



# ADMINISTRATIVE MANUAL

## Policy and Procedure

TITLE:	Patient Education Materials: Development and Maintenance	NUMBER:	AD-LIB-001
Sponsor:	Senior Director, Interprofessional Practice & Learning	Page:	1 of 8
Approved by:	VP, People and Organizational Development  Executive Leadership Team	Approval Date:	Sept. 13, 2018
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Applies To:	Physicians and employees		

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### PURPOSE

Providing plain language education materials supports the conversation between health care providers and their patients, and promotes shared decision making. Plain language health information helps patients and families navigate the health care system and supports healthy communities. More than half (50.3%) of adults in Nova Scotia have inadequate literacy levels (Conference Board of Canada, 2012), and people with low literacy levels are more likely to have poor health (OECD, 2013).

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Nova Scotia Health Authority (NSHA) physicians and employees provide education materials informed by Principles of Adult Learning to patients and families to support Health Literacy, patient compliance with self-care, and patient safety. Physicians and employees provide education materials to comply with Accreditation Canada Required Organizational Practices (Accreditation Canada, 2017), as well as NSHA policies outlining delivery and standards of Patient Education in specific clinical areas. Patient Education materials created and used at NSHA are targeted to specific patient populations and are more appropriate than general Consumer Health Information that may be retrieved generally on the Internet or via general health resources.

## GUIDING 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 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 end users with Health Literacy issues (Wizowski, Harper, & Hutchings, 2008).

Ensuring 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 families understand what they have been taught. Patient Education materials are based on scientific evidence and best practice in health care.

## POLICY STATEMENTS

1. All NSHA materials developed for educating patients and their families are consistent with the [Patient & Family Education Material Guidelines](#) and are vetted through the office of the Librarian Educator for Patient Pamphlets.
  - 1.1. Exceptions:
    - 1.1.1. Cancer-specific patient and family education materials are vetted through the relevant Cancer Site Team and the Nova Scotia Cancer Patient Education Committee by the Nova Scotia Cancer Care Program Education Team.
    - 1.1.2. Public Health patient and 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 Patient Education materials are managed by the IWK Coordinator. If IWK materials exist that meet Patient Education needs at NSHA facilities, they can be used rather than creating an NSHA version of the same information. Teams interested in updating or creating a shared NSHA/IWK resource should contact both the NSHA and IWK pamphlet service leads as early as possible in the process.
  - 1.2. All entities responsible for Patient Education materials (listed in Policy Statement 1, above) ensure that these materials are managed effectively, comply with Canadian

copyright legislation and other intellectual property rights, and are available for use on a province-wide basis, as appropriate.

- 1.3. The creators of Patient Education information are accountable for the content. The creators are, generally speaking, NSHA physicians and employees, who are the clinical experts on the topic at hand. This may be an individual or a working group. Under Canadian Copyright legislation, the organization holds copyright of materials created by employees as part of their employment.
- 1.4. NSHA Patient Education materials are developed for provincial use, where possible.
- 1.5. Managers are accountable for ensuring the Patient Education information used in, created for, or adapted by their departments complies with this policy. Managers give appropriate employees protected time to update/create patient pamphlets needed in their area.
- 1.6. NSHA Library Services' Patient Education Team is accountable to support creators of Patient Education materials with regards to plain language standards, consistency and currency of information presented, organizational branding and formatting considerations.
- 1.7. NSHA Library Services Patient Education Team ensures online availability of NSHA Patient Education materials, and provides finalized high resolution print files to NSHA's printing services provider ("print shop").
- 1.8. NSHA Patient Education materials are developed using standard patient pamphlet templates that include NSHA's logo, information about who prepared and designed the pamphlet, a disclaimer, a print code, and the date.
2. If up-to-date, appropriate, and high quality materials are already available via reputable third-party providers, they can be used instead of recreating the content. This includes Patient Education materials created by the IWK, or Patient Education materials accessed via NSHA Library Services' database subscriptions. NSHA's [Patient & Family Education Material Guidelines](#) has tips for assessing materials created outside of NSHA, including assessing the reading level.
  - 2.1. If NSHA physicians and employees are mainly paraphrasing another organization's wording, they must obtain written permission from the originating organization to adapt, and include a statement on the new NSHA resource that it is adapted with permission.
3. Patient Education materials address diversity and accessibility by considering culture, language, and Health Literacy levels (Nova Scotia Department of Health, 2010).
4. Patient Education materials may be provided in alternate formats (audio, visual, digital) to address various adult learning and accessibility needs, when feasible.
5. Employees responsible for stocking Patient Education materials on their unit or area ensure use of the **current** version of Patient Education print materials by ordering them from the print shop or by online retrieval through Library Services' [Catalogue](#) or [Patient Education Pamphlets Print Code Index](#), rather than photocopying. Revisions to the official copy are uploaded to the same server location so links do not change or break.

- 5.1. In order to ensure that patients receive only the most current version of a Patient Education resource, employees **must not** photocopy Patient Education materials, or save or distribute electronic versions of them.

