

# Advancing as a Health Literate Healthcare Organization through Use of the EnLiven Organisational Health Literacy Self-assessment Resource

Mary A. Abrams<sup>1,3</sup>, Rekha R. Voruganti<sup>1</sup>, Janet Berry<sup>1</sup>, Madhurima Sarkar<sup>2</sup>, Patricia F. Rosenstein<sup>1,3</sup>, Daryl J. McLeod<sup>1</sup>, Alexander T. Rakowsky<sup>1</sup>, Deena J. Chisolm<sup>1,3</sup>

Nationwide Children's Hospital<sup>1</sup>, United Nations ESCAP<sup>2</sup>, The Ohio State University Pediatrics College of Medicine<sup>3</sup>

## Background

- Almost 90% of U.S. adults lack proficient health literacy (HL) (Kutner, 2006).
- HL is a dynamic systems issue reflecting the complexity of the health information being presented and care system being navigated (Rudd, 2010; Parker, 2010.)
- Brach, et al describe the *Ten Attributes of Health Literate Health Care Organizations* (HLHCO). Healthcare organizations and systems are in the early stages of identifying and evaluating effective ways to advance as HLHCOs.
- Nationwide Children's Hospital (NCH) established a Health Literacy Task Force (HLTF) to support HL initiatives. The HLTF conducted a baseline assessment using the *EnLiven Organisational Health Literacy Self-assessment Resource* (EnLiven) (Thomacos, 2013) to:
  - Assess the baseline status of NCH as a HLHCO
  - Develop a 3-year strategic plan
  - Formulate a foundation for leadership and resource allocation

## Methods

### Distribution of the EnLiven Assessment

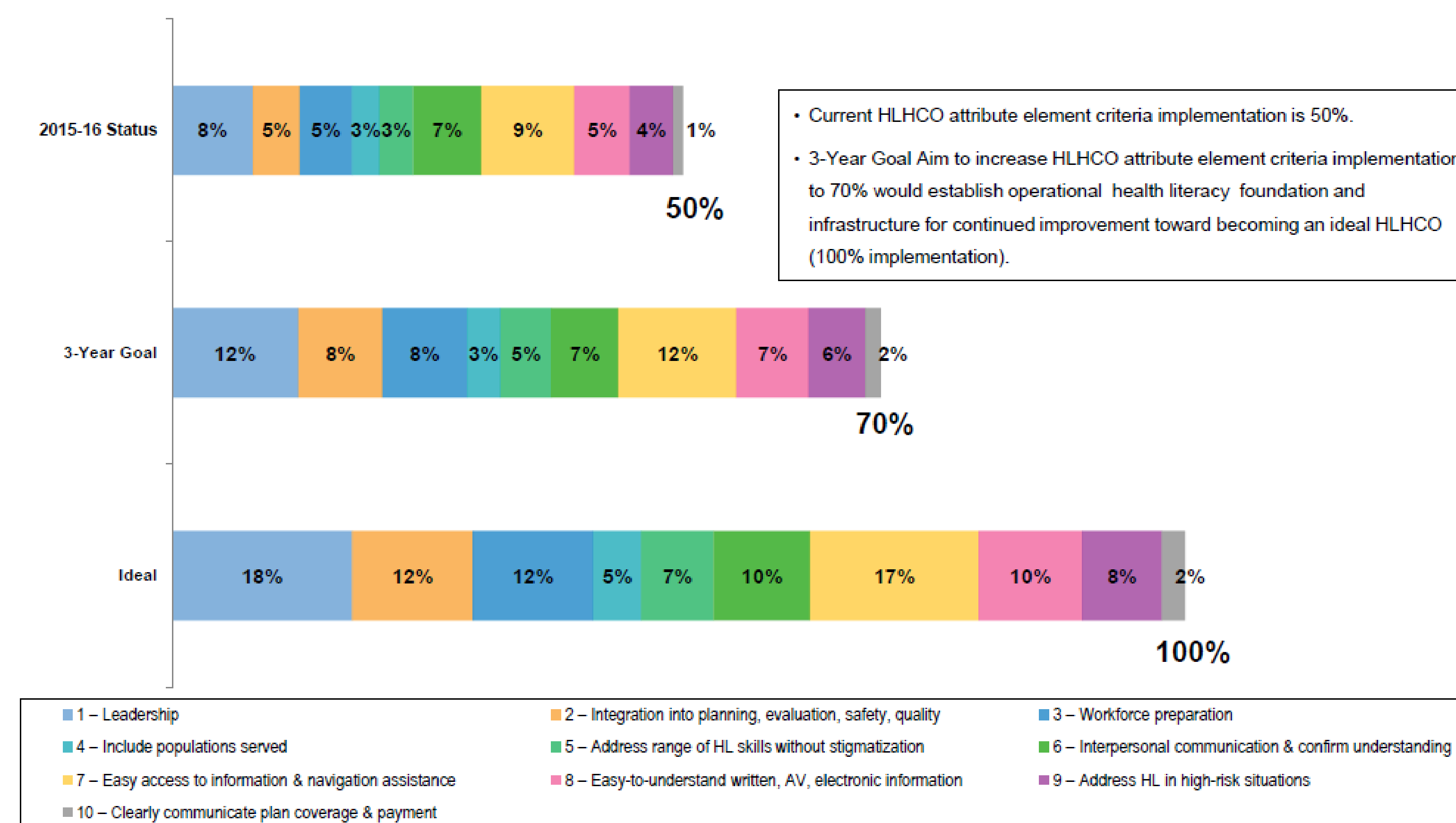
- We identified 30 NCH Key Informants (KIs) from varied administrative, medical staff, and patient care services roles to complete the EnLiven.
- EnLiven operationalizes the 10 attributes of a HLHCO with a set of attribute-specific elements. Respondents were asked if they perceive each element within an attribute to be present at NCH.
- NCH element implementation was considered to be full if  $\geq 70\%$  of KIs reported it as present; partial if 31%-69% of KIs reported it as present; and low if  $\leq 30\%$  of KIs said it was present.

