institutional Review Board (IRB) and the participation of a statistician in the research design. Each of the five HLEHH tools were applied sequentially to the environment of UTMC. Data for each assessment was collected over a six-month time period and then analyzed by the research team using statistical analysis and qualitative research methods. The scope of the project included the following: analyzing 150 print patient education documents, interviewing 298 patients, feedback from 7 navigators, measuring policies and protocols knowledge of 77 administrators, and assessing technology using an authoritative source.

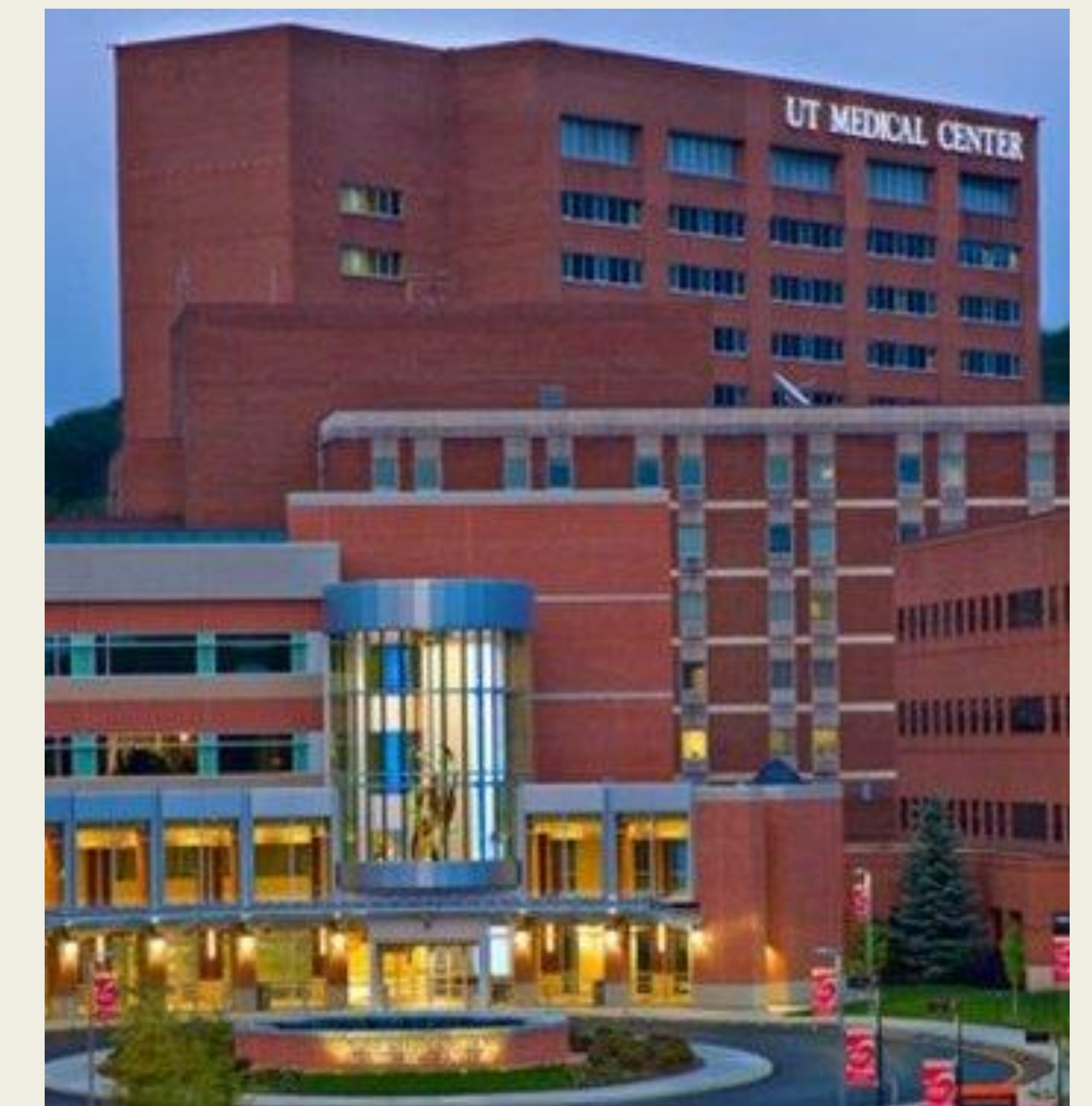
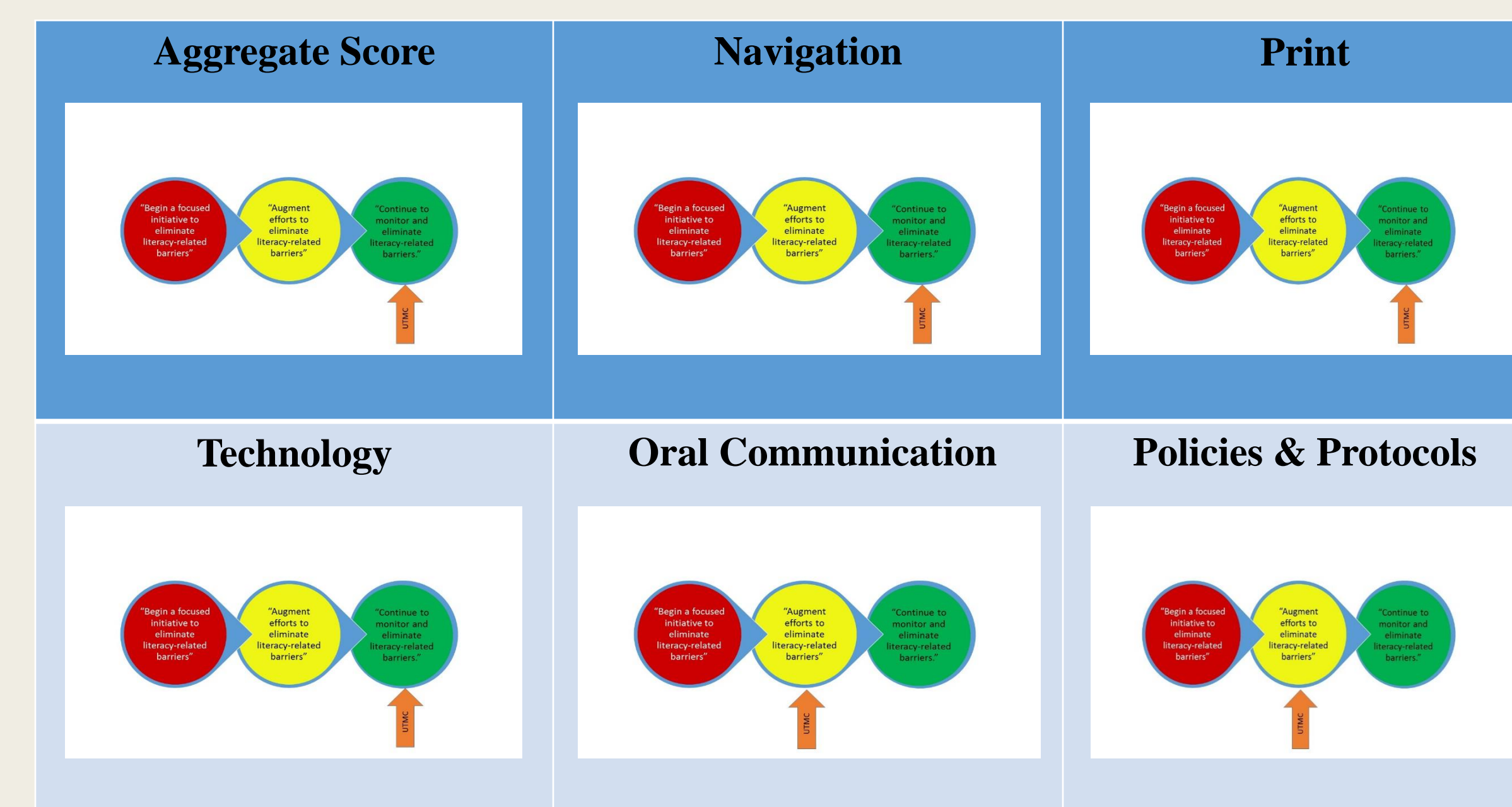
Health Literacy Environment of Hospitals and Health Centers: Rating Tool



