

ANNUAL REPORT | FY2019

JULY 2018 - JUNE 2019



UAMS[®]

Center for Health Literacy



Message from Executive Director

This year has been an important one for the Center for Health Literacy (CHL) at the University of Arkansas for Medical Sciences (UAMS). We are proud to report on our fifth year of progress since establishing our mission. The UAMS CHL was conceived to address health literacy training and outreach needs for current and future health professionals in practice. From the beginning, UAMS leadership supported an evidence-based approach to addressing health literacy needs by making research a cornerstone of our practices. Since the UAMS CHL was established in 2014, we have worked with more than 33 researchers from across the country to better understand the impact health literacy has on health outcomes, and have developed and tested interventions to improve those outcomes. Our programs employ these discoveries daily in our work in the health care field and in the community. Additionally, we know we must not only make information easy to understand and use, we must work to improve the skills of the individuals who access that information. Our innovative patient and community engagement programs help meet this need.

In addition to completing another year of a NIH-funded health literacy and diabetes clinical trial, our researchers adapted and tested a shared decision tool for chest pain patients in the Emergency Department, supported a \$24.2 million Clinical and Translational Science Award grant as key contributors to a focus on special populations, and published findings in a broad scope of scientific journals. Our policy team worked with stakeholders across our own UAMS Health system to identify the best source for digital patient education materials most likely to contribute to patient understanding and satisfaction. This process resulted in high-quality, accessible patient education that is easy to understand and is “harmonized” across all of our system’s technology platforms — at a significant annual cost savings. The UAMS CHL program team contributed expertise toward national public health priorities through the development of new materials to limit opioid misuse, facilitate patient decision-making around cancer screening, and support curriculum to promote early learning. Our team also responded to increased demand for Spanish language services. The team translated hundreds of pages of health materials, held focus groups to gain perspective from Spanish speakers, and developed and piloted training to Spanish-speaking health professionals to incorporate plain language practices into their programs.

While expanding our services at UAMS and with our clients around the nation, we continue to receive national attention for our efforts, as evidenced by the receipt of another ClearMark Award of Distinction for the Chemo Treatment Patient Guide we developed with the UAMS Winthrop P. Rockefeller Cancer Institute.

The UAMS CHL is proud to be a part of UAMS and the University of Arkansas System. As we reflect on the last year and chart our path to the future, we continue to align our mission with our institution in the areas of research, education and clinical care. Through a new 10-year institutional strategic plan, UAMS Vision 2029, UAMS CHL will explore new opportunities to serve our health system, the communities in our state, and our partners across the U.S. and Canada through science and outreach. Together, we will achieve our mission of making health information easy to understand and march toward our goals of ensuring better health and health equity for all.

Kristie Hadden, PhD

Executive Director, UAMS Center for Health Literacy



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About the UAMS Center for Health Literacy

Mission

Our mission is to improve society and population health by making health information easy to understand and use.

Vision

Our vision is to become the world's leading source of health literacy research, training, services and outreach to enable providers and consumers of health information to work together to achieve better health.

Core Values

- Better health care and patient experiences
- Improved population and society health
- Lower healthcare costs
- Engaged patients and communities
- Innovative research and education

Key Strategies

To achieve its mission, the UAMS CHL focuses on:

- Empirical and theoretical research to better understand health literacy, how it contributes to health outcomes and evidence for how to improve it.
- Health literacy services for healthcare providers and other professionals to address the critical need of closing the gap between the level of written health information and individuals' abilities to understand and act on it.
- Promoting, through training and consultation, health literacy best practices for providers, organizations and systems.
- Implementing policy initiatives to fully address health literacy across an entire organization.

These objectives are framed by the three arms of the UAMS CHL: health literacy programs and services, health literacy research and health literacy policy initiatives. Key strategies are supported by the University of Arkansas for Medical Sciences and a host of external partners that provide funding through grants, gifts and contracts.

To learn more about our work visit healthliteracy.uams.edu.

