

Community Healthcare Network At a Glance

- Community Healthcare Network (CHN)
- 11 not-for-profit Federally Qualified Health Centers in New York City
- 75,000 patients seen annually
- 500+ employees

C: Communication

Communication - Send health literacy (HL) messaging via multiple groups within organization.

- Lesson One - Organizations with multiple locations need health literacy supporters at each site to deliver health literacy messages.
- Lesson Two - Groups chosen to lead the HL culture change must have members from all levels of the organization to get employee buy-in.
- Recommendation - Use a variety of communication vehicles (trainings, meetings, newsletters, committees, and more) to share health literacy messages across the organization.

A: Action

Action - Visible and consistent action by management is needed to execute culture change.

- Lesson One - The CEO/President must support and help implement the culture change.
- Lesson Two - Partner with key leaders in the organization to create policies and accountability measures requiring employees to integrate HL strategies into their work.
- Recommendation: Leaders must hold staff accountable to implement HL policies and strategies.

R: Recognize

Recognize-Recognize and internally publicize employees who support health literacy.

- Lesson One-Employees who have received intensive training in health literacy strategies, regardless of title, must identify and recognize other employees.
- Lesson Two-Make nominations easy, and set criteria and a rubric to judge nominations.
- Recommendation: Implement a recognition program to incentivize employee buy-into the culture change.

E: Education for Everyone

Education for Everyone - From finance to front desk, all employees must do HL training.

- Lesson One-One size does not fit all: Each department needs Customized HL training.
- Lesson Two-HL training has to be creatively fit into medical providers' schedules.
- Recommendation-A one-time HL training will not change an organization's culture. The organization needs to provide continued HL skills-based training for all employees.

Why change CHN's culture?

- CHN began using electronic medical records in 2008.
- The Chief Medical Officer (CMO) ran reports on patients' health and noted that even with suitable medical interventions, CHN's patients were still sick.
- The Director of Health Education advised her that part of the solution was stronger patient education and engagement using a health literacy framework.

C: Communication - Outcomes

- CHN Health Literacy Representatives Team- Representatives at CHN's 11 sites share health literacy updates at the monthly clinic meetings. This has given a "face" at the clinic level for the culture change.
- CHN established a Patient Communications Committee (PCC) to review written patient materials (education and marketing materials, letters, consents, etc.) monthly. The committee includes medical and administrative staff who received intensive training on evaluating patient materials for HL principles. The committee has evaluated 45 materials to date.
- CHN redesigned its flyers advertising CHN's services and programs to incorporate health literacy principles; content must be Grade 5 - 8 reading level.

A: Action - Outcomes

- The CEO wrote about the importance of CHN's Health Literacy (HL) Initiative in the December 2011 employee newsletter. She reinforces her message when speaking to employees at all levels of CHN.
- The CEO supported establishing mandatory HL training for all new employees. New staff must attend HL training during their first 90 days of employment. 80% of new hires have completed this training.
- CHN administrators approved two new policies for patient marketing and education materials. The policies require the PCC and/ or the HL Program Manager to review all patient education materials for HL principles. The HL Program Manager and the marketing department must approve all marketing materials. Materials that do not receive HL approval cannot be used.
- Directors enforcement of the policy within their teams has significantly increased the number of materials reviewed.

R: Recognize - Outcomes

- Health Literacy Champions Program - Launched in 2012, this program recognizes employees for using health literacy strategies in their job. The PCC, Health Literacy Task Force, and senior administrators nominate employees by submitting a paragraph describing an example of how the nominee used health literacy strategies. The PCC chooses the recipient using a rubric. Two employees received the award to date.

E: Education for Everyone - Outcomes

- All staff attended an organization - wide webinar on Health Literacy in 2009.
- 53% of staff attended CHN's Health Literacy Overview training between May 2011 and April 2012. 80% of staff will be trained by December 2012. The human resources department is using plain language as a communications strategy.
- To get medical providers trained on HL, we had to find where we fit in their schedules. The solution: train the providers over a three-month period with a combination of online modules and assessments as well as face-to-face training at their department meetings.

First Steps of Culture Change

- In 2008, completed the "Health Literacy Environment Review" tool from Rudd and Anderson's *The Health Literacy Environment of Hospitals and Health Centers*
- Created CHN's Health Literacy Initiative, based on the review's results and senior leadership support. The initiative's goal: improve patient outcomes by creating an organizational culture based on health literacy principles.
- Hired a Health Literacy Program Manager in 2011 to drive this culture change.



R: Recognize - Outcomes

Champion 1: Michelle DeCastro

- Social worker in Queens
- Attended her department's health literacy training, and realized that the written materials she planned to use for an outreach event were not health literate
- She changed all of her event materials to health literate materials, using primarily KRAMES Health Sheets

Champion 2: Stephanie Campos-Buza

- Women's Health Education Program Coordinator in the Bronx
- Re-wrote and re-formatted eight patient materials between September 2011 and April 2012
- Submitted five patient materials in the last two months to the Patient Communications Committee to review
- Uses diverse teaching strategies to engage patients rooted in health literacy

