Tennessee Charitable Care Network:
Exploring Health Literacy Issues Throughout the State
May 13-14, 2015

ATTACHMENT C: TOOLS & STRATEGIES TO ADDRESS HEALTH LITERACY BARRIERS
<table>
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<tr>
<th>IDENTIFIED HEALTH LITERACY ISSUE</th>
<th>TOOLS &amp; STRATEGIES TO ADDRESS</th>
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</table>
| **CULTURAL NORMS AND BELIEFS**   | • Education videos in resource center at clinic (variety of languages/cultures)  
|                                  | • “Hospitality” staff position for 1:1 contact  
|                                  | • Written information provided in patient’s language with sensitivity to cultural norms  
|                                  | • Use of metaphors/stories with cultural relevance  
|                                  | • Drawing – “word pictures”  
|                                  | • Pre-emptive education before treatment  
|                                  | • Professional development for staff on cultural norms and beliefs  
|                                  | • Thorough review with nurse at check-out  
|                                  | • AHA “Financial cost of smoking” calculator  
|                                  | • Nurses write purpose of prescription on patient’s med bottle  
| **LANGUAGE BARRIERS**            | • Written information provided in patient’s language  
|                                  | • I translate (iPhone, IPad) and other apps for translation  
|                                  | • On site interpreters  
|                                  | • Language line (telephone access to translators with clinical knowledge)  
|                                  | • Drawing – “word pictures”  
|                                  | • Education videos in resource center at clinic (variety of languages)  
|                                  | • Dental hygiene videos  
|                                  | • Use of props (clear soda bottles and sippy cups with sugar cubes in them; food portion rings)  
|                                  | • Volunteers (students) do skits on proper oral hygiene |
| LIMITED/LITTLE EDUCATION                              | • All handouts written in simple, lay language  |
|                                                    | • Recipes written for low literacy               |
|                                                    | • Lab Sheet explanation (detailed, simple language) |
|                                                    | • 1:1 contact                                    |
|                                                    | • Pre-emptive education before treatment         |
|                                                    | • Thorough review with nurse at check-out         |
|                                                    | • AHA “Financial cost of smoking” calculator     |
|                                                    | • Monthly diabetes groups                         |
|                                                    | • Monthly visits for chronic conditions           |
|                                                    | • Website links for credible sources of information |
|                                                    | • Encourage use of fitness apps, pedometers       |
|                                                    |   Use of props (clear soda bottles and sippy cups with sugar cubes in them; food portion rings) |
|                                                    | • Nurses write purpose of prescription on patient’s med bottle |
|                                                    | • Nutritional visual aids                         |
|                                                    | • Low literacy food/nutrition materials --- SNAP.nal.usda.gov |
|                                                    | • Volunteers (students) do skits on proper oral hygiene |
|                                                    | • Education videos in resource center at clinic (variety of languages) |
|                                                    | • Dental hygiene videos                           |
| SOCIAL/ENVIRONMENTAL/FINANCIAL | • Teaching kitchen (nutrition)  
• On site garden  
• Wellness program  
• Monthly diabetes groups  
• Monthly visits for chronic conditions  
• Use of props (clear soda bottles and sippy cups with sugar cubes in them; food portion rings)  
• AHA “Financial cost of smoking” calculator  
• Encourage use of fitness apps, pedometers  
• Coordination with other programs for “wrap around” support services  
• Patient assistance programs  
• Education about insurance/health navigators  
• Sliding fee scales |
| PERSONAL ISSUES | • Spiritual/lifestyle counseling  
• Motivational interviewing  
• Introducing stress reduction techniques  
• Engage patient in goal setting (small steps that can be achieved)  
• Focus on “one thing” to improve – patient’s choice  
• Use of behavioral contract with specific goals |
| LACK OF KNOWLEDGE OR UNDERSTANDING | • Monthly diabetes groups  
• Monthly visits for chronic conditions  
• Website links for credible sources of information  
• Diabetes education kit  
• Better Choices, Better Health® (Stanford)  
• Teaching kitchen (nutrition)  
• On site demonstration garden  
• Wellness program  
• Recipes provided for healthy living (chronic disease prevention)  
• Diabetes educators  
• Health coaches  
• Use of food diaries  
• Lab Sheet explanation (detailed, simple language)  
• Encourage use of fitness apps, pedometers  
• Use of props (clear soda bottles and sippy cups with sugar cubes in them; food portion rings)  
• Nutritional visual aids  
• Copies of instructions provided to patients  
• Use of behavioral contract with specific goals |

| PATIENT / PROVIDER RELATIONSHIP | • Strive for continuity of providers  
• Providers required to attend course “Serving the Underserved”  
• Professional development for staff on cultural norms and beliefs  
• Extended appointment time to establish rapport and conversation  
• Use of humor |
| BEHAVIORAL HEALTH | • Coordination with specialists  
|                   | • Counseling/therapists on staff  
|                   | • Patient assistance programs (Rx)  
|                   | • Use of behavioral contract with specific goals |