Primary Care Health Literacy Assessment

Please select **one answer** that most accurately describes your practice:

Doing Well Our practice is doing this well

Needs Improvement
Our practice is doing this, but could do it better
Our practice is not doing this

Not Doing Our practice is not doing this

Not Sure <u>OR</u> N/A I don't know the answer to this question <u>OR</u>

This is not applicable to our practice

| 1. | Prepare for Practice | Chang | e | | | |
|----|--|---------------|---------------------------|-----------|--------------------|--|
| | | Doing Well | Needs Improve- ment | Not Doing | Not Sure or N/A | Tools to Help |
| 1. | Our health literacy team meets regularly. | | | | | 1-Form Team |
| 2. | Our practice regularly re-assesses our health literacy environment and updates our health literacy improvement goals. | | | | | 2-Create a Health Literacy Improvement Plan 13-Welcome Patients |
| 3. | Our practice has a written Health Literacy Improvement Plan and collects data to see if objectives are being met. | | | | | 2-Create a Health Literacy Improvement Plan |
| 4. | All staff members have received health literacy education. | | | | | 3-Raise Awareness |
| 5. | All levels of practice staff have agreed to support changes to make it easier for patients to navigate, understand, and use health information and services. | | | | | 3-Raise Awareness |
| 6. | All staff members understand that limited health literacy is common and can affect all individuals at one time or another. | | | | | 3-Raise Awareness |
| 7. | Our Health Literacy Team understands how to implement and test changes designed to improve performance. | | | | | 2-Create a Health Literacy Improvement Plan |

2. Improve Spoken Communication

| | | Doing Well | Needs Improve- ment | Not Doing | Not Sure or N/A | Tools to Help |
|-------|--|---------------|---------------------------|-----------|--------------------|--|
| 8. | All staff members speak clearly (e.g., use plain, everyday words and speak at a moderate pace). | | | | | 4-Commun. Clearly |
| 9. | All staff members listen carefully to patients without interrupting. | | | | | 4-Commun. Clearly |
| 10. | All staff members limit themselves to 3-5 key points and repeat those points for reinforcement. | | | | | 4-Commun. Clearly |
| 11. | All staff members use audio/video materials and/or visual aids to promote better understanding (e.g., food models for portion sizes, models of body parts, instructional health videos). | | | | | 4-Commun. Clearly 12-Use Health Ed. Material Effectively |
| 12. | Our practice ensures patients have the equipment and know-how to use recommended audio-visual materials and Internet resources. | | | | | 12-Use Health Ed. Material Effectively |
| 13. | All clinicians talk with patients about any educational materials they receive during the visit and emphasize the important information. | | | | | 12-Use Health Ed. Material Effectively |
| 14. | All staff members ask patients to state key points in their own words (i.e., use the teach-back method) to assess patients' understanding of information. | | | | | 5-Teach-Back Method |
| 15. (| Clinicians routinely review with patients all the medicines they take, including over-the-counter medicines and supplements, and ask patients to demonstrate how to take them. | | | | | 8-Brown Bag Review 5-Teach-Back Method |

2. Improve Spoken Communication

| | | Doing Well | Needs Improve- ment | Not Doing | Not Sure or N/A | Tools to Help |
|-----|---|---------------|---------------------------|-----------|--------------------|--|
| 16. | Our practice routinely provides patients with updated medicine lists that describe in easy-to-understand language what medicines the patient is to take and how to take them. | | | | | 8-Brown Bag Review |
| 17. | Our practice trains patients to use our patient portal. | | | | | 12-Use Health Ed. Material Effectively |
| 18. | Staff members contact patients between office visits to ensure understanding or to follow up on plans made during the visit. | | | | | 6-Follow up |
| 19. | Staff members assess patients' language preferences and record them in the medical record. | | | | | 9-Language Differences 13-Welcome Patients |
| 20. | Our practice always uses appropriate language services (e.g., trained medical interpreters, trained bilingual clinicians, materials in other languages) with patients who do not speak English very well. | | | | | 9-Language Differences |
| 21. | When staff members give directions for finding the office, they refer to familiar landmarks and public transportation routes as needed. | | | | | 7-Telephone |
| 22. | If there is an automated phone system, one option is to speak with a person. | | | | | 7-Telephone |
| 23. | Our practice is able to respond to phone calls in the main languages spoken by our patients. | | | | | 7-Telephone |
| 24. | Staff members offer everyone help (e.g., filling out forms, using patient portal) regardless of appearance. | | | | | 12-Use Health Ed. Material Effectively 13-Welcome Patients |

