Standards and national action for improving health literacy

Overview

- Who are we?
- Why do we have a focus on health literacy?
- How do we support action on health literacy?
 - A national statement
 - The NSQHS Standards
 - Health literacy in the second edition
- Where to next?

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

- National government organisation
- Funded by Commonwealth and all states and territories
- Leading and improving safety and quality in health care
- Strategic priorities are in the areas of:
 - patient safety
 - partnering with patients, consumers and communities
 - quality cost and value
 - supporting health professionals to provide safe and high-quality care.

Why do we (the Commission) have a focus on health literacy?

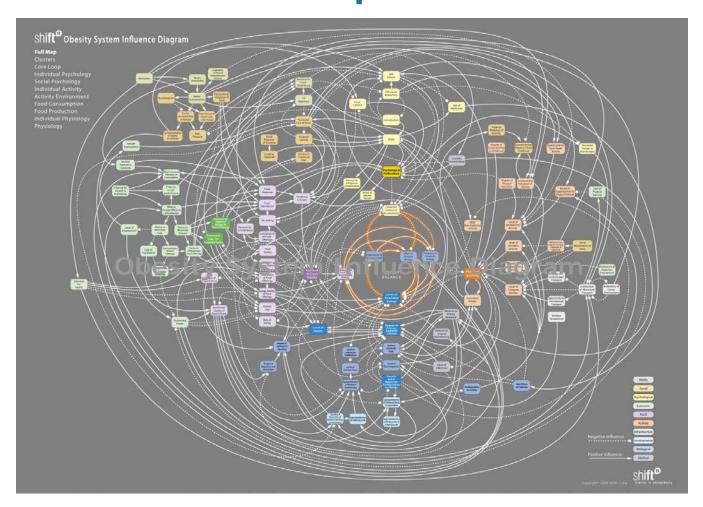
It's about preventing confusion and misunderstanding...

Which may sound benign, but actually.....

- Communication failures are <u>still</u> one of the most commonly cited underlying causes of adverse events
- AND complaints about the healthcare system.

- Effective communication is a fundamental requirement for safe and high-quality health care.
- Critical for the delivery of person-centred care.

Health and healthcare is amazingly complex

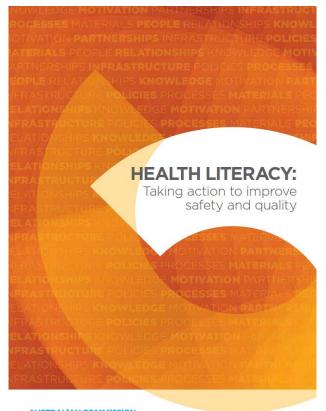


A national statement on health literacy

Supporting action on health literacy is about trying to balance the field

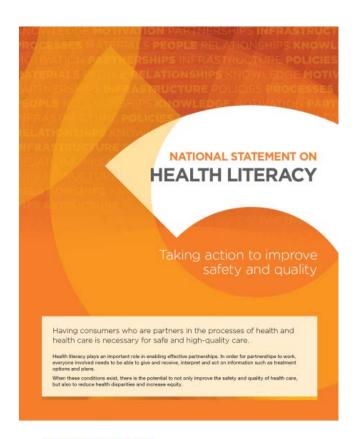


A national approach



AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTH CARE

August 2014



AUSTRALIAN COMMISSION
ON SAFETYAND QUALITY IN HEALTH CARE

The National Safety and Quality Health Service Standards

What are the NSQHS Standards?

- Aim: To provide a nationally consistent statement about the standard of care consumers can expect from healthcare organisations...
- Mandatory for Australian health services to be accredited against the NSQHS Standards from 2019

The first edition (2011-2018)

Standard 1
Governance for Safety and
Quality in Health
Service Organisations





Standard 2
Partnering with
Consumers







Standard 3
Healthcare
Associated
Infections

Standard 9
Recognising and
Responding to Clinical
Deterioration in Acute
Health Care





Standard 4
Medication
Safety

Standard 8
Preventing and
Managing Pressure
Injuries







Standard 5
Patient Identification and Procedure
Matching







Standard 6
Clinical
Handover

The second edition (2019-2029)



Clinical Governance



Partnering with Consumers



Preventing and Controlling
Healthcare-associated Infection



Medication Safety



Comprehensive Care



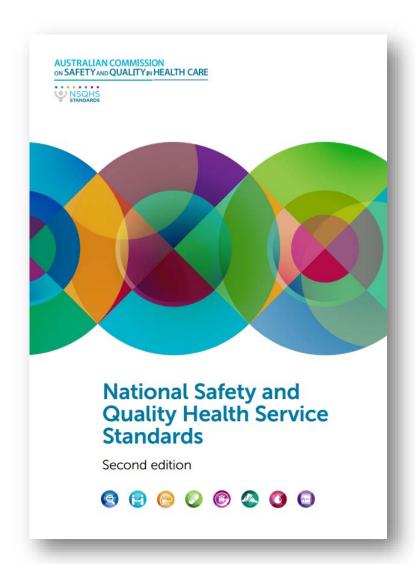
Communicating for Safety



Blood Management



Recognising and Responding to Acute Deterioration



A new (or stronger) focus on....

