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Do You Have CLAS?
Building Infrastructure for Health Literacy
in an Academic Medical Center

WI Health Literacy Summit,
April 2017

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Disclosure Statement

Speakers have no relevant financial interest

Objectives

Participants of this session will be able to:

1. Identify strategic steps for development of a patient education committee
2. Describe strategies to incorporate the CLAS Standards into standard work at a large academic medical center
3. Identify methods to incorporate the CLAS Standards in their own organizations

University of Chicago Medicine (UCM)



- **The University of Chicago Medical Center**
 - Center for Care and Discovery
 - Bernard Mitchell Hospital
 - Comer Children's Hospital
 - Duchossois Center for Advanced Medicine
- **University of Chicago Pritzker School of Medicine**
- **Biological Sciences Division**
 - Knapp Center for Biomedical Discovery
 - Gordon Center for Integrated Sciences



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AT THE FOREFRONT OF MEDICINE®

History of Patient Education at UCM

Variability in:

- Access to Resources
- Maintenance of Resources
- Quality of Resources



Changing Landscape for Patient Education

Interest in optimizing use of standardized vendor resources: 2012

- Micromedex Carenotes printed materials
- GetWellNetwork education videos

Establishment of the Diversity, Inclusion and Equity Department: 2013

- Manager for Education and Training
- Health Literacy Program Manager and Health Literacy Consultant

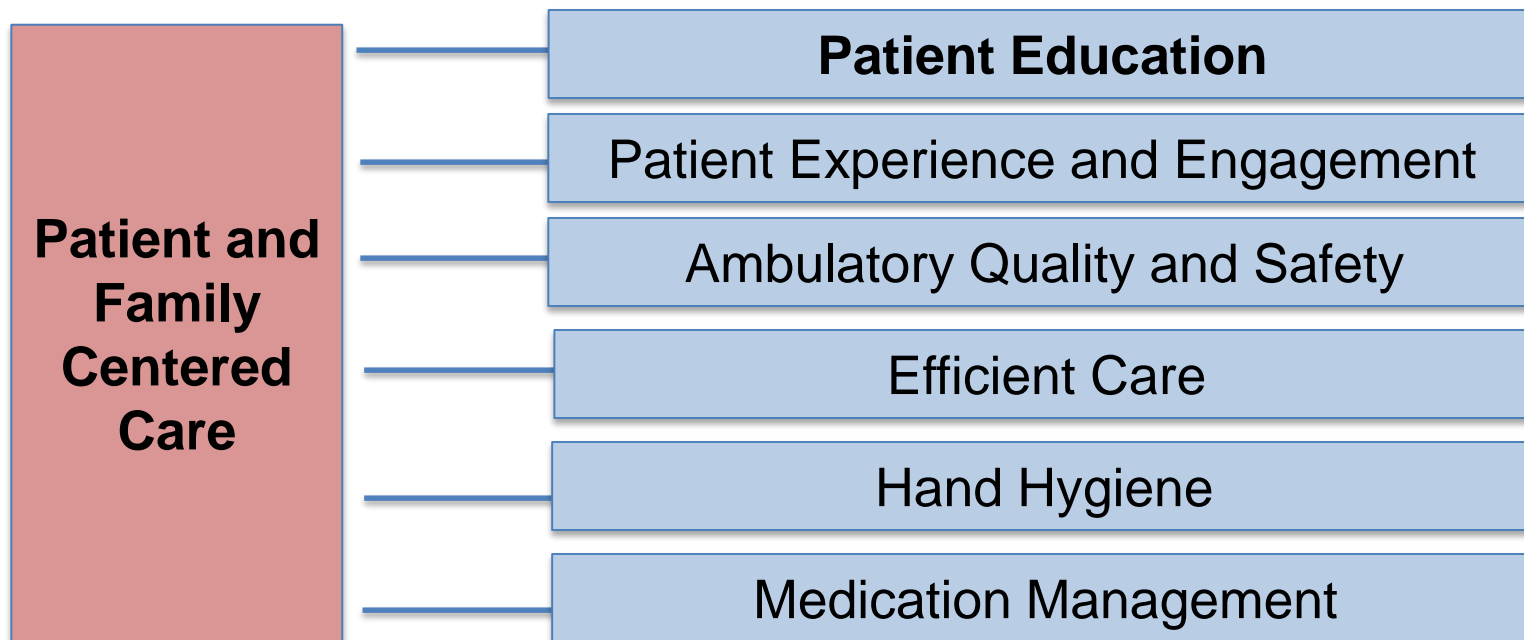
Inauguration of the Medical Center Diversity and Equity Committee: 2014

