Pitfalls in Nursing Practice: How Health Literacy Informs All That We Do

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Session Summary
This session will describe the current state of health literacy in the US with an emphasis on the family in the NICU. Discussion will include how health literacy impacts our patients; each learner will leave with actionable ways to improve education and communication in their home environment.

Session Objectives
Upon completion of this presentation, the participant will be able to:
- define health literacy as it relates to the US population and NICU families;
- recognize areas of potential pitfalls in the routine care of infants and families;
- discuss ways to identify people who struggle with health literacy;
- identify one area of your nursing practice which will benefit from health literacy awareness.

References


Health Literacy

- Many definitions, that all relate to a person having the capacity to:
  - Read
  - Write
  - Communicate
  - Compute
  - Search and Process information

Low Health Literacy: The Cost

- Monetary:
  - One estimate is $106-$238 Billion Annually
- Ethical:
  - Without adequate health literacy can there be informed consent?
- Outcomes:
  - Independently correlated to dosing errors
  - Expressions of shame
  - Decreased use of preventative services
  - Increased morbidity and re-hospitalization
- There is evidence that low health literacy may partially explain health disparities.
The Internet and Lay Literature

- Patients look for information for many reasons; information acquired over time and changes in condition affect searching habits.
- Clinicians should assess both needs and knowledge of clients.
- Information gathered by families needs to be clarified and placed in context for full understanding and to improve the relationship of caregiver to patient.
- Lay literature may raise more questions than it answers.

Educating Parents

- The age of the smartphone is here.
- New mothers prefer to access information on the web via smartphones but:
  - Most available apps are limited in scope and not created in collaboration with professionals and families.
  - Family-centered care requires patients to be involved in the development of educational material, content, and distribution to ensure culturally relevant, population-appropriate information is available and useful.

NICU Parental Health Literacy

- Low health literacy is common during peak times of stress.
- Caregivers do not accurately gauge parents’ literacy status.
- Demographic characteristics have a poor ability to predict health literacy status.
- Safest route is to assume potential limited health literacy on the part of all NICU parents.

Stress Response and the Nurse

- Those with increased stress have a decreased ability to make choices and therefore decreased understanding.
- Nurses mitigate stress with education:
  - Knowing what to expect aids coping skills and increases confidence.
  - Identification of stress patterns and risk needs to be ongoing.

Parents under stress

- Study of 20 sets of parents whose child was undergoing therapeutic hypothermia.
- Three themes emerged:
  - Communication was fragmented.
  - Challenges of discussing and understanding complex therapies.
  - Uncertain prognosis for long-term development was compounded by unclear characterization and language.

Tools

- Many tools to test Health Literacy exist.
- Some advocate for evaluation of each patient; this may be accomplished via full tools or brief proxy questions.
  - Do you have trouble reading or filling out forms?
  - Do you have trouble understanding written instructions?
  - Does someone usually fill out forms for you?
  - Do you know all of your medication names and what they are used for?
Nurse as Patient Advocate

• Nurses are leaders who enjoy the public trust

• Responsibility to address the media and hold it accountable

• Value add as more nursing visibility in the marketplace

• BUT this in an interdisciplinary process…

Preparing Patient Materials

• Have a clear reader and goal in mind
  • Focus groups will help you understand your audience

• US median reading level is 8th grade; aim for 5-6th level
  • Use small syllabic words in short sentences

• Use pictures, but make sure words are well spaced and easy to read—no italics, fancy or multiple fonts, and not all CAPS
  • Use active tone—explain what the patient should do

NICU Parental Health Literacy

• Imperative to assess health literacy before offering explanations or education
  • Parents do not always get information the way they want
    • Familial information—offered 46% of the time but only 19% want this
    • 80% wanted information from the doctor but only 46% received it.

• How helpful is what we give them?
  • Internet 54%
  • DVD 44%
  • Group classes 42%
  • Handouts 35%

• Ask how the client learns best
  • Written material never should stand alone!

  Present material in 3-5 small pieces at a time
  Pictorial aids or picture novellas aid understanding

  • Use the teach back method

Teaching Families

• Ask how the client learns best

  • Written material never should stand alone!

  Present material in 3-5 small pieces at a time
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  • Use the teach back method

Become A Translator

• Our job and our challenge is to translate evidence to the lay public in a non-threatening way that informs, engages, and ultimately helps them take their health and that of their families into their own hands.

Communication with parents

• Parental health literacy as it relates to newborn issues is learned
  • Transition to parenthood
  • Learning the child
  • Learning who and when to ask for help

• Sources of learning for parents include:
  • Experiential learning by performing task
  • Vicarious learning by observation, hearing or reading
  • Nurses aid learning by acting in partnership to increase parental confidence

• Written material never should stand alone!

  Present material in 3-5 small pieces at a time
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References:

Communication with parents

- Satisfaction with conversations and interactions does not mean that clinicians and parents agree on a child’s status or prognosis.
- When parents and clinicians agree on diagnoses and treatments they disagree on severity of illness 50% of the time.
- Communication is impaired by differences in language.
- Influence of hope and optimism should not be underestimated.
- Satisfaction is related to physician accessibility and non-verbal cues.
- Multiple conversations and frequent updates aid understanding.

Community Advocacy

- Commit to being a Champion.
- Share your tips/techniques.
- Volunteer.
- Engage at the level of the bedside, the colleague, and the community.
- Don’t reinvent the wheel! What resources are in place and which need your magic touch?

Health Literacy Starts at the Beginning

- Health literacy is a stronger predictor of health than age, income, employment status, educational level, or race.
- Efforts to improve health literacy will have a greater national impact if they start while children and adolescents are developing their health behaviors.
- Mandate National Health Education Standards and partner with economics, science, social studies and math classes.
- Finance through insurance companies and Bundled Medicaid such as with evidence based home-visiting.
- Partnerships between hospital systems, insurance companies and school based wellness centers.