Our Experts

Our multidisciplinary team of health literacy researchers, consultants, and practitioners includes experts in:

- Health communication
- Health education
- Health care ethics
- Spanish language interpreting and translation
- Community health



**\$106 BILLION TO
\$238 BILLION**
IN ANNUAL HEALTHCARE COSTS.²



Why Clear Health Communication Matters

Only 1 in 10 adults in the United States has the skills needed to fully understand health information.¹ This results in an estimated cost of \$106 billion to \$238 billion each year to the health care system² and threatens the ability of health-promoting organizations to improve health among individuals and populations.

Poor communication can lead to medication errors, hospital readmissions, unnecessary emergency department visits, skipped screenings and shots, and misinterpretation of treatment plans.² Health literacy challenges are common and are not just found in populations with limited access to education. To reduce demands on the patient or consumer, it is critical that all health professionals consider health literacy as they create and deliver any communication — written, spoken or digital. Those who serve patients and communities can also help individuals improve their own skills in understanding and using health care communications.

The UAMS CHL recognizes the critical link between health literacy and health and we work with people across health care and public health systems to provide patient and consumer information that:

- Is easy to access, understand and act upon
- Promotes self-engagement in one's health
- Results in better health outcomes
- Reduces unnecessary costs

¹Berkman ND, Sheridan SL, Donahue KE, Halpern DJ, Crotty K. Low health literacy and health outcomes: An updated systematic review. *Ann Intern Med* 2011;155(2):97-107.

²Vernon JA, Trujillo A, Rosenbaum S, DeBuono B. *Low health literacy: Implications for national health policy*. Washington, DC: Department of Health Policy, School of Public Health and Health Services, The George Washington University; 2007.

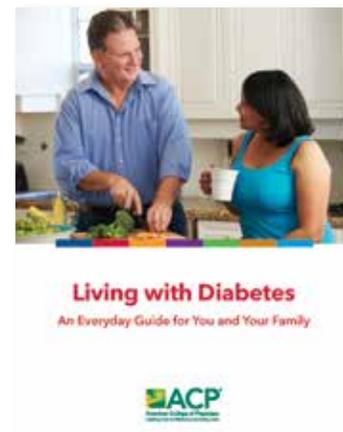
How We Impact Health

Health Communication Research

The UAMS CHL conducts innovative research on how addressing health literacy can improve health outcomes. This work is reflected in our 11 research publications this year, and the continued scholarly engagement of a group of more than 30 affiliate faculty from across the nation and many disciplines.

Health Literacy Based Diabetes Education Delivered to Rural Patients

Our four-year National Institutes of Health (NIH) National Institute of Diabetes and Digestive and Kidney research continued this year. This R01 grant titled Health Literacy Intervention to Improve Diabetes Outcomes among Rural Primary Care Patients aims to determine the best way to deliver diabetes education and coaching to patients in rural areas. We are testing evidence-based, patient-centered, low literacy diabetes self-care education that includes a guide created by the American College of Physicians (ACP). Clinic health coaches review the ACP guide with patients and provide telephone and in-person follow up for one year. Our study will test how this health literacy-based intervention affects patient diabetes outcomes (Hemoglobin A1c, diabetes knowledge). Early results show that the intervention is being delivered with high fidelity (completing three- and six-month interviews, meeting with health coaches, and maintaining quality of counseling) in rural primary care clinics in Arkansas.



Chest Pain Decision Aid Reduces Hospital Admissions

Over the last year our researchers have worked with partners in the UAMS Emergency Department (ED) to test the effectiveness of a health-literate chest pain decision aid. The tool was adapted by our team of health literacy experts and field tested with patients with limited health literacy. The purpose of the aid is to help low-risk patients who come to the UAMS ED with chest pain to understand their risk for having a heart attack and to facilitate shared decision-making with their physicians. Using the teach-back method to confirm understanding, doctors engaged patients in conversation. Our findings revealed that patients who used the tool with their physicians were significantly more likely to understand their risk and less likely to be admitted compared to those who received standard care and communication.

