

PRODUCING PATIENT INFORMATION

A GUIDE FOR HOSPITAL STAFF

Produced by CEH-Hospitals and
Translations Project

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Purpose of this document

This document is for hospital staff who develop patient information resources (eg. factsheets/pamphlets, videos/recordings or posters). It provides practical tips for developing high quality health information resources for English speaking and non-English speaking patients in the hospital setting. This guide was produced by the Hospitals and Translations project (2018-2020) in collaboration with Victorian hospital staff and consumers. The processes described were piloted by hospitals in 2020 and endorsed by DHHS Diversity. This document will provide guidance to hospitals as part of the DHHS policy document [How to work with interpreting and translating services](#). For more information on the project please contact the [Centre for Culture, Ethnicity and Health](#)

Context

In the acute or sub-acute hospital setting, communicating complex health information can be challenging for patients and staff. This can be harder for patients who have limited English. Accessing reliable health information in a patients' preferred language can help them make informed health choices. Patient information resources, when produced and used effectively, assist communication. They can be used as a conversation aid, or given to patients to process information in their own time. They should not replace interpersonal communication between staff and patient, but rather used as an additional resource.

What makes a good patient information resource?

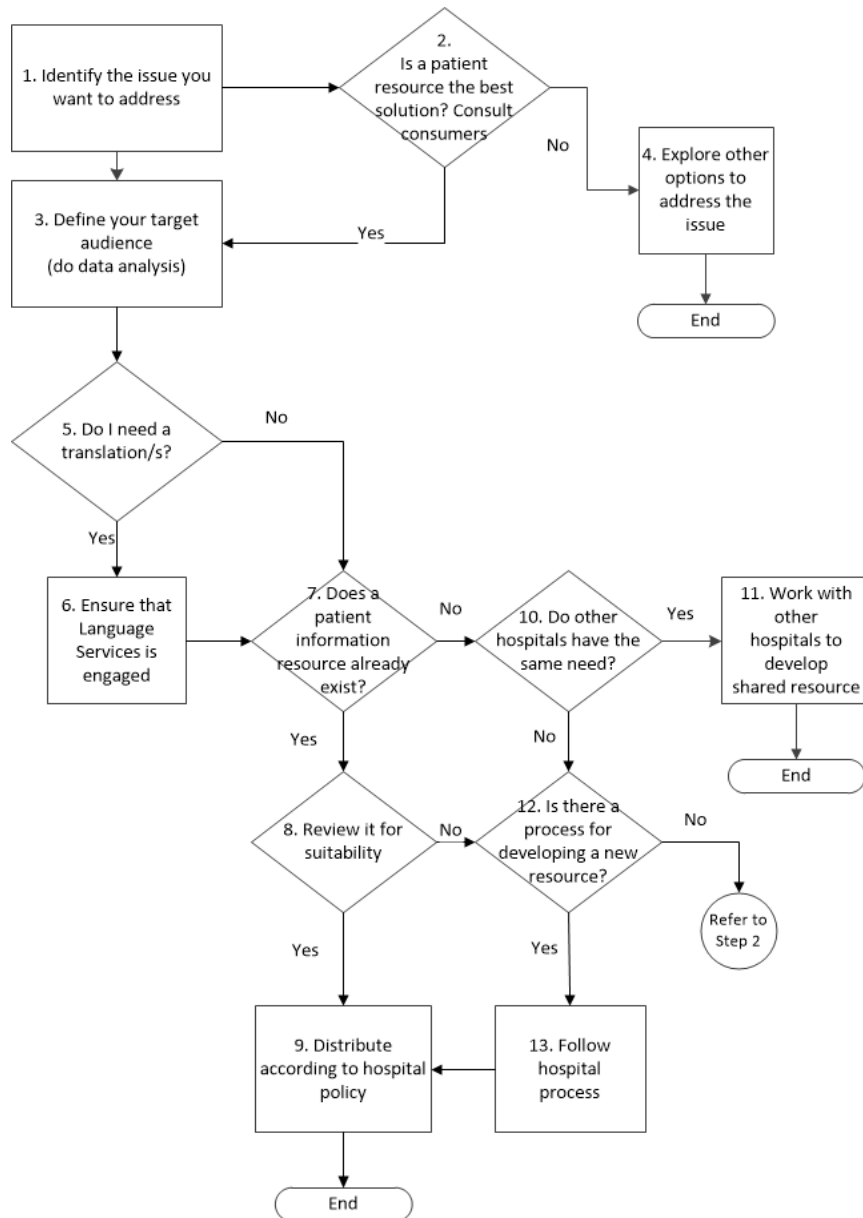
A good patient information resource uses plain language and thinks about the audience. It is helpful to think about what information the patient would want to know, rather than the information the clinician thinks they need to know. This document emphasises the importance of producing effective information in plain language. Experience shows that a good plain language source document will lead to better quality translations into other languages. For more information on plain language please refer to:

- <https://www.safetyandquality.gov.au/sites/default/files/migrated/Health-Literacy-Fact-Sheet-4-Writing-health-information-for-consumers.pdf>
- <https://www.latrobe.edu.au/chcp/health-information-guidelines>

Where do I start?