### HLHCO Attribute Implementation

- We used the EnLiven results to evaluate the contribution of the 10 attributes to various HLHCO implementation levels. The percentage contribution of each attribute to a completely-implemented (ideal) (100%) HLHCO was determined by weighting each attribute by the number of EnLiven elements ascribed to it (Figure 1).
- KI responses were used to calculate NCH's current ('15-'16) HLHCO status.
- An added weighted calculation of 70% HLHCO implementation was used to reflect a 3-year goal toward advancing as a HLHCO.

## Results

Figure 1: Nationwide Children's Hospital as a Health Literate Healthcare Organization (HLHCO)<sup>1,2</sup> Weighted Attribute Element Criteria for a HLHCO by Percentage (%) of Implementation



1. Brach C, Keller D, Hernandez LM, et al. Ten Attributes of Health Literate Health Care Organizations. Washington, DC: National Academy of Sciences; 2012. [http://onlinepubs.trn.org/onlinepubs/ten\\_attributes.pdf](http://onlinepubs.trn.org/onlinepubs/ten_attributes.pdf). Accessed: September 27, 2016.  
2. Thomacos N, Zazryn T. (2013). EnLiven Organisational Health Literacy Self-assessment Resource. Melbourne: EnLiven & School of Primary Health Care, Monash University. <http://www.enliven.org.au/sites/default/files/EnLiven%20Health%20Literacy%20Audit%20Resource.pdf>. Accessed: April 22, 2015.