- CLAS Standards adopted for organization
- Sub-committees
 - Education and Training
 - Policy
 - Data

Birth of the Patient Education Committee

Interdisciplinary Patient Education Committee and Advisory Group formed in support of the UCM Annual Operating Plan to improve patient outcomes and strategic initiatives for diversity and inclusion

Fiscal Year 2016 (FY16) Patient Care Services Strategic Plan:



Patient Education Committee Membership

Co-Chairs: Katherine Pakieser-Reed, PhD, RN, Executive Director, Center for Nursing Professional Practice and Research (CNPPR); Brian Callender, MD, Assistant Professor of Medicine, Section of Hospital Medicine; Susan Murphy, BSN, MS, RN, Chief Experience and Innovation Officer, Patient Experience and Engagement

Department	Member activity	Role
CNPPR (Marina De Pablo)	active	Clinical Nurse Educator
Case Management	active	Manager, Out-Patient
Center for Business Information Systems	ad hoc	Executive Director
Communications and Marketing	active	Senior Communications Specialist
Diversity, Inclusion and Equity	active/active	Director/Health Literacy Program Manager
International Programs	ad hoc/ad hoc	Director/Manager of Interpreting Services
Patient Experience & Engagement	active	Director
Pharmacy	active	Manager, Clinical Pharmacy
Purchasing/Supply Chain	active	Executive Director
Therapy Services	active/ad hoc	Assistant Director, In-Patient/Director
Respiratory Therapy	ad hoc	Director
Clinical Nutrition	Vacant spot	

Advisory Panel: **Brenda Battle**, BSN, MBA, RN, Vice President, Urban Health Initiative and Chief Diversity and Inclusion Officer; **Valerie Press**, MD, MPH, FACP, Assistant Professor, Section of Hospital Medicine

Strategic Plan: Patient Education Committee

Overall Objective:

Maximize value of health literate patient-centered education resources to engage and inform patients, families, and care partners and impact outcomes.

4 Year Development Plan

FY16

Establish a multidisciplinary committee working group to understand the current state of patient education delivery at UCM

FY18

Develop and recommend institutional structure for Patient Education at UCM

FY17

Develop recommendations for patient education processes and resources

FY19

Establish permanent oversight structure for Patient Education at UCM

Culturally and Linguistically Appropriate Services Standards (CLAS)

Principal Standard: Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

Governance, Leadership, and Workforce (points 2, 4)

Leadership promotes CLAS through:

- Policy
- Practice
- Allocated resources
- Workforce training

Communication and Language Assistance (points 5-8)

- Inform patients and offer language assistance
- Ensure competence of interpreters
- Provide health literate materials

Engagement, Continuous Improvement, and Accountability (points 9,10,13)

- Infuse CLAS goals into planning and operations
- Include CLAS in quality improvement
- Partner with community members to assess services

(OMH, 2013)

www.ThinkCulturalHealth.hhs.gov

FY16 Committee Objectives

- Conduct baseline assessment of organization for patient education
- Benchmark patient education best practice of comparable institutions
- Raise awareness about existing educational resources and standards

Patient Education Survey

Patient Education Strategies and Tools Survey, Fall 2015

Purpose: Understand how patients receive health education at UCM

Audience: Medical Center and Biological Sciences Division directors, clinical chiefs, patient care managers, and advanced practice nurses

Key survey questions:

Delivery of patient education through:

- Written handouts
- Verbal communication
- Audiovisual materials
- Other electronic documents

Extent of use of:

- Teach-back
- Interpreting services
- Translation services
- Health literacy review

