

Health literacy strategy and action plan 2020-2024

Our story

Sunshine Coast Hospital and Health Service (the health service) is the major provider of public health services, health education and research in the Sunshine Coast, Gympie and Noosa local government areas. The health service covers approximately 10,000 square kilometres, stretching from Gympie in the north, south to Caloundra and out to Kilkivan in the west.

By 2030, the region's population is expected to increase by 36 per cent. Within our region there are various health needs¹ including, but not limited to:

- socioeconomic disadvantage, low school completion rates and developmentally vulnerable children within the Gympie community
- high rates of smoking (Gympie)
- risky alcohol consumption
- overweight and obesity
- low vaccination rates (Maleny, Nambour, Pomona, Noosa)
- high rates of homelessness (Nambour and Gympie)
- high rates of preventable hospitalisations for asthma (Nambour, Gympie, Caloundra)
- increasing rates of alcohol and other drug-related deaths
- increasing rates of suicide and mental health concerns.

With this in mind, Sunshine Coast Hospital and Health Service is committed to improving everyone's experience of healthcare through:

- providing health consumer information that is easily understood and supports people's increased knowledge, empowerment and self-management of their own conditions.
- developing the skills and capabilities of the health workforce to improve communication with patients to assist them to better understand the treatment options and care requirements.

This document outlines health literacy initiatives to reduce barriers and to improve the health outcomes of all residents within Sunshine Coast Hospital and Health Service.

What is health literacy?

Health literacy is defined as how well people can obtain, communicate, process and understand health information and services to make appropriate health decisions². Health literacy is important because it shapes people's long-term health outcomes and the safety, quality and cost of the care they receive³.

Health literacy helps consumers:

- find the right services and doctors
- manage their own health conditions
- get to the places and appointments they need
- take medication safely
- fill out health forms and access their health information online via My Health Record
- share their medical history with their healthcare team
- understand how risky behaviours affect their health
- follow advice about how to look after their health.

The National Health Survey: Health Literacy, 2018⁴, shows that one-third of

Australians (33 per cent) found it always easy to discuss health concerns and actively engage with their healthcare providers. This means many Australians find it difficult to navigate the health systems and to discuss their conditions with healthcare providers. Low health literacy is associated with poorer quality of life for consumers, poor health care experience and low health consumer satisfaction with service.

Studies have shown a correlation between health literacy and a number of socioeconomic factors, including educational attainment, financial position and ethnicity⁵. In the Sunshine Coast region, nearly 36 per cent of our region falls in the lowest two quintiles of socio-economic disadvantage. For more than 56 per cent of the health service region, the highest level of schooling is Year 11 or 12, and almost five per cent reported their highest level of schooling was Year 8 or below (or did not go to school)⁶. In terms of chronic disease, across the health service's three local government areas there were higher rates of mental and behavioural disorders, heart, stroke and vascular disease and asthma compared to Queensland. In Gympie there were higher rates of Type 2 Diabetes, heart, stroke and vascular disease, asthma, COPD and arthritis compared to Noosa and Sunshine Coast LGAs⁷.

In 2018-2019, 479 consumer concerns raised with Sunshine Coast Hospital and Health Service were related to a communication breakdown or a lack of understanding about their healthcare plans and/or conditions. People with low health literacy have difficulty:

- understanding written and spoken information given by healthcare providers
- following directions, understanding and acting on health information such as procedures, discharge information and spoken instructions
- navigating the healthcare system including locating services and providers
- filling out complex health forms and giving informed consent
- communicating and sharing medical history with healthcare providers
- attending appointments and following medication and treatment schedules
- taking preventive health measures such as immunisation or cancer screening
- managing chronic health conditions⁸.

Enhancing health literacy

The health service is committed to being person-centred which means being respectful of and responsive to the preferences, needs and values of patients, colleagues and the wider community; it is understanding and valuing people for who they are. Our Patient Experience, and Consumer and Community Engagement (PEACCE) strategy outlines how we will do this.



Ten attributes of a health literate organisation

The Australian Commission on Safety and Quality in Health Care (ACSQHC) recommends 10 attributes of a health literate organisation⁶. These organisational attributes (outlined below) help consumers to find, understand and act upon information and services provided to take care of their health.

Key area/s	Ten attributes of a health literate organisation
Embed health literacy into systems	<ol style="list-style-type: none"> 1. Has leadership that makes health literacy integral to its mission, structure and operations 2. Implementing policies and procedures supporting health literacy action and including health literacy in program planning
Ensuring effective communication	<ol style="list-style-type: none"> 3. Meets the needs of consumers with a range of health literacy skills while avoiding making assumptions about individual health literacy levels 4. Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact 5. Designs and distributes print, audio visual and social media content that is easy to understand and act upon 6. Includes consumers in the design, implementation and evaluation of health information and services 7. Communicates clearly the costs that funding schemes may cover (e.g. Medicare, private health insurance) and what individuals may have to pay for services 8. Addresses health literacy in high risk situations, including care transitions and communications about treatment and medicines 9. Provides easy access to health information, services and navigation assistance
Integrating health literacy into education	<ol style="list-style-type: none"> 10. Prepares the workforce to be health literate and monitors progress