3. Improve Written Communication

| | | Doing Well | Needs Improve- ment | Not Doing | Not Sure or N/A | Tools to Help |
|-----|--|---------------|---------------------------|-----------|--------------------|--|
| 25. | At least one staff member knows how to assess, prepare, and simplify written materials so they are easier to read. | | | | | 11- Assess, Select, and Create Easy-to- Understand Materials |
| 26. | Our practice gets patient feedback on written materials. | | | | | 11- Assess, Select, and Create Easy-to- Understand Materials I 17-Patient Feedback |
| 27. | Our practice assesses whether written materials are easy to understand. | | | | | 11- Assess, Select, and Create Easy-to- Understand Materials |
| 28. | Our practice's patient education materials are concise, use plain language, and are organized and formatted to make them easy to read and understand. | | | | | 11- Assess, Select, and Create Easy-to- Understand Materials |
| 29. | If appropriate, our written materials are available in languages other than English. | | | | | 9-Language Differences |
| 30. | Our practice's forms are easy to understand and fill out, and collect only necessary information. | | | | | 11- Assess, Select, and Create Easy-to- Understand Materials |
| 31. | Lab and test results letters are concise, use plain language, and are organized and formatted to make them easy to read and understand (e.g., avoid the use of "positive" or "negative" results). | | | | | 11- Assess, Select, and Create Easy-to- Understand Materials |
| 32. | The name of the practice is clearly displayed on the outside of the building, and signs are posted throughout the office to direct patients to appropriate locations (e.g., practice entrance, restrooms, check-in, check-out, lab, etc.). | | | | | 13-Welcome Patients |

3. Improve Written Communication Needs Doing Improve-**Not Sure** Tools to Well ment **Not Doing** or N/A Help 33. The walls and bulletin boards are not covered with too many printed 13-Welcome П П notices. It is easy for anyone to **Patients** pick out the important information. 34. Office signs use large, clearly visible lettering and plain, everyday words such as "Walk-13-Welcome In" and "Health Center" rather **Patients** than formal words such as "Ambulatory Care" or "Primary Care Practice." 35. Office signs are written in English and in the primary languages of 13-Welcome the populations being served (e.g., **Patients** if most of the patients speak English or Spanish, signs are written in English and Spanish). Improve Self-Management and Empowerment Needs Doing **Not Sure** Improve-Well ment **Not Doing** or N/A Tools to Help 36. Our practice creates an environment that encourages our 13-Welcome Patients patients to ask questions (e.g., 14-Enc. asking "What questions do you **Questions** have?" instead of "Do you have 15-Make Action any questions?") and get involved Plans with their care. 37. Clinicians help patients choose health improvement goals and 15-Make Action **Plans** develop action plans to take manageable steps toward goals. 38. Clinicians consider their patients' religion, culture, and ethnic 10- Consider Culture customs when devising treatment options. 39. Our practice follows up with 6-Follow up patients to determine if their action 15-Make Action **Plans** plan goals have been met.

4. Improve Self-Management and Empowerment

| | Doing Well | Needs Improve- ment | Not Doing | Not Sure or N/A | Tools to Help |
|---|---------------|---------------------------|-----------|--------------------|---|
| 40. Clinicians write precise instructions for taking medicine that are easy-to-understand (e.g., "take 1 pill in the morning and 1 pill at bedtime" instead of "take twice daily"). | | | | | 16-Help Patients with Medicine |
| 41. Staff members discuss different methods for remembering to take medicines correctly and offer patients assistance setting up a system (e.g., pill box, medicine chart). | | | | | 16- Help Patients with Medicine |
| 42. Our practice requests feedback from patients. | | | | | 11-Assess, Select, and Create Easy-to- Understand Materials 17-Patient Feedback |

5. Improve Supportive Systems

| | Doing Well | Needs Improve- ment | Not Doing | Not Sure or N/A | Tools to Help |
|---|---------------|---------------------------|-----------|--------------------|---|
| 43. Staff members assess patients' ability to pay for medicines. | | | | | 19-Medicine Resources |
| 44. Staff members connect patients with medicine assistance programs, including helping them fill out applications as needed. | | | | | 19- Medicine Resources |
| 45. Staff members assess patients' non-medical barriers and take initiative to address them and provide appropriate referrals or extra support as needed. | | | | | 18-Non-Medical Support |
| 46. Staff members ask patients if they have trouble reading or understanding and using numbers. | | | | | 20-Literacy Resources |
| 47. Our practice maintains an up-to-date list of community resources and refers patients as needed. | | | | | 18-Non-Medical Support 20-Literacy Resources |

5. Improve Supportive Systems Needs **Not Sure** Doing Improve-Well ment **Not Doing** or N/A **Tools to Help** 48. Staff members help patients access 20-Literacy adult literacy and math programs. Resources

| 49. Our practice shares important referral information (e.g., reason for referral, pertinent medical history, test results) directly with other health care clinicians. | | | 21- Referrals |
|---|--|--|--|
| 50. Staff members offer patients help with referrals, such as making an appointment. | | | 18-Non-Medical Support 20-Literacy Resources 21- Referrals |
| | | | 6-Follow up |

51. Staff members confirm patient follow through after a referral is made.