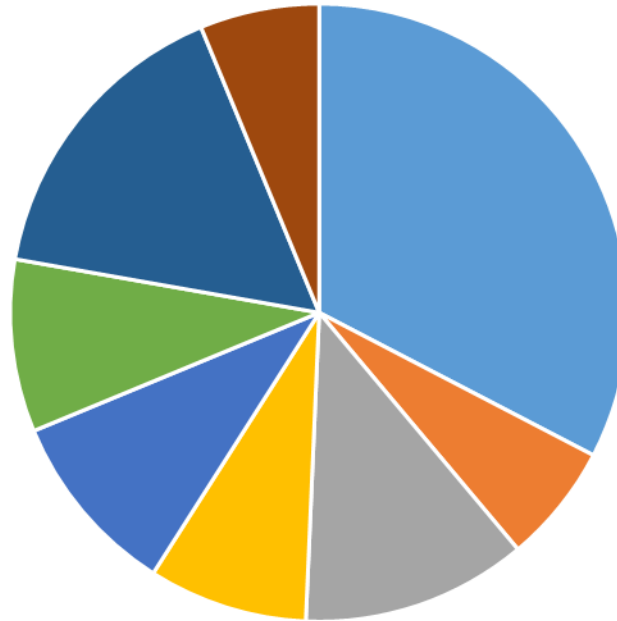
Who delivers education

Challenges and best practices

Patient Education Strategies and Tools Survey

Reported Barriers to Patient Education

- Lack of time
- Lack of training
- Language
- Patient literacy
- Literacy level of materials
- Language of materials
- Lack of materials
- Other



Survey Results

61 respondents; 25% response rate

Written education:

- + Written handouts used by most
- Less than 50% documents health literacy screening
- + 76% Have documents in languages other than English
- 12% Never use patient documents in other languages

Verbal education:

- + 91% Interpreting services used
- 15% Family members, other staff used for interpreting
- + 72% Teach-back used at least sometimes
- 9% Not familiar with teach-back

Video education: - only 20% use videos to deliver patient education

Respondent recommendations for improving patient education:

- Development of online education resources for patients
- Consistent translation of discharge instructions to primary language of the patient
- Standardized education resources across the system and resources to review educational materials

Survey of External Organizations

Collect benchmarking data on patient education from comparable institutions.

Key questions addressed:

- Organizational structure for patient education
- Measurement of patient education value
- Sources of patient education materials
- Staff development for delivering patient education

Findings:

- Increase in focus on health literate content and a
- Trend to consolidate and standardize patient education materials

Next steps: Continue to investigate through on-going benchmarking

Patient Education Sharepoint Site



Patient Education Resources and Tools

EDIT LINKS

Search this site

Patient Education Resources and Tools

Home

Commonly Used Resources

Contacts

Policies

Committee Working Documents

Site Contents

EDIT LINKS

Welcome to the Patient Education Resources and Tools Directory

This site centralizes access to UCM's patient education policies and guidelines, and information on commonly used patient education resources and tools.

The site was created and is maintained by the UCM **Patient Education Committee**. The interdisciplinary committee and advisory group formed in 2015 to improve patient outcomes through through health literate patient-centered education.

Please refer to the following sections to:

1. Ensure the education materials used in your department adhere to [UCM guidelines](#)
2. Locate [commonly used education resources](#) available to all staff

Note: this landing site is not an exhaustive listing of educational materials used across the enterprise.

Commonly Used Resources and Tools

Web-based printable documents

- [Micromedex Carenotes](#)
- [Mosby Skills](#)
- [Nutrition Care Manual](#)
- [Nutrition Care Manual - Pediatric](#)
- [UpToDate](#)

Video and Interactive Content

- [GetWellNetwork - Adult Education Videos](#)
- [GetWellNetwork - Pediatric Education Video](#)
Login: KidsHealth Password: GWN
- [Patient Education Channel](#)

Web Based Information and Videos

- [StayWell Health Library](#)
Providers are unable to print document from distributor.

UCM Sites

- [Campus Maps](#)
- [Diversity and Inclusion Intranet Site](#)
- [Language Translation and Interpreting](#)
- [Translation Request Form](#)
- [UCM Intranet](#)
- [UCM Internet](#)

Standard Work

E3 Leadership Engage. Evolve. Excel.



Implement Patient Education Standard Work

Translation services:

- Revision of policy for translation
- Collaboration with health literacy for plain language review
- Creation of translation request form

Health literacy services:

- Collaboration with multiple departments and services
- Incorporation of IOM's "10 Attributes of Health Literate Health Care Organizations" into Patient Education Committee activities

GetWellNetwork: Health literacy review

Patient Advisory Boards: Consultation

Marketing and Communication: Standardization of branding

New Territory for Patient Education Committee – FY17

FY17 Key Objectives:

- Include patient perspective into patient education
- Pilot assessment of patient education based on “10 Attributes of a Health Literate Health Care Organization”
- Assess current vendor resources for patient education
- Increase awareness among leadership about patient education
- Increase awareness of patient education resources and best practices among providers and staff

Include Patient Perspective in Patient Education



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Heart & Vascular Center
Patient and Family Partnership Council