Updated Informed Consent Template for Research Includes Required Common Rule Language

Informed consent is an essential part of research, but often, potential and current study participants do not fully understand consent materials. This creates barriers for potential participants to join studies, and those who do join may not fully understand what they are agreeing to do. UAMS CHL has developed a template for investigators to use to create easy-to-understand informed consent documents for research. The template improved the overall readability level of nearly all the IRB-approved, investigator-initiated consent forms at UAMS in 2017. In January 2019 the Revised Common Rule was released and UAMS CHL collaborated with members of the UAMS Institutional Review Board and other stakeholders to update the template. This project focused on adding the newly required components such as the “key information” section to the existing template. Our plain language team lent its expertise to ensure this information was provided in plain language. The team also tested the new language with individuals (including those at risk for limited health literacy) in a focus group session, using published methodology for field testing.

Researchers can find this updated template on the UAMS CHL website: healthliteracy.uams.edu/health-literacy-research/resources.



UAMS CHL Affiliate Faculty Peer-Reviewed Publications (July 2018-June 2019)

In Press

Washburn, L., **Hadden, K., Prince, L., McNeill, C., & Moon, Z.** (In Press). Development and Implementation of the How to Talk to Your Doctor HANDbOOK Health Literacy Program in Rural Counties. *Health Literacy Research and Practice*.

Prince, L., Mears, S., **Watson, J. & Hadden, K.** (In Press). Health literacy evaluation of opioid patient education materials for orthopaedic surgery. *Journal of Surgical Orthopaedic Advances*.

Hadden, K., Martin, R., Prince, L., & Barnes, L. (In Press). Patient health literacy and diabetic foot amputations. *Journal of Foot and Ankle Surgery*.

Published

Hadden, K., Prince, L., Rojo, M., Selig, J., & McElfish, P. (2019). Screening Patients Who Speak Spanish for Low Health Literacy. *Health Literacy Research and Practice*, 2019;3(2):e110-e116. doi: <https://doi.org/10.3928/24748307-20190408-03>.

McNeill, C., Washburn, L., **Hadden, K., & Moon, Z.** (2019). Evaluating the Effectiveness of the How to Talk to Your Doctor HANDbOOK Program. *Health Literacy Research and Practice*, 2019;3(2):e103-e109. doi: <https://doi.org/10.3928/24748307-20190404-01>.

Haller, J., Keller, Z, Barr, S., **Hadden, K.,** Oliphant, S. (2019). Assessing Readability: Are Urogynecologic Patient Education Materials at an Appropriate Reading Level? *Female Pelvic Med Reconstr Surg*. 2019 Mar/Apr;25(2):139-144. doi: 10.1097/SPV.0000000000000653.

Spencer, J., **Hadden, K.,** Brown, H., Oliphant, S. (2019). Considering Low Health Literacy: How do the PFDI-20 and PFIQ-7 Measure Up? *Female Pelvic Med Reconstr Surg*. 2019 Mar/Apr;25(2):145-148. doi: 10.1097/SPV.0000000000000672.

Gray SA, **Zraick RI, Atcherson SR.** (2019) Readability of Individuals with Disabilities Education Act (IDEA) part B procedural safeguards: An update. *Language, Speech, and Hearing Services in Schools*. https://doi.org/10.1044/2018_LSHSS-18-0057. doi: 10.1044/2018_LSHSS-18-0057.

Watson, J. (2019) Talking the Talk: Enhancing Clinical Ethics with Health Literacy Best Practices. *HEC Forum*. doi: 10.1007/s10730-019-09369-5.

Abou-Diab, S., Moser, D.C., & **Atcherson, S.R.** (2019). Evaluation of the readability, validity, and user-friendliness of written web-based patient education materials for aphasia. *Aphasiology*, 33:2, 187-199, DOI: 10.1080/02687038.2018.1458069.

