

Introduction/Background

Healthy People 2030, has included “attaining health literacy to improve the health and well-being of all” as one of its five overarching goals (1).



Healthy People 2030 defines Health Literacy as:

- Personal health literacy is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

Only 12% of literate Americans are proficient in health literacy (2). This alarming statistic underscores the potentially huge impact of poor health literacy on patient outcomes.

Decreased health literacy can lead to serious consequences, including increased hospitalizations, longer stays, difficulty managing chronic conditions, medication errors, emergency room utilization, and increased mortality (3). These outcomes underscore the severity of the issue and the urgent need for action.

Aims

1. Define health literacy and its importance to outcomes.
2. Define and practice using plain language in perianesthesia.
3. Define and practice using teach-back in perianesthesia.

Methods

Design: Pre/post survey design to evaluate education intervention.

Setting: Perianesthesia Service Line at HonorHealth Scottsdale Shea Medical Center, Scottsdale, Arizona.

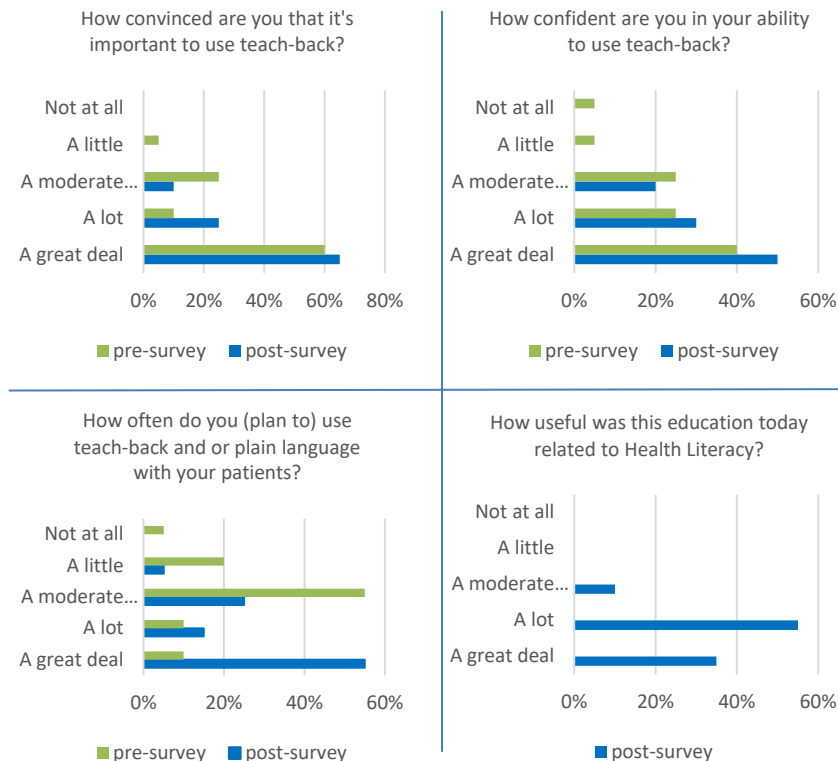
Sample: 15 RNs trained as health literacy champions. 38 pre-op, PACU, and endoscopy staff receiving health literacy training. 20 (53%) completed pre/post education intervention surveys.

Tools: Pre/post education intervention, 5-question voluntary survey.

Intervention

A two-hour train-the-trainer course was conducted for 15 Health Literacy champions among preoperative, postoperative, and endoscopy nurses. These champions conducted several 30-minute classes on Health Literacy competency for 38 of their PCT, RN, and Endo Tech peers. The 30-minute training sessions defined Health Literacy and the “why” behind the education. Participants created a list of words used in their daily practice (hypertension, emesis, edema, etc.) and practiced replacing medical terms with plain language (high blood pressure, vomiting, swelling). Staff also practiced using teach-back with real-life scenarios.

Results



Results & Discussion

Of the 38 staff participating in the health literacy training, 20 (53%) completed voluntary pre/post-surveys. A positive increase between the pre/post-survey answers was noted.

When asked, *How useful was this education today related to Health Literacy?* 35% said extremely useful, 55% said very useful, and 10% said somewhat useful.

Comments:

- “Good information. I will most definitely implement this in my practice.”
- “Great reminder about the patients we serve and that not everyone is how they “appear” r/t education level, etc.”
- “It is a good reminder to break information down in plain language and ask the patient to explain back to make sure they understand.”
- “Perfect! Short and sweet yet effective.”

Health Literacy Resources

<https://www.ahrq.gov/health-literacy/index.html/>

<https://teachbacktraining.org/>

<https://www.cdc.gov/healthliteracy/index.html>

<https://www.healthliteracysolutions.org/home>

References

1. <https://health.gov/healthypeople/priority-areas/health-literacy-healthy-people-2030>
2. Rasu, R. S., Bawa, W. A., Suminski, R., Snella, K., & Warady, B. (2015). Health Literacy Impact on National Healthcare Utilization and Expenditure. *International journal of health policy and management*, 4(11), 747–755. <https://doi.org/10.15171/ijhpm.2015.151>
3. Coughlin, S. S., Vernon, M., Hatzigeorgiou, C., & George, V. (2020). Health Literacy, Social Determinants of Health, and Disease Prevention and Control. *Journal of environment and health sciences*, 6(1), 3061.