Figure 2: Detailed EnLiven Findings - Example

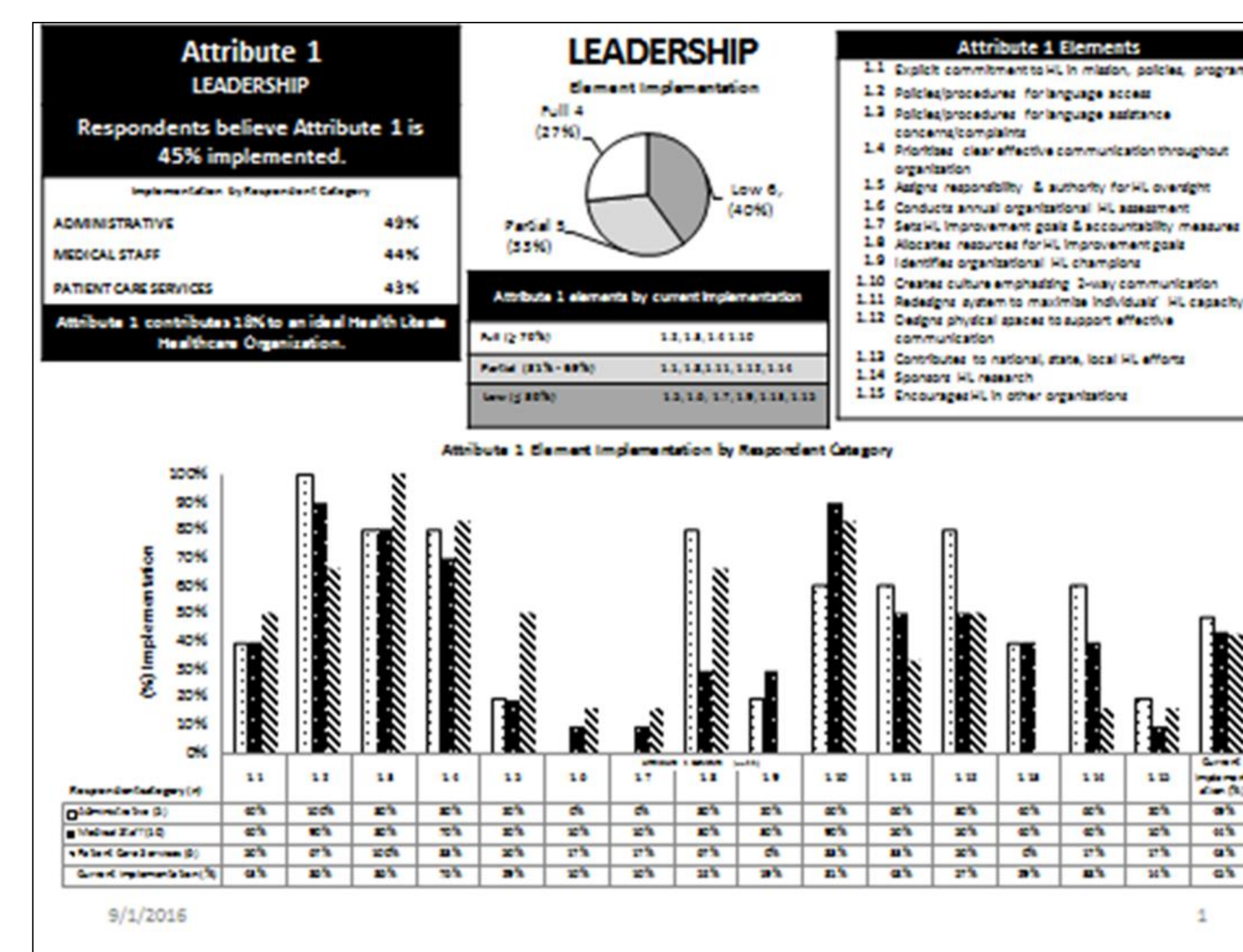
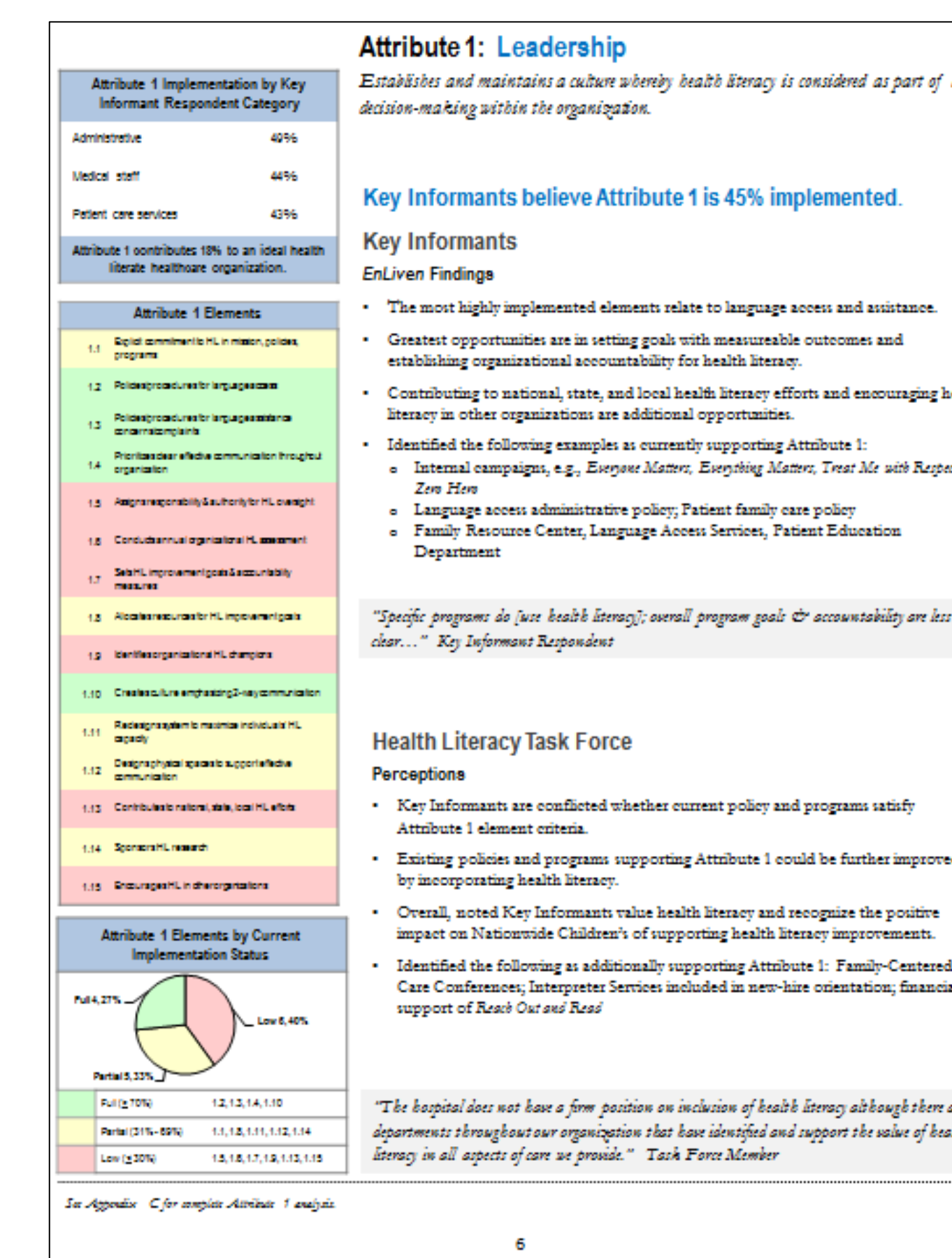