Watson, JC (2018): What Experts Could Not Be, *Social Epistemology*, 33:1, 74-87, DOI: 10.1080/02691728.2018.1551437. ePub ahead of print



How We Impact Health

Impacting the Quadruple Aim through Improved Communication

Screening Patients for Limited Health Literacy Across the Health System

Patient health literacy screening information can be used by health systems to address all four areas of the quadruple aim: better patient care, better health of populations, care-team satisfaction and lower costs. At UAMS we use a combined approach that includes both health literacy best practices for all patients (universal precautions) as well as an integrated health literacy screener in our electronic medical record. This approach better insures that universal precautions (e.g., staff training in use of plain language and teach-back) are applied as a safety net for all patients and screening is used to identify patients at greater risk. This will help us serve both population and individual patient needs, especially for those patients who may need significant resources beyond universal precautions. Identifying patients with inadequate health literacy prompts health care professionals to provide point-of-care teaching in ways patients can understand for those who need it most. Our researchers are studying the process and benefits of using a validated health literacy screening question to provide an additional reminder to use the health literacy best practices with those who are at risk for struggling with health information.



Digital Patient Education Review Improves Consistency and Quality, Reduces Costs

UAMS CHL led a project that aimed to refine the selections of digital patient education available. An internal exploration revealed that, like many large institutions, we had multiple subscriptions to purchased electronic patient education libraries. The aims of this project were to limit duplication and therefore lower costs, and to provide high-quality information to improve patient and provider satisfaction and improve patients' ability to engage in self-care.

To help identify the materials that would be most likely to contribute to patient understanding and satisfaction, UAMS CHL's plain language team conducted formal assessments of English and Spanish language samples from several purchased collections.

We assessed readability as well as understanding and ability of reader to act with validated formulas and tools including the validated Patient Education Materials and Assessment Tool. Our findings provided the interdisciplinary team with data to support their selection process. An immediate result of this work generated institutional cost savings of over \$150,000 over the next five years.

Patient Communication Whiteboards Get Health Communications Makeover

Toward a sustained focus on integrating health literacy into patient- and family-centered care at UAMS, CHL co-led a new pilot project to improve communication between patients and health care providers using existing inpatient room whiteboards. With input from patient advisors and clinical personnel, UAMS CHL developed scripting and trained staff on a large medical-surgical unit to introduce the boards to all new patients and encourage them to use it. The project resulted in increased use of the boards by both patients and hospital staff, and both patients and nurses responded (through surveys and interviews) that the whiteboards were a helpful tool to facilitate communication with each other.

Updated Tool Eliminates Barriers in End of Life Planning

Advance directives serve as an important communication tool between health care providers and patients; yet, many people do not have advance directives because they are not sure where to get one, how to fill it out, or what it really means. And when they do have them, it is often difficult for health care providers to locate completed copies in the electronic medical record and thus be able to carry out the wishes of the patient. This year, UAMS CHL joined a workgroup with other leaders to update the existing UAMS advance directive forms and instructions to be more readable, understandable and actionable.

The purpose of this project was to eliminate patients' barriers to filling out advance directives and streamline access to the forms at UAMS. The project was a collaborative effort that required innovative content creation, plain language editing and feedback from a variety of stakeholders at UAMS including patient advisors, clinical ethics, nursing, legal, IT, and many parts of patient care. The new forms are patient friendly and reflect the combined expertise (clinical, legal and ethical) of the team at UAMS CHL. These forms are available in English and Spanish and are available in Epic, MyChart, the UAMS website (uamshealth.com), and other online access points.

How We Impact Health

Promoting Health Equity through Clarity in Health Communication

Only four out of 100 Spanish-speaking individuals have proficient skills to navigate the U.S. health care system and use health information to improve their health. UAMS CHL has made it a priority to help this rapidly growing population improve their health through our Spanish language services to make health information more accessible.

