

Position statement	Knowledge for Healthcare: Patient and public information: Focus of HEE's work with NHS Library and Knowledge Services
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CONTEXT

The *Five Year Forward View* set out how the NHS must change, arguing for a more engaged relationship with patients, carers and citizens in order to promote well-being and prevent ill-health (NHS England, 2014). A sustainable future NHS depends upon patients and the public being able to understand health information so that they can care for themselves and also take increasingly complex choices as personalised medicine becomes more common (Gaw, 2016).

KNOWLEDGE FOR HEALTHCARE

The importance of 'the public, patients and carers having the right knowledge and evidence, when and where they need it' is clearly stated in *Knowledge for Healthcare*, our development framework for NHS library and knowledge services (HEE, 2014).

HEE is committed to supporting NHS library and knowledge services to 'work in partnerships with key stakeholders to enrich the information offered to patients and carers, to enable people to better manage their health and wellbeing and make fully informed decisions about their treatment and care' (HEE, 2014).

To date our work in this area has concentrated on:

- building the confidence of health librarians, including launching a public and patient information toolkit in 2016, and cascading training through all the regional networks of NHS librarians; and
- fostering partnership working with the Society of Chief Librarians, the Reading Agency, NHS England, NHS Digital and Public Health England.

HEALTH LITERACY

Levels of health literacy in England are very low: 43% of working-age adults cannot understand textual health information, rising to 61% when a numeracy element is added (Rowlands *et al.* 2015); and 43% are unable to calculate paracetamol dosage for a child based on age and weight (Mayor, 2012).

In an ageing population with increasing co-morbidities, patients and carers need to be sufficiently health literate to take self-prescribed medications safely and to make informed treatment choices.

Equally concerning is that healthcare workers themselves may lack the necessary levels of health literacy awareness to be able to promote healthy lifestyles or to support patients effectively. Unpublished work led by NHS England in the East Midlands showed that the healthcare workforce may lack awareness of health literacy and may not be confident of their skills to identify the health literacy levels of patient and carers. If the healthcare workforce lacks health literacy skills and awareness, then they cannot signpost the public, patients and carers to appropriate information or engage in shared decision-making.

ADDRESSING THE CHALLENGE

The role of health librarians in health literacy

As the next step in implementing the patient and public information elements of our vision for *Knowledge for Healthcare*, our strategy is to raise the health literacy skills and awareness of the NHS workforce. This will build on the development work with library and knowledge services staff to date. By targeting our efforts on the workforce, this approach will achieve an impact at a greater scale than knowledge services would be able to deliver directly.

Core elements in this approach:

- maximising the benefit from training sessions delivered to the health workforce, by incorporating health literacy skills and awareness;
- integrating this work with Making Every Contact Count initiatives at local and national level;
- assessing the resources available, identifying gaps on which we need to take action or influence others to address; and
- optimising the levers that can be used to strengthen health literacy, such as supporting librarians to enable Trusts to comply with the mandatory Accessible Information Standard.

Working in partnership with public libraries

The main focus of our Memorandum of Understanding with the Society of Chief Librarians and The Reading Agency is ensuring that:

- high-quality health information resources are available through public libraries, notably those selected by healthcare professionals and people with specific health problems as part of the Reading Well scheme; and
- Health Information Weeks are supported between NHS libraries and local public libraries.

Within this frame, we will support public libraries to identify health information resources suitable for different levels of health literacy, and use Health Information Week as a platform for wider health literacy awareness amongst the NHS workforce.

Working with colleagues in HEE

A focus on the health literacy skills and awareness of the workforce provides an opportunity for a more integrated and strategic approach with closer working with HEE teams focused on Making Every Contact Count and Technology Enhanced Learning.

PRIORITIES

Given the extent of the health literacy challenge, it is crucial for health librarians and knowledge specialists to focus our expertise and efforts where we can have an impact at scale – focusing on supporting the 1.4 million staff of the NHS who are in daily contact with patients, carers, families and members of the public.

Accordingly, over the next two years, HEE's Knowledge for Healthcare working group on patient and public information will prioritise:

- supporting health librarians to build the health literacy skills and awareness of the health workforce, working in partnerships within the Trust and local health economy; and
- incorporating health literacy into our work with the Society of Chief Librarians and Reading Agency, opening further channels through which to promote the use of health literacy tools and activities that enhance the health literacy of public library users, who naturally include NHS personnel.

Targeting our efforts; Measuring impact

Data collected by Rowlands for her work on health literacy (Rowlands *et al.* 2015) include regional breakdowns of the relative level of health literacy. This provides a strategic opportunity to focus on geographic areas of greatest need.

The working group will also explore the opportunity to establish project measures that will allow us to demonstrate changes in health literacy levels that may be attributable to this work.

References:

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