1. Central Queensland, Wide Bay, Sunshine Coast PHN Needs Assessment 2018: https://www.ourphn.org.au/wp-content/uploads/20190408-2019-22-HNA_FINAL.pdf
 2. Australian Commission on Safety and Quality in Health Care 2014, National statement on health literacy: taking action to improve safety and quality. December 2014.
 3. ibid
 4. National Health Survey: Health Literacy, 2018, Australian Bureau of Statistics, <https://www.abs.gov.au/ausstats/abs@.nsf/Latestproducts/4364.0.55.014Media%20Release1002018?opendocument&tabname=Summary&prodno=4364.0.55.014&issue=2018&num=&view=>
 5. Trezona, A., Dodson, S. & Osborne, R.H. Development of the Organisational Health Literacy Responsiveness (Org-HLR) self-assessment tool and process. BMC Health Serv Res 18, 694 (2018). <https://doi.org/10.1186/s12913-018-3499-6>
 6. ABS 2033.0.55.001 Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia, 2016
 7. Social Health Atlas of Australia – Queensland, Data by Local Government Area, Public Health Information and Development Unit, Torrens University, 2019
 8. Barrett, S, E (2010) Health Literacy: What Does It Mean for Informed Choice and Patients' Rights? Presentation given at the Diversity In Health 2010 Conference, Melbourne, Australia June 8, 2010.
 9. HEALTH LITERACY: Taking action to improve safety and quality, Australian Commission on Safety and Quality in Health Care <https://www.safetyandquality.gov.au/sites/default/files/migrated/Health-Literacy-Taking-action-to-improve-safety-and-quality.pdf>

Health Literacy Action Plan

Key area/s	Actions
Embed health literacy into systems	<ul style="list-style-type: none"> • Establish working group to ensure implementation of the framework • Explicit commitment to health literacy is included in key statements about the health service's purpose • Resources are allocated to meet health literacy needs • Promote and support accountability for health literacy improvement at facility / service level • Involve consumers at a departmental level in quality improvement activities, review and evaluation of patient information brochures and in the planning, design and redesign of services • Identify officers within departments/service groups who can act as health literacy champions • Implement and follow procedure for developing and reviewing patient information publications • Communicate procedure for developing and reviewing patient information publications to clinicians and health service staff. • Ensure all patient publications are reviewed by the Patient Publication Review Group • Development, endorsement and communication of the Health Literacy Strategy and Action Plan
Ensuring effective communication	<ul style="list-style-type: none"> • Ensure use of interpreter service • Design surveys and patient feedback processes that are understandable and easy to complete • Provide patient safety and quality information about services in ways that are understood by the community • Use consumers, patients and family members to review and provide feedback on health information which is patient focussed. • Gather feedback on services and evaluate services delivered • Ensure feedback mechanisms are clear and easy to understand • Provide alternatives to written information (pictures, diagrams, models, audio-visual demonstrations) where possible, and create an environment that does not impose high literacy demands • Use multiple platforms to provide information to people including social media • Endorse a plain English guideline for developing patient information including readability tools • Develop and implement "teach back" training • Provide tools for staff to measure individual patient understanding • Ensure the availability of health literacy tools for staff – such as tools which measure individual patient understanding of health information • Monitor trends in patient groups to ensure information is suitable • Use easily understood symbols and language on signage • Provide the community with tools to enable adequate way-finding such as maps, apps and other support • Provide consumer-focused information about facilities and services • Develop websites which are easy to navigate and informative • Develop a robust and easy to follow process for the development of patient information publications (intranet site) • Develop templates for patient information publications following best practice in font, design, colour and image use • Provide staff access to readability tools • Identify high risk situations (such as medication management and transfer of care) and develop and implement plans of actions to ensure safe • Communicate information regarding any out of pocket expenses for health care services before they are delivered • Provide consumers with information that is relevant, understandable and aligns with their patient journey. • Encourage and support the involvement of consumers in the co-design of all consumer-focused publications • Ensure any and all communication with consumers (including outpatient letters) is developed in a manner that is understandable to consumers • Embed Choosing Wisely projects such as shared decision making in emergency department, antimicrobial stewardship and cardiology outpatients discharge principles throughout the health service
Integrating health literacy into education	<ul style="list-style-type: none"> • Incorporate health literacy into the health service's orientation program and ensure all staff have attended orientation • Provide staff health literacy training • Build awareness of health literacy by discussing with staff or arranging an in-service • Implement an awareness campaign for all staff on health literacy • Make health literacy resources easily accessible • Promote a culture where consumers and clinicians can engage in open and transparent two-way conversations leading to well-informed shared decision making • Develop opportunities for staff regarding the importance of effective communication with consumers to enable informed preferences and decision making for their health circumstances • Embed 'Hello my name is' program throughout the health service • Further develop and implement customer service training which covers health literacy, communication technique and addresses barriers to effective communication • Promote current education resources available