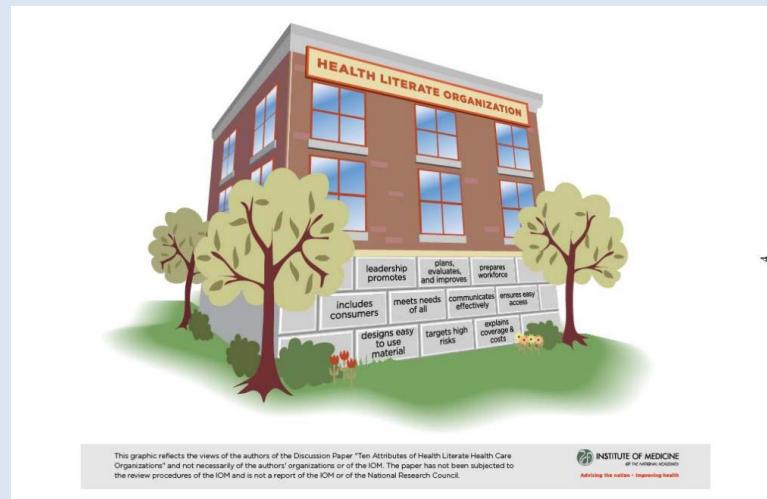


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Pilot Assessment: 10 Attributes of a Health Literate Organization

Partnership with Diversity, Inclusion, and Equity Department:

- Identify biggest gaps in health literacy in organization
- Compile evidence for budget request for centralized patient education programming
- Developed assessment tool based on 10 Attributes document
- Patient Education Committee members completed assessment as preliminary gap assessment of organization



(Brach, C.,2012)

Create Standard Work – Vendor Resources

Partnership with Supply Chain: Adapt vendor scorecard and assess current vendor contracts for patient education

Adapting new standard purchasing scorecard to use for patient education resources

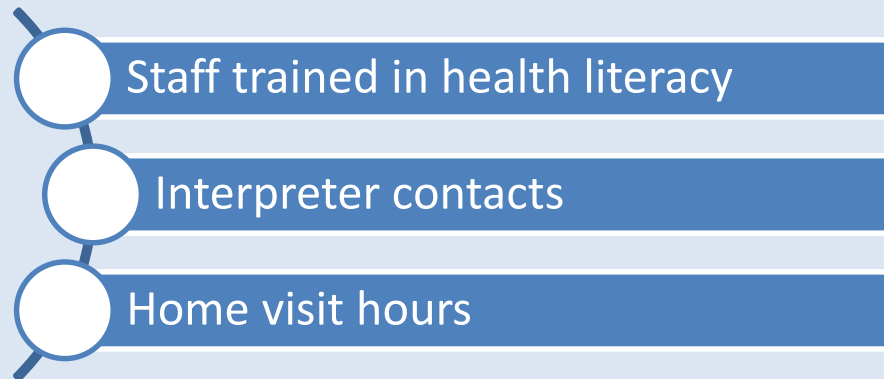
Goals:

- Incorporate CLAS standards criteria into scorecard
- Improve quality of patient education resources across care continuum
- Increase consistency of materials
- Streamline process!
- Save money!

Increase Visibility – Patient Education Metrics

Goal: Increase visibility to leadership of how patient education is being delivered across the organization

- Patient Education Committee asked to identify available metrics on how patient education is being delivered in their departments
- Development of quarterly Patient Education Metric Scorecard



- Identification of gaps in accessibility to clinical metrics
- Future goal: Collaborate with IT department to build into Epic system

Increase Visibility - Partnership with Marketing

- Develop communication plan in partnership with Patient Education Committee member from Marketing and Communication
- Institute new “Did you know?” column in monthly e-communication to clinical staff to highlight patient education resources and tools

Goals:

- Increase awareness and use of:
 - Patient Education Sharepoint site
 - Patient Education policy
 - Guidelines and resources for plain language translation
 - Translation request form
 - Education and training resources
 - And more!



Next Steps for UCM

FY18:

- Develop proposal for permanent patient education oversight structure and resourcing
- Develop proposal for centralized patient education repository
- Develop recommendation for standard work for patient education
 - New materials
 - Existing materials
 - Delivery of patient education
 - Interprofessional collaboration
 - Patient perspective

Group Work

**What do you have now?
What would you like to have?
What are next steps for your organization?
What success stories can you share?**

References

Brach, C., et al, Institute of Medicine, National Academies, (2012). Ten Attributes of Health Literate Health Care Organizations. Retrieved from:http://www.ahealthyunderstanding.org/Portals/0/Documents1/IOM_Ten_Attributes_HL_Paper.pdf

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Thank you!

What questions do you have?

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