

<b>Policy Title:</b>	Patient Education Materials: Development and Maintenance	
<b>Applies To:</b>	Team Members	
<b>Approved:</b>	<b>Effective:</b>	<b>Next Review:</b>
March 6, 2024	March 19, 2024	March 6, 2028
<b>Sponsor:</b>	Senior Director, Interprofessional Practice and Learning	
<b>Approval Authority:</b>	VP of Clinical Performance and Prof Practice & Chief Nurse Executive  Executive Leadership Team	
<b>Number:</b> AD-LIB-001	<b>Manual:</b> Administrative	

## PURPOSE

This policy outlines the process to create and maintain Nova Scotia Health Patient Education materials (pamphlets) in support of person-centred care by accommodating differing levels of health literacy, for increased patient compliance and safety.

## POLICY STATEMENTS

1. All Nova Scotia Health materials developed for educating patients and their Essential Care Partners (ECPs)/families (See [Appendix A](#) for all definitions) are consistent with the [Patient & Family Education Material Guidelines](#) and are vetted through the office of the Librarian Educator for Patient Education Pamphlets (PEP).
  - 1.1. Exceptions:
    - 1.1.1. Cancer-specific Patient and ECP/family education materials are developed by the Nova Scotia Cancer Care Program and are developed according to [CAN-GA-015 Development of Cancer Care Patient Education Material](#).
    - 1.1.2. Public Health Patient and ECP/family education materials (formerly maintained by the Nova Scotia Department of Health and Wellness) are vetted through the Public Health Resource Specialist.

- 1.1.3. IWK Health Patient and ECP/family education materials are managed by the IWK Health Coordinator. To avoid duplication of material, IWK Health materials may be used in Nova Scotia Health facilities, where appropriate.
  2. All entities responsible for Patient Education materials must manage materials effectively and comply with Canadian copyright legislation and other intellectual property regulations.
  3. The creators of Patient Education materials are accountable for the content of their materials.
    - 3.1. The creators are, normally, Nova Scotia Health Team Members, who are the subject matter experts on the topic at hand. They may be an individual or a working group.
    - 3.2. Under Canadian copyright legislation, Nova Scotia Health holds copyright of materials created by employees as part of their employment.
    - 3.3. For expectations related to copyright at Nova Scotia Health, see [Copyright and Intellectual Property \(IP\) - Policy - NSHA AD-AO-085](#).
  4. If up-to-date, appropriate, and high-quality Patient Education materials are available via reputable third-party providers, they can be used instead of recreating the content.
    - 4.1. Reputable third-party providers includes: Patient Education materials created by the IWK, or Patient Education materials accessed via Nova Scotia Health Library Services' database subscriptions. Team Members may consult the Librarian Educator for Patient Pamphlets to determine if an external resource is suitable.
- Exception:** If Nova Scotia Health staff or physicians are mainly paraphrasing significant amounts of another organization's wording, they must obtain written permission from the originating organization to adapt and include a statement on the new Nova Scotia Health resources that it is adapted with permission. The PEP team can facilitate this upon request.
5. Nova Scotia Health Patient Education materials are developed for use at all Nova Scotia Health site and facilities, where appropriate.
  6. Nova Scotia Health managers are accountable for ensuring Patient Education materials used in, created for, or adapted by their departments, comply with this policy. Managers give appropriate Team Members protected time to review, create, and update Patient Education materials needed in their area.
  7. Library Services' PEP team supports creators of Patient Education materials with plain language and readability standards, consistency and currency of information presented, organization branding, and formatting considerations.

8. Library Services' PEP team supports the online availability of all Nova Scotia Health Patient Education materials, including Nova Scotia Cancer Care Program pamphlets, and Public Health pamphlets.
9. Library Services' PEP team provides finalized high resolution print files to Nova Scotia Health's printing services provided ("print shop").