## PROCEDURE

1. Library Services provides guidance in determining if there is a need for a new pamphlet. Before developing new Patient Education materials, the creator will confirm with NSHA Library Services' Patient Education Team that similar content does not already exist or is not under development. If a new pamphlet is needed, [Library Services outlines the necessary steps](#) to create one.
2. Library Services provides guidance on creating content in alternate formats (such as video or audio) in the [Patient & Family Education Material Guidelines](#).
3. Library Services assigns a print code to all new NSHA Patient Education print materials and enters it into the Library Services catalogue. Applicable Nova Scotia Cancer Care Program, Public Health, and IWK employees manage their respective print code listings.
4. Content creators review their respective active Patient Education materials after 3 years (or sooner if practice or other information changes) and revise clinical aspects as necessary to maintain currency in evidence-based content and best practice in health care.
  - 4.1. As part of the review and revision cycle, Library Services' Patient Education Team reviews and revises for current plain language and organizational standards. The Librarian Educator chairs a Patient Editorial Advisory committee to request review by external stakeholders (i.e. members of the public who have volunteered to serve on the committee) of draft materials when requested by the content creators.
  - 4.2 The Librarian Educator for Patient Pamphlets, or other designated employee, conducts an annual review of active materials to ensure review or removal of out-of-date content. A list of materials slated for removal, if not updated, is circulated via organizational communications channels and posted at the top of the [Patient Education Pamphlets Print Code Index](#).
  - 4.3 Any material that is not reviewed within 5 years of the last review date may be archived from the NSHA Patient Education Collection by the Patient Education Team. NSHA Library Services retains related documentation to archived pamphlet materials, so if a content creator wishes to update archived material, the Patient Education Team can facilitate this.
5. Translations: Patient Education pamphlets may be translated into languages other than English, provided the English content is up to date. Employees wishing to pursue translation may contact the Patient Education Team to discuss the process. In alignment with the French-language Services Act (2004), translation to French may be arranged by NSHA Library Services via Communications Nova Scotia. There may be a cost for translation. Translations must be revised when the English original is revised, or removed from distribution. Translations must be completed by a certified translator.

## REFERENCES

### Legislation

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>

### References

Accreditation Canada (2017). *Required organizational practices handbook*. Retrieved from <http://intra.nshealth.ca/accreditation/SitePages/Home.aspx>

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.qc.ca/sites/default/files/CFL\\_Calgary\\_Charter\\_2011.pdf](http://www.centreforliteracy.qc.ca/sites/default/files/CFL_Calgary_Charter_2011.pdf)

The Conference Board of Canada. (2014). *Adults with inadequate literacy skills*. Retrieved from <http://www.conferenceboard.ca/hcp/provincial/education/adlt-lowlit.aspx>

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/>

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

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>

OECD (2013). *OECD skills outlook 2013: First results from the survey of adult skills*. Retrieved from <http://www.conferenceboard.ca/hcp/provincial/education/adlt-lowlit.aspx>

Riggs, C. (2010). Taming the pedagogy dragon. *The Journal of Continuing Education in Nursing*, 41(9), 388-389. doi: 10.3928/00220124-20100825-02.

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)

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>

## **RELATED DOCUMENTS**

[NSHA Brand Guidelines](#)

[NSHA Style Guide](#)

[NSHA Patient & Family Education Material Guidelines](#)

### **Policies**

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

### **Appendices**

Appendix A - Definitions

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## Appendix A – Definitions

<b>Consumer Health Information</b>	Consumer Health Information is health information designed for a general lay audience rather than for an individual patient. Unlike Patient Education materials, it is generally used without the mediation of a health care provider. Consumer Health Information is widely available via a variety of media. Like Patient Education materials, health consumers use this information to inform decision making about their health care.
<b>Health Literacy</b>	<p>“Health Literacy allows the public and personnel working in all health-related contexts to find, understand, evaluate, communicate, and use information.</p> <p>“Health Literacy is the use of a wide range of skills that improve the ability of people to act on information in order to live healthier lives.</p> <p>“These skills include reading, writing, listening, speaking, numeracy, and critical analysis, as well as communication and interaction skills.” (Calgary Charter, 2008)</p>
<b>NSHA Patient Education Collection</b>	This includes NSHA-prepared materials available in print and digital formats which have been entered into the <a href="#">Patient Education Pamphlets Print Code Index</a> , posted online, and indexed in the NSHA Library Services catalogue.
<b>Patient Education</b>	Patient Education is the sharing of information by health care providers to inform patients and their 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>Principles of Adult Learning</b>	<p>The guiding principles for teaching adults, first coined by Malcolm Knowles (Riggs, 2010), include recognition that adults learn best when they:</p> <ul style="list-style-type: none"><li>• Can partner with the facilitator and share their ideas,</li><li>• Are exposed to a variety of teaching styles that address their learning preferences,</li><li>• Can relate what they are learning to what they already know, and to what they need and want to know,</li><li>• Can see how what they are learning may be applied to their lives, and</li><li>• Can learn in an informal atmosphere.</li></ul>

**Teach-Back  
Method**

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.)



## District Health Authority Policies Being Replaced

Developing Patient Education Materials – CDHA – CC 01-020

Patient Education Information Management – SSH – IS-220-120

### Version History

Major Revisions (e.g. Standard 4 year review)	Minor Revisions (e.g. spelling correction, wording changes, etc.)
NEW 2018-09-13	