Demand Increases, UAMS CHL Expands its Spanish Language Services

After fully launching Spanish plain language writing and editing services last year, UAMS CHL expanded those services this year with two major offerings: field testing of health materials with Spanish-speaking audiences and health communications training delivered entirely in Spanish. Similar to the field testing sessions we conduct in English, the purpose of the interactive focus groups in Spanish is to get feedback on health materials to ensure they are readable, understandable and actionable. Our new Spanish focus groups include an additional objective: ensuring that cultural perspectives are considered in the development and planned implementation of written materials.

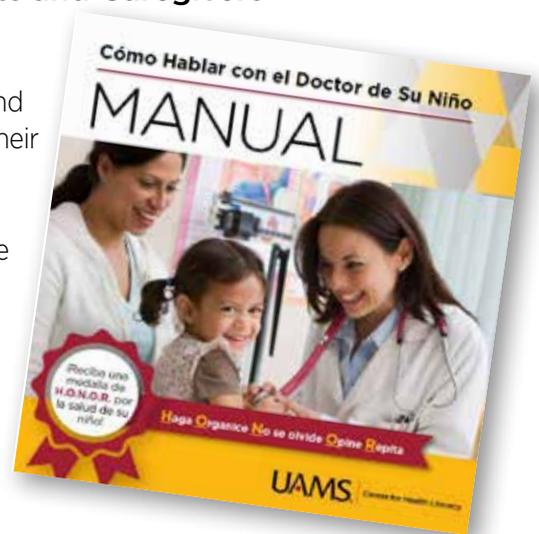
Given the continued growth in the U.S. Hispanic population and the persistent health disparities that exist in this group, there is tremendous need for effective Spanish language health education programming. Bilingual professionals who provide health information to Spanish speakers can use plain language best practices as they translate and deliver health content. UAMS CHL bilingual staff who are experts in both plain language and community engagement now host training for these frontline practitioners. The training is offered entirely in Spanish and provides an introduction to clear health communication and offers take-aways to improve communication between the professionals and the Spanish-speaking communities they serve.



New Tool in Spanish Reduces Language Barriers for Parents and Caregivers

Also this year, UAMS CHL experts translated, adapted and field tested the existing English guide, How to Talk to Your Child's Doctor, into Spanish. This new tool will make a positive impact on the community by helping parents and caregivers who only speak Spanish know what to do to get the most out of their child's doctor visit.

Most importantly, it will help minimize the language barrier many Hispanic parents have so they can get the most from their child's doctor visit and place the focus on their child's well-being.



How We Impact Health

Contributing to National Priorities through Clear Communication

The UAMS CHL has been engaged by a number of internal and external partners during the past year to improve a variety of materials to help patients and community members navigate the health care system and improve their own health. We developed, assessed, edited or translated health materials on from dozens of medical specialties on range of topics from injury prevention, kidney health, stroke prevention and oral health:

Opioids and Pain Management in Older Adults Addressed through New Community Education Tool

The opioid epidemic is recognized by public health experts across the globe. While many worthwhile efforts focus on safe prescribing, monitoring and rescue medications, many clinicians recognize the persistent need for complementary patient and community education. In alignment with previous work with the UAMS Orthopaedic Surgery Department to encourage limited use of opioid medications among surgical patients, CHL partnered with a statewide geriatric education collaborative to develop a new tool aimed at helping older adults manage chronic pain safely.

Help with Your Chronic Pain was developed with input from subject matter experts and vetted by older adults, including those with limited health literacy. Older adults with chronic pain often require complex pain management plans that include opioid use, so the new tool equips them with considerations for taking opioids and a host of alternative pain management strategies to discuss with their doctors. Similarly to many of our patient- and community-facing tools, the new material includes static content as well as workbook-style pages to encourage action. Complementary facilitator guides promote widespread use of the new materials by lay persons who are interested in impacting their communities around this key public health issue.