**Exception:** The Cancer Care Program Education Team and Public Health supply their own materials to the print shop.

10. Nova Scotia Health Patient Education materials are developed using standard patient pamphlet templates that include the Nova Scotia Health logo, information about who prepared and designed the pamphlet, a disclaimer, a print code, and the date.
11. Nova Scotia Health content creators must strive to provide accessible and inclusive Patient Education that is respectful of Nova Scotia's diverse populations. The PEP team collaborates with creators to develop Patient Education materials that support culturally competent person-centred care (Nova Scotia Health Authority & IWK, 2017; Nova Scotia Department of Health, 2010).
12. Patient Education materials may be provided in alternate formats (audio, visual, digital) to address various learning and accessibility needs, when feasible.
13. Employees responsible for stocking Patient Education materials on their unit or area must ensure use of the **current** version of print copies by ordering them from the print shop or by retrieving them from the Nova Scotia Health website at the time of use and disposing of outdated materials.
  - 13.1. To ensure that patients receive only the most current version of the material, employees **must not** photocopy Patient Education materials, save, or distribute electronic versions, but share the nshealth.ca web address to the item instead. Library Services' PEP team uploads revisions to the same Nova Scotia Health website address to ensure continued access.
14. Content creators must review their respective active patient education materials after 3 years (or sooner if practice or other information changes) and revise as necessary to maintain currency in evidence-based content and best practice in health care.
  - 14.1. Revisions must be sent to Library Services' PEP team within 5 years of the original.
  - 14.2. Any material that is not reviewed within 5 years of the last review date may be archived from the Nova Scotia Health patient education collection by the PEP team.

## PRINCIPLES AND VALUES

Creating, maintaining, and using plain language Patient Education materials in accessible formats demonstrates **respect for communication** between patients and providers, **innovation** in ensuring availability of appropriate and relevant materials, and **accountability** for supporting shared decision

*This is a CONTROLLED document for internal use only. Any documents appearing in paper form are not controlled and should be checked against the electronic file version prior to use.*

making, as well as mitigating health care costs linked to low health literacy levels. Materials written in jargon-free plain language at a grade 6 reading level or below are the most useful to patients and support persons.

Availability of plain language Patient Education materials is a key support mechanism for health professionals to use alongside strategies such as the Teach-Back Method to confirm that patients and ECPs/families understand what they have been taught. Patient Education materials are based on scientific evidence and best practice in health care.

## PROCEDURE

1. Content creators seek guidance from Library Services in determining if there is a need for a new pamphlet.
  - 1.1. If a new pamphlet is needed, Library Services outlines the necessary steps to create one, as indicated in the [Content Creator Toolkit](#).
2. Library Services assigns a print code to all new Nova Scotia Health pamphlets and enters them into the Library Services catalogue.
  - 2.1. Public Health manage their respective print code listings.
3. The Librarian Educator for Patient Pamphlets, or other designated Team Member, conducts an annual review of active materials to ensure review or removal of out-of-date content.
  - 3.1. Content creators of pamphlets older than five years are notified directly via email that their content must be updated.
  - 3.2. The list of materials slated for removal, if not updated, are circulated via organizational communications channels and posted at the top of the Patient Education Pamphlets [Content Creator Toolkit](#).
  - 3.3. Library Services' PEP team reviews and revises for current plain language and organizational standards, even when there are no clinical content changes required.
  - 3.4. Library Services retains related documentation to archived pamphlet materials, so if a content creator desires to update archived material, the PEP team can facilitate this.
4. Translations:
  - 4.1. Nova Scotia Health pamphlets may be translated into languages other than English, provided the English content is up to date.
  - 4.2. Translations must be revised when the English original is revised or removed from distribution.
  - 4.3. Translations must be completed by a certified translator.
    - 4.3.1. Translation to French is arranged by Library Services in collaboration with French Language Services in support of the [French-language Services Act \(2004\)](#).

4.3.2. Translations to all other languages is arranged by Library Services in collaboration with Nova Scotia Health Language Services.

**Note:** There may be a cost for translation and that cost is paid by the requesting department.

4.4. Employees wishing to pursue translation contact the PEP team to initiate the process, which is outlined in the [Content Creator Toolkit](#).

## REFERENCES

### Legislative Acts/References

Copyright Act, Revised Statutes of Canada (1985, c. C-42). Retrieved from the Justice Laws website <http://laws-lois.justice.gc.ca/eng/acts/c-42/>

French-language Services Act, Acts of Nova Scotia (2004, c. 26 s.1). Retrieved from the NS Office of the Legislative Counsel website <https://nslegislature.ca/sites/default/files/legc/statutes/frenchla.htm>

### Other

Centre for Literacy. (2008). The Calgary charter on health literacy: Rationale and core principles for the development of health literacy curricula. Retrieved from [http://www.centreforliteracy.gc.ca/sites/default/files/CFL\\_Calgary\\_Charter\\_2011.pdf](http://www.centreforliteracy.gc.ca/sites/default/files/CFL_Calgary_Charter_2011.pdf)

Eichler, K., Wieser, S. & Brugger, U. (2009). The costs of limited health literacy: A systematic review. *International Journal of Public Health*. 54:313–324. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3785182/>