Figure 3: Summary EnLiven Findings - Example



### EnLiven Results

- We had a 70% (21/30) KI response rate (administrative 45% [5/11]; medical staff 100% [10/10]; patient care services 67% [6/9]).
- Based on the KI responses, NCH's current status as a HLHCO is 50%.
- KIs' reported perceptions of attribute implementation averaged 52%. Attribute 6 (interpersonal communication and confirm understanding) was perceived as the most fully implemented (71%), and Attribute 2 (integration into planning, evaluation, safety, and quality) as the least (39%).
- Perception of attribute and element implementation varied by KI category.

### Dissemination of Findings

- Detailed EnLiven findings were presented to the HLTF for each attribute (Figure 2). Summary findings were developed for each attribute (Figure 3):
  - Contribution of attribute to overall HLHCO implementation status
  - Attribute implementation by KI category
  - Attribute element-specific implementation (Full, Partial, Low)
  - Key Informant EOHLR attribute findings: (current implementation status; highly-implemented elements and supports; opportunities to improve; HLTF member perceptions and comments)
- The HLTF developed recommendations to advance NCH as a pediatric HLHCO, aligned with the NCH Strategic Plan.

## Discussion

The EnLiven provides an opportunity to operationalize what it means to be a health literate health care organization.

- It serves as a vehicle for goal-setting, strategic planning, and decision-making around prioritizing activities and allocating resources.
- Implementation is feasible in a pediatric hospital setting.
- It will be practical and useful as a periodic assessment to determine progress and guide activities toward NCH becoming an ideal HLHCO.

## References

Baker DW. The Meaning and the Measure of Health Literacy. *Journal of General Internal Medicine* 21(8):878-883. 2006. Available at: <http://onlinelibrary.wiley.com/doi/10.1111/j.1525-1497.2006.00540.x/abstract>. Accessed: September 30, 2016.

Brach C, Keller D, Hernandez LM, et al. Ten Attributes of Health Literate Health Care Organizations. Washington, DC: National Academy of Sciences; 2012. <http://nam.edu/perspectives-2012-ten-attributes-of-health-literate-health-care-organizations/>. Accessed: September 30, 2016.

Kutner M, Greenberg E, Jin Y, Paulsen C. *The Health Literacy of America's Adults: Results from the 2003 National Assessment of Adult Literacy*. National Center for Education Statistics. U.S. Department of Education. 2006. NCES Publication No. 2006-483. Available at: <http://nces.ed.gov/naal/health.asp>. Accessed: September 30, 2016.

Parker R, Ratzan SC. Health literacy: a second decade of distinction for Americans. *J Health Communication*. 2010;15 Suppl 2:20-33. Available at: <http://www.ncbi.nlm.nih.gov/pubmed/20845190>. Accessed: September 30, 2016.

Rudd RE. Improving Americans' health literacy. *N Engl J Med*. 2010;363:2283-2285.

Thomacos N, Zazryn T. (2013). EnLiven Organisational Health Literacy Self-assessment Resource. Melbourne: EnLiven & School of Primary Health Care, Monash University. (<http://www.enliven.org.au/sites/default/files/EnLiven%20Health%20Literacy%20Audit%20Resource.pdf>) Accessed: September 30, 2016.