New Patient Guide Supports Shared Decision-Making around Cancer Screening

National cancer control strategies place significant emphasis on appropriate screening, yet for some patient populations and cancers there is evidence to support more than one screening approach. In our health system, a team of clinical providers established a protocol to support shared decision-making around mammography frequency for women in their 40s at average risk for breast cancer. To support these patients in understanding their values and preferences and to guide them in discussions with their providers, CHL developed and field tested a patient decision aid. The resulting material (available in English and Spanish) is easy to read and was vetted by community participants including those with demonstrated limitations in understanding health information. Future goals include development of additional decision aids for other screening and treatment programs to support shared decision-making when appropriate, to encourage true patient engagement.

Early Learning Promoted through Collaboration with National Home Instruction Program

Recognizing the connection between health and education, CHL was invited by HIPPIY USA to contribute plain language expertise to the development of a new HIPPIY for Little Learners curriculum. This new programming will reach thousands of families of 2-year-old children across the country through weekly in-home teaching and parent-led activities.

CHL edited materials in English to ensure plain language best practices were incorporated, and led the translation of the materials into Spanish. The resulting curriculum is readable, understandable and actionable for parents and home visitors.



Impacting Health Communication in Arkansas, the United States, and Beyond

This year our health literacy services reached across the U.S. and to Canada and Poland.



New Provider Education Offered during Health Literacy Month Activities

For Health Literacy Month in 2018, UAMS CHL worked to create an enduring educational product that will last beyond the month of October.

We developed and distributed posters to be hung in clinic break rooms that informed dental and health care professionals about the importance of using plain language.

With the help of our sponsor, Delta Dental, we developed and distributed over 1,500 posters throughout Arkansas and the United States.



Trudeau on FDA Risk Communication Committee

UAMS CHL Associate Professor, Chris Trudeau, J.D., was invited to serve a four-year term on the U.S. Food and Drug Administration's advisory committee on risk communication.

The Risk Communication Advisory Committee, created in 2007, advises the commissioner of Food and Drugs on ways to effectively communicate with the public about the risks and benefits of FDA-regulated products, allowing people to make more informed decisions. The committee also reviews and evaluates the FDA's and other entities' research related to the risks and benefits of those products.

Cancer Treatment Guide Wins International Award

The UAMS CHL was honored with a ClearMark Award of Distinction in the Before and After: Print category for our Chemo Patient Guide Template. This award, given by the Center for Plain Language, recognizes the best plain language communication created by organizations throughout North America. UAMS CHL created the Chemo Patient Guide Template in partnership with clinicians at the UAMS Winthrop P. Rockefeller Cancer Institute.

Chemo Patient Guides help cancer patients who are about to start a new chemo treatment understand what to expect during the treatment. Clinicians requested that UAMS CHL create a template for the guides, to ensure all (300+) current guides and future guides are written in plain language. Writers used plain language principles to draft the template content and field tested a sample guide with groups of patients and community members to ensure it was readable, understandable and actionable. The impact of this new guide template is significant; it can be adapted for any chemotherapy drug for any cancer patient.



ClearMark Award team from left to right: *Alison Caballero, UAMS CHL director of programs, Dr. Laura Hutchins, UAMS Cancer Institute interim director, Sarah Council, UAMS Cancer Institute research writer, Jamie Watson, UAMS CHL plain language writer, Katie Leath, UAMS CHL program administrator, Kristie Hadden, UAMS CHL executive director*

Impactful Training for Health Professionals and Students

UAMS CHL offers training on a variety of health communications topics, and this year we reached more than 2,500 individuals who communicate health information to patients and the public. Our faculty guide and deliver instruction across the academic enterprise, reaching students in the colleges of medicine, nursing, public health, pharmacy and health-related professions. Faculty also integrate health literacy and health communication into the Interprofessional Education curriculum across its phases of exposure, immersion and competency to train students in the skills required for effective interdisciplinary communication designed to improve patient care. Examples of professional training offered during the year included plain language writing, clear communication with Hispanic patients and families, numeracy best practices for dieticians, and the role of clear health communication behavior change programs.



UAMS[®]

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