The Intersection of Patient Characteristics and Institutional Barriers

Results: Overall, UTMC’s aggregate score ranked in the highest category, with a score of 218.57, which translates to “continue to monitor and eliminate literacy-related barriers.” The individual category scores were as follows: Navigation Rating: 64.71, Print Communication Rating: 53.94, Oral Communication Rating: 16.91, Technology Rating: 47, Policies and Protocols Rating: 36.01.

Health Literacy Environment of Hospitals and Health Centers Scores: UTMC



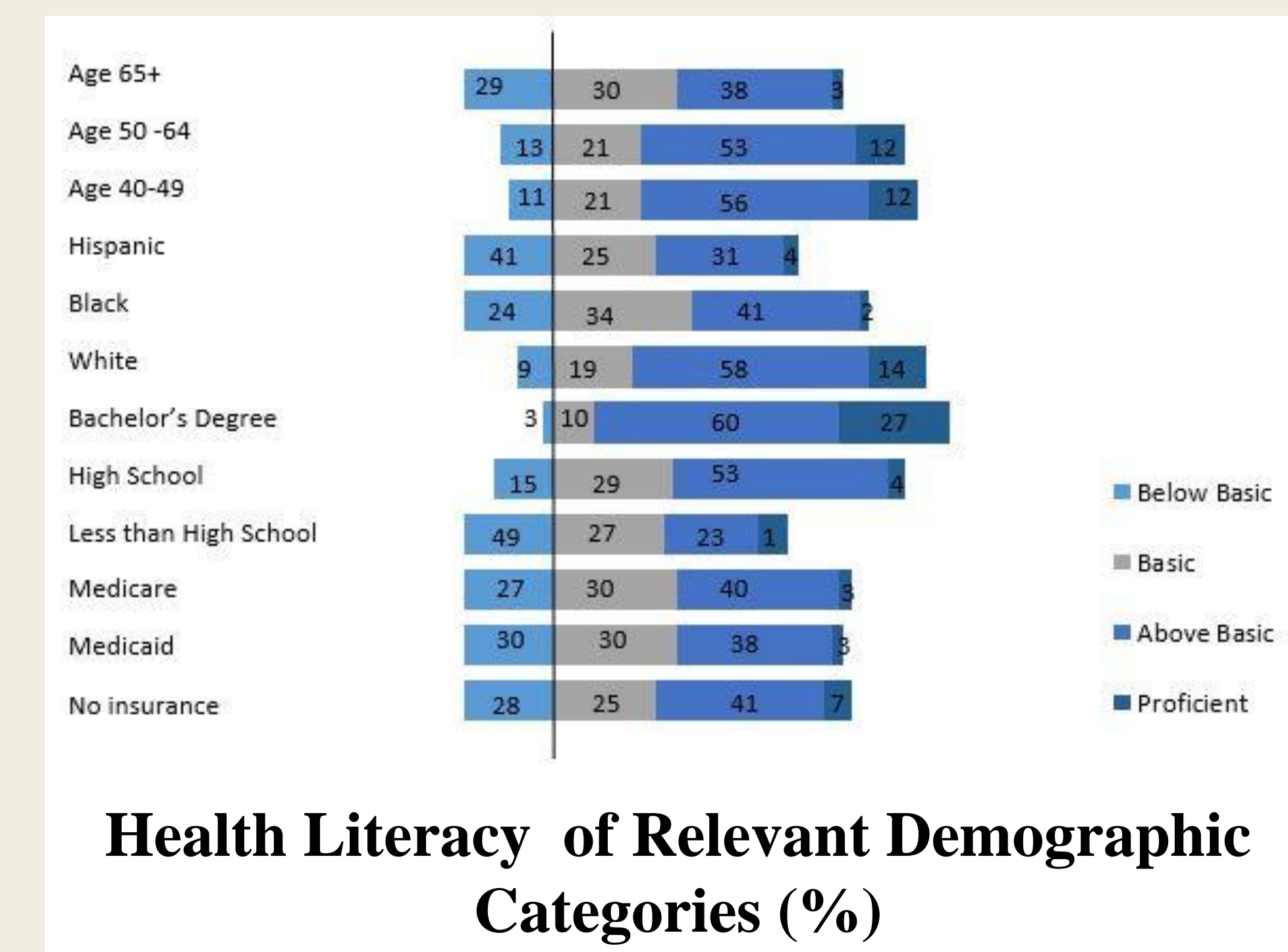
Conclusion: Although three of the ratings scored in the highest category, these ratings were on the lower end of that range. In addition, two categories scored in the middle category indicating opportunity for improvement. Therefore, researchers reviewed each tool on a question by question basis to reveal more granular information on where there are opportunities to improve the health care environment for low health literate patients. These findings will be presented to UTMC administration with recommendations for improvements based on the best evidence to be implemented by 2020.

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Objective: The objective was to implement a targeted health literacy initiative that would serve as a catalyst for promoting changes in the healthcare system at UTMC. In addition, researchers hoped to compare UTMC to the “Ten Attributes of Health Literacy Health Care Organizations,” as proposed in the Institute of Medicine (IOM) Roundtable report.