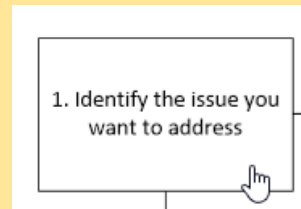
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Step 1. Decision Tree: What to think about before starting a new patient information project

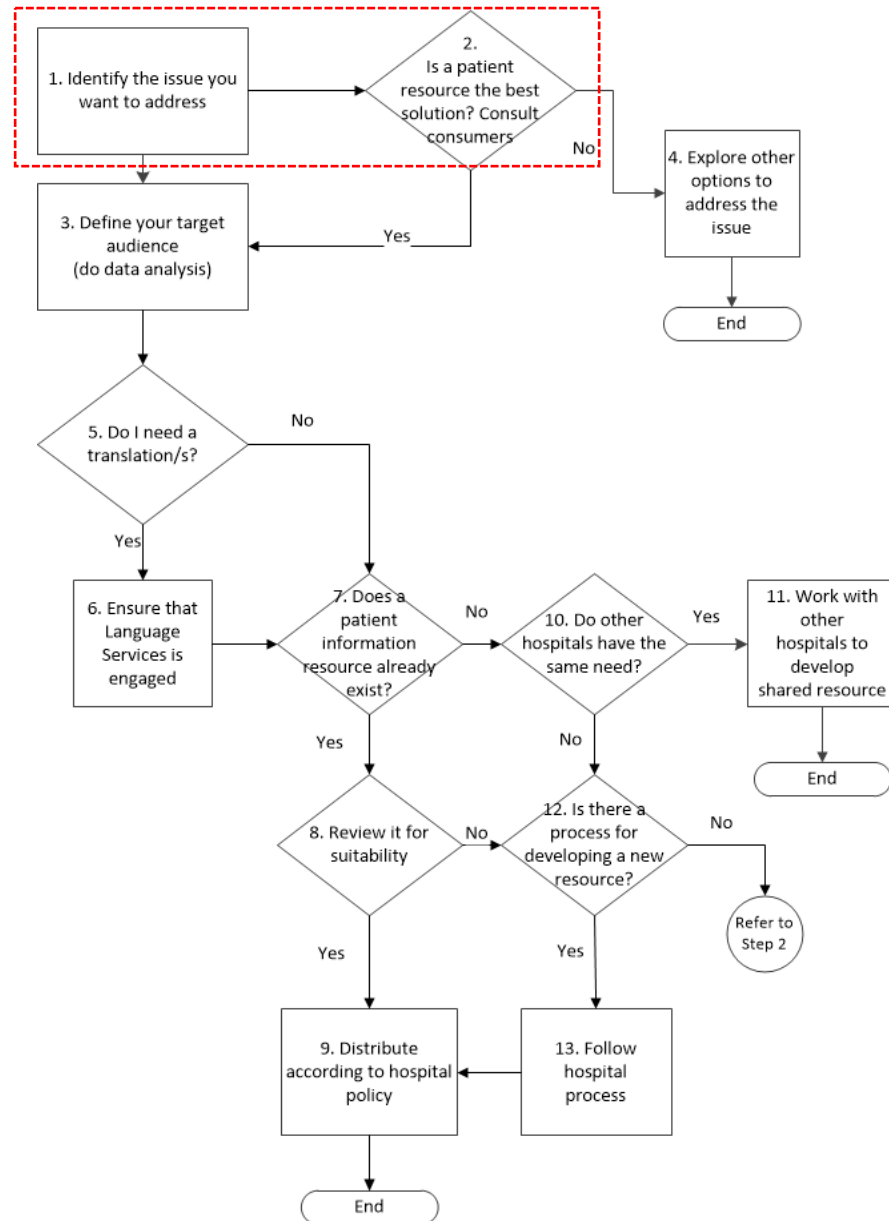


Instructions

Click on the flowchart shapes for more information



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