

Health Care Breakout Session Notes
Kentucky Health Literacy Summit
February 26, 2010

What are Health Care Systems –places, stakeholders, and systems :

The following chart is a rudimentary attempt to categorize the many many items that came out of the groups brainstorming. This is **not** meant to be proscriptive, to suggest that it is all-inclusive, or that individual items might not be better categorized in a different way.

Places	Stakeholders/Participants
• Hospitals	• Professional healthcare providers (e.g., doctors, nurses)
• Urgent care facilities	• Consumers/Patients
• Pharmacies	• Web writers
• Provider’s offices	• Allied health
• Nursing facilities	• Librarians
• Assisted living facilities	• Veterinarians
• Home health	• Marketing
• Emergency Departments	• Lay workers
• Hospices	• Faith-based providers
• CHCs	• Publishers
• Public Health Departments	• EMTs
• School based clinics	
• Schools as a place to provide information	Systems (and misc)
• Grocery store clinics	• Public versus private sector
• AHECs	• Government systems
• Prisons	• Public health
• Insurance companies	• Patient Education
• Newspapers and other mass media	• Immunization
• Social media	• Complementary and Alternative Medicine

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Major Problems

- Poor information resources – most not in plain language
- Provider's don't have time
- Providers don't have the tools they need
- Navigating the systems – both physically and otherwise
- Lack of curricula for health care providers
- Mixed messages
- Need to improve existing methods for providing information

****We kept coming back to: provider/community communication needs to be improved.****

Possible interventions -- Top Three

- Improving health information resources – Plain Language
 - Start with specific diagnoses
- Creating a tool kit
- Chronic disease management – possibly through home health

Other ideas that were discussed:

- Teach-back/Show-back
- Need some kind of mandate/mechanism to put in place
- Policy is important
- It is important to try to offer incentives for both providers and community to buy in to whatever programs are done
- Consider workplace/employee programs
- Select programs and evaluate using evidence-based methods
- Medical home
- Use volunteers
- Work specifically in the ER