Farmanova, E., Bonneville, L., & Bouchard, L. (2018). Organizational Health Literacy: Review of Theories, Frameworks, Guides, and Implementation Issues. *Inquiry: A Journal of Medical Care Organization, Provision and Financing*, 55, 0046958018757848. <https://doi.org/10.1177/0046958018757848>

Institute for Healthcare Improvement. (n.d.) Always use teach back! Retrieved from <http://www.ihl.org/resources/Pages/Tools/AlwaysUseTeachBack!.aspx>

Kim, Y.-S., Kim, H. A., Kim, M.-S., Kim, H. S., Kwak, M. J., Chun, J., Hwang, J.-I., & Kim, H. (2020). How to Improve Patient Safety Literacy? *International Journal of Environmental Research and Public Health*, 17(19), Article 19. <https://doi.org/10.3390/ijerph17197308>

Nova Scotia Health Authority and IWK Health Centre, Provincial Diversity and Inclusion Framework Steering Committee. (2017). Provincial Diversity and Inclusion Framework. Retrieved from [https://library.nshealth.ca/ld.php?content\\_id=34785349](https://library.nshealth.ca/ld.php?content_id=34785349)

Nova Scotia Department of Health (2010). Messages for all voices: Integrating cultural competence and health literacy in health materials, forms, and signage. Retrieved from

<https://novascotia.ca/dhw/primaryhealthcare/documents/Messages-for-All-Voices-Full-Length-Tool.pdf>

Rootman, I. & Gordon-El-Bihbety, D. (2008). A vision for a health literate Canada, report of the expert panel on health literacy. Ottawa, ON: Canadian Public Health Association. Retrieved from [https://www.cpha.ca/sites/default/files/uploads/resources/healthlit/report\\_e.pdf](https://www.cpha.ca/sites/default/files/uploads/resources/healthlit/report_e.pdf)

U.S. Department of Health and Human Services (2022). Health Literacy in Healthy People 2030. Retrieved from <https://health.gov/healthypeople/priority-areas/health-literacy-healthy-people-2030>

Wizowski, L., Harper, T., & Hutchings, T. (2008). Writing health information for patients and families: a guide to developing patient education materials that promote health literacy. Hamilton, ON, Hamilton Health Sciences. Retrieved from <http://www.hamiltonhealthsciences.ca/body.cfm?id=1982>

Yang, Y. (2022). Effects of health literacy competencies on patient-centered care among nurses. BMC Health Services Research, 22(1), 1172. <https://doi.org/10.1186/s12913-022-08550-w>

## RELATED DOCUMENTS

[NSHA Brand Guidelines](#)

[NSHA Library Services Copyright Guide](#)

[NSHA Style Guide](#)

[NSHA Patient and Family Education Materials Guidelines](#)

### Policies

[Copyright and Intellectual Property \(IP\) NSHA AD-LIB-005](#)

[Development of Cancer Care Patient Education Material CAN-GA-015](#)

### Appendices

[Appendix A: Definitions](#)

\* \* \*

**Appendix A: Definitions**

<b>Essential Care Partner(s) (ECPs)</b>	A person who provides physical, psychological, and emotional support, as deemed important by the Patient. This care can include support in decision making, care coordination, and continuity of care. Essential Care Partners can include family members, close friends, or other caregivers and are identified by the Patient or their Substitute Decision Maker (Healthcare Excellence, 2023).
<b>Health Literacy</b>	Health literacy involves the information and services that people need to make well-informed health decisions and includes two parts: <ol style="list-style-type: none"> <li>1. Personal health literacy is the degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.</li> <li>2. Organizational health literacy is the degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others (U.S. Department of Health and Human Services, 2022).</li> </ol>
<b>Nova Scotia Health Patient Education Collection</b>	Official collection of Patient Education materials created by Nova Scotia Health (print and digital) and assigned a unique alpha-numeric print code.
<b>Patient Education</b>	The sharing of information by health care providers to inform patients, ECPs/families about their medical condition, treatment, and other health-related topics, with the goal of improving health behaviours. The mode of delivery should be tailored to the patient’s individual learning needs, and may appear in print, digital, audio, and/or video format.
<b>Teach-Back Method</b>	The Teach-Back Method, also called the “show me” method, is a communication confirmation method used by health care providers to confirm whether a patient understands what is being explained to them. (IHI, n.d.)

**VERSION HISTORY**

<b>Version:</b>	<b>Effective:</b>	<b>Approved by:</b>	<b>What's changed:</b>
Original	2018-09-13	Executive Leadership Team	N/A
Revised	2024-03-19	Senior Director, IPP&L	Minor Revision