- Leadership
- Understanding diversity of patients and consumers
- Electronic health records
- Safe clinical environment
- Care planning and shared decision making
- Health literacy
- Screening and assessment
- Nutrition and hydration
- Aboriginal and Torres Strait Islander people
- Cognitive impairment
- Mental health

The second edition (health literacy)

Health literacy overtly included:

Partnering with Consumers

Implied or required in actions in:

- Governance
- Comprehensive Care
- Communicating for safety



Clinical Governance Standard (actions related to health literacy)

- 1.15 The health service organisation:
 - Identifies the diversity of the consumers using its services
 - Identifies groups of patients using its services who are at higher risk of harm
 - Incorporates information on the diversity of its consumers and higherrisk groups into the planning and delivery of care
- 1.31 The health service organisation facilitates access to services and facilities by using signage and directions that are clear and fit for purpose
- 1.33 The health service organisation demonstrates a welcoming environment that recognises the importance of the cultural beliefs and practices of Aboriginal and Torres Strait Islander people



Partnering with Consumers Standard (health literacy related actions)

- 2.3 The health service organisation uses a charter of rights that is:
 - Consistent with the Australian Charter of Healthcare Rights¹⁶
 - Easily accessible for patients, carers, families and consumers
- 2.4 The health service organisation ensures that its informed consent processes comply with legislation and best practice
- 2.5 The health service organisation has processes to identify:
 - The capacity of a patient to make decisions about their own care
 - A substitute decision-maker if a patient does not have the capacity to make decisions for themselves
- 2.6 The health service organisation has processes for clinicians to partner with patients and/or their substitute decision-maker to plan, communicate, set goals, and make decisions about their current and future care
- 2.7 The health service organisation supports the workforce to form partnerships with patients and carers so that patients can be actively involved in their own care



Partnering with Consumers Standard (Health literacy criterion)

- 2.8 The health service organisation uses communication mechanisms that are tailored to the diversity of the consumers who use its services and, where relevant, the diversity of the local community
- 2.9 Where information for patients, carers, families and consumers about health and health services is developed internally, the organisation involves consumers in its development and review
- 2.10 The health service organisation supports clinicians to communicate with patients, carers, families and consumers about health and health care so that:
 - Information is provided in a way that meets the needs of patients, carers, families and consumers
 - b. Information provided is easy to understand and use
 - The clinical needs of patients are addressed while they are in the health service organisation
 - d. Information needs for ongoing care are provided on discharge



Comprehensive Care Standard (actions related to health literacy)

- 5.13 Clinicians use processes for shared decision making to develop and document a comprehensive and individualised plan that:
 - Addresses the significance and complexity of the patient's health issues and risks of harm
 - Identifies agreed goals and actions for the patient's treatment and care
 - Identifies the support people a patient wants involved in communications and decision-making about their care
 - d. Commences discharge planning at the beginning of the episode of care
 - e. Includes a plan for referral to follow-up services, if appropriate and available
 - Is consistent with best practice and evidence
- 5.20 Clinicians support patients, carers and families to make shared decisions about end-of-life care in accordance with the National Consensus Statement: Essential elements for safe and high-quality end-of-life care⁴⁶



Communicating for safety (actions related to health literacy)

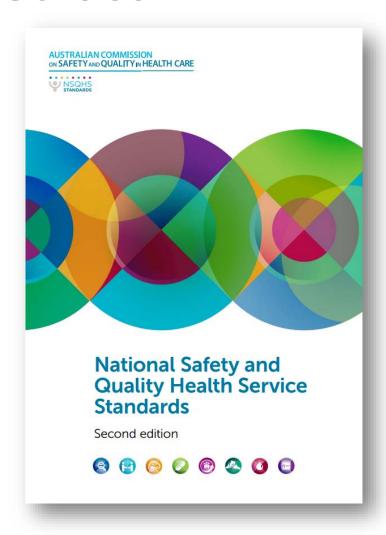
- 6.9 Clinicians and multidisciplinary teams use clinical communication processes to effectively communicate critical information, alerts and risks, in a timely way, when they emerge or change to:
 - Clinicians who can make decisions about care
 - Patients, carers and families, in accordance with the wishes of the patient
- 6.10 The health service organisation ensures that there are communication processes for patients, carers and families to directly communicate critical information and risks about care to clinicians

Partnering with Consumers embedded across the Standards

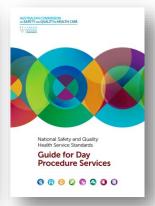
- Preventing and managing HAI **Action 3.3**
- Undertaking medication management Action 4.3
- Delivering comprehensive care Action 5.3
- Effectively communicating with patients, families and carers in high-risk situations – **Action 6.3**
- Providing safe blood management **Action 7.3**
- Recognising and responding to acute deterioration –
 Action 8.3

Resources to help understand what is needed...

NSQHS Standards Guides













User guides

- Aboriginal and Torres Strait Islander health
- Governing bodies
- Health service organisations providing care to children
- Measuring and evaluating partnering with consumers
- Mental health services
- Healthcare variation
- Migrant and refugee health
- Chemotherapy services
- End-of-life care
- Cognitive impairment

Online resource portal

Clinicians

Assessors



Managers

Members of

Governing Body

Safety & Quality

Managers

Healthcare

Consumers

Timelines

- November 2017
 - NSQHS Standards and first round of resources launched
 - Gradual release of resources as they are finalised and approved
- April 2018
 - Launch of online training modules for assessors
- June 2018
 - Launch of interactive online resource portal
- July 2018
 - Transition to assessment to the second edition starts
- January 2019
 - Assessment to the second edition

What now for the Commission?

Local: Support implementation of the second

edition of the NSQHS Standards – resources,

guidance, monitoring

National: Work with state and federal colleagues to

integrate health literacy, communication and

person-centred care into policy

International: Contribute to OECD work on health literacy and person-centred healthcare systems

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