

Background

The current design of the U.S. healthcare system systemically excludes some people—often those who need health services the most. We often fail to see the pervasive health literacy barriers built into our routine processes and communications.

Consider two parents seeking care for their sick child. They take their child to the pediatrician, who refers them to a specialist because of the complexity of the child's presentation. After receiving a denial letter from their insurance, the parents struggle to make sense of the situation. They need to file an appeal, but do not understand how to do so. They are stressed about their child's well-being, but don't have a clear place to turn. Whose responsibility is it to help them?

Stories like this one play out every day across America. Often basic tasks—like filling out intake forms, picking up prescription medications and taking them correctly, assessing personal risk and modifying behaviors, understanding health insurance benefits and denials, and following care instructions—are overly complicated. We may see these transactions as routine. But for people with low health literacy or those facing healthcare disparities due to language barriers, education level, or socioeconomic status, they can be an insurmountable obstacle.

A Critical Missing Piece in Healthcare Transformation: Improving Organizational Health Literacy as a

Path to Health Equity

Introduction

Health equity, the ability for all people to attain the highest level of health, remains an elusive goal in America. Despite cutting-edge medical technology and expanded insurance coverage, the U.S. healthcare system still ranks last among ten high-income countries in equity, access to care, and health outcome measures.¹

At the center of this challenge lies a critical but often overlooked barrier: organizational health literacy. Despite technological advances and innovation in science and medicine, life-saving treatments are only effective if people understand how to access them. The extent to which healthcare and social services organizations make information and processes understandable and actionable for all people directly impacts health outcomes and equity.

In Orange County, California, four public health and social service organizations partnered with the Institute for Healthcare Advancement (IHA) to transform their organizational health literacy practices and advance health equity in their communities. The coalition set out to reduce the hidden barriers that make it difficult for people with low health literacy to navigate healthcare and insurance with a robust assessment of existing processes, staff training, and strategies to build internal momentum.

To address these systematic barriers, IHA came together with four leading health organizations in Orange County:

- CalOptima Health: Orange County's public health insurance program serving over 915,000 low-income children, adults, seniors, and people with disabilities.
- St. Jude Neighborhood Health Centers: Federally qualified health centers (FQHCs) providing comprehensive care within underserved communities throughout Orange County.
- OC Health Care Agency: A regional interdisciplinary health jurisdiction and an accredited county health department, charged with protecting and promoting individual, family and community health through partnership and coordination of public and private sector resources.
- County of Orange Social Services Agency: Administers
 Federal, State and County social services programs that
 protect children and adults from abuse or neglect, enable
 the frail and disabled to remain in their homes, move eligible
 families from dependency to self-sufficiency and provide
 public assistance benefits for eligible recipients.

Each organization recognized that addressing the upstream, systemic cause of health inequalities started with improving their health literacy practices. IHA's goal was to assist these partners in decreasing the unintentional health literacy burden placed on people seeking the care and services they need.

"The omission of health literacy practices at the organization level reinforces systemic structures and processes that result in health inequities for the most vulnerable in our communities.

An objective organizational health literacy assessment tells organizations what they are doing well now and what they can do to improve. The results can guide a targeted improvement plan with powerful outcomes in patient experience and satisfactions and health equity."

-Marian Ryan, PhD, MA, MPH, Chief Policy & Research Officer, IHA



Health Literacy Partner Meeting over Zoom

Organizational Health Literacy Assessment – Getting Serious About Improvement

Leadership commitments were swift and decisive, recognizing that advancing health equity through initiatives at the organizational level is critically important to fulfilling their roles as leaders in the community. Improving organizational health literacy also aligns with strategic priorities, such as earning NCQA health equity accreditation or Person-Centered Medical Home recognition. Leadership also identified that this organization-wide initiative would unite staff members to achieve a common goal.

The CEO of each partner organization sent out mass employee communications (email blasts, video emails, newsletters, town hall meetings) publicly endorsing the health literacy initiative. These communications emphasized the importance of all employees participating.

To generate enthusiasm and explain the initiative's importance, the coalition partners collaborated on creating a three-minute video, "Why Health Literacy." The video accompanied the CEO announcements and sparked employee engagement across all organizations. Employees were also encouraged to take part in a survey with a message saying, "We want to learn what we do well, and what we need to improve. You need to tell us what you see each day about how our work is being done."

Organizational Assessment as a Catalyst for Change

The cornerstone of this initiative was a comprehensive, independent assessment of each partner's organizational health literacy practices. IHA led the effort by examining four components of each organization's strategy.

1. Employee Surveys

IHA fielded a validated survey that assessed 40 health literacy practices within six functional domains (workforce development, quality improvement and equity, verbal communication, written communication, navigation assistance ["wayfinding"], and leadership). Completed employee surveys from all departments and all levels of an organization are essential to providing reliable information about the use of health literacy practices that the organization can act upon.

2. Facility Walk-Throughs

Way-finding support, clear signage, and easily accessible support resources are important to people visiting a health or social service facility for care. Walking in the patient's shoes provides crucial insights into the real-world experience of accessing services and helps identify barriers that may be invisible to staff who navigate the environment daily.

IHA and at least one community member visited partner facilities and evaluated the ease of getting information and finding services. Assessors used a published checklist for these facility "walk-throughs" and completed the checklists together.

3. Customer Service Phone Calls

A phone call to the organization is often the first touch point for a person in need of help or services. To assess the accessibility of each partner organization's customer service department, trained community members made phone calls using standardized protocols (with case scenarios) and documented the responses. Using the documentation of these calls, IHA assessed partners' customer services to identify areas for improvement. This assessment revealed how well organizations explained processes or directed callers to the correct resources.

4. Website Reviews

For many people, visiting an organization's website is the first step in seeking help. Webpages must be designed using health literacy best practices to ensure all people can easily find the information they want or need. IHA reviewed the website pages for each partner organization using a published checklist to gather data on the ease of finding and acting upon the information provided.



In-person Health Literacy Workshop on Mastering Teach-back.

-Chi Pham, Internal Communications Manager, Social Services Agency

"When health literacy was introduced to our employees, many naturally understood the importance of making information more accessible to the community. People who need to make decisions about their health could very well be the same people who come through our doors, needing help to navigate the complexities of the social services system."

Building Health Literacy Competency

After gathering assessment data, the coalition moved to build internal capacity for sustainable change. Coalition partners identified internal champions to promote the initiatives and fuel momentum among other team members—an essential catalyst for driving organization-wide change.

To support staff in implementing health literacy changes, the coalition also offered training via IHA's Health Literacy Specialist Certificate Program (HLSCP). Employees at each of the partner organizations, from senior managers to frontline staff, signed up enthusiastically. This comprehensive training covers key concepts, including:



Partners shared what they were learning in the HLSCP in internal project meetings and put their knowledge to immediate use. Staff discussed how best to design a webpage promoting a new program and how to make processes more inclusive and model health literacy best practices for others.

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| Results and Early Impact

Coalition organizations drew on data gathered during the organizational health literacy assessment to identify critical gaps in their current processes and prioritize improvement plans. One such focus was developing written materials that resonated with and could be understood by the diverse populations served. To address this need, IHA implemented a plain language writing workshop for all partner organizations to educate staff on creating more accessible written materials. The training also explored why obtaining feedback from the intended audience is critical as a project evolves to ensure the final message is actionable and easy to comprehend.

Moreover, assessment data revealed that teach-back was not being used consistently in any of the partner organizations. Skills-based workshops on teach-back were implemented, strengthening how frontline teams confirm that patients fully understand their health instructions.

As a result of this coalition's efforts, management and staff of our partners' communication departments now recognize the importance of gathering context and messaging from key community informants before initiating new communication projects. They also now have the skills to create more inclusive processes, patient-facing messaging, and accessible webpages that are easy to use and understand for people with all levels of health literacy.

"We knew our materials and messages should be written at the 5th-grade level, but we did not have a name for health literacy, or a clear understanding of exactly what it meant or how to achieve it...We are now creating targeted processes to embed health literacy into our future."

-Julie MacDonald, Communications Director, OC Health Care Agency



Systemic Change and Long-Term Commitment

Removing structural patterns of operating that may unintentionally disadvantage some people requires weaving health literacy into every facet of care and service. In response, these Orange County organizations are integrating health literacy principles and practices into their formal Policies and Procedures, from new hire onboarding to ongoing professional development opportunities. As a result:

- Staff are prepared to serve as trainers to sustain staff skill-building workshops.
- Some organizations are recognizing health literacy champions and rewarding them for following health literacy principles at work.
- Employee expectations are institutionalized and modeled by leadership.

The leadership of our partner organizations understood these updates amounted to more than a few tactical improvements to their health literacy practices. They represented a substantial culture shift—one that underscores the importance of applying a health literacy lens to all public facing work. This commitment to health literacy ensures every person can understand and act on important health information. Moving forward, continuing to remove health literacy barriers at all levels is essential to our continued quest for service excellence and building foundational trust between organizations and the communities they serve.

Be a Leader in Your Community for Health Literacy and Equity

Orange County's story is a testament to what happens when healthcare and social service organizations are willing to "look under the hood" and improve their practices. The enthusiasm we witnessed in these organizations is palpable! The changes they've enacted will transform the lives of the people they serve and directly improve health equity.

What about you and your organization?

Do you wish to uplift lives in your community?

For more information about how IHA Health Literacy Specialist Certificate Program can help your organization advance health equity through improved health literacy, visit ihaacademy.org.

"I appreciate all IHA is doing for health literacy. It is vital to health and wellbeing. We are eager for this opportunity."

-Michael Hunn, CEO, CalOptima Health

"We have witnessed a culture shift in our clinics. It has been exciting to see the change in practice across our clinics to communicate more clearly with our patients. This can be life changing when patients can better understand how and why to care for their health."

- April Vincent, RD, St. Jude Neighborhood Health Centers



St. Jude Neighborhood Health Centers embedding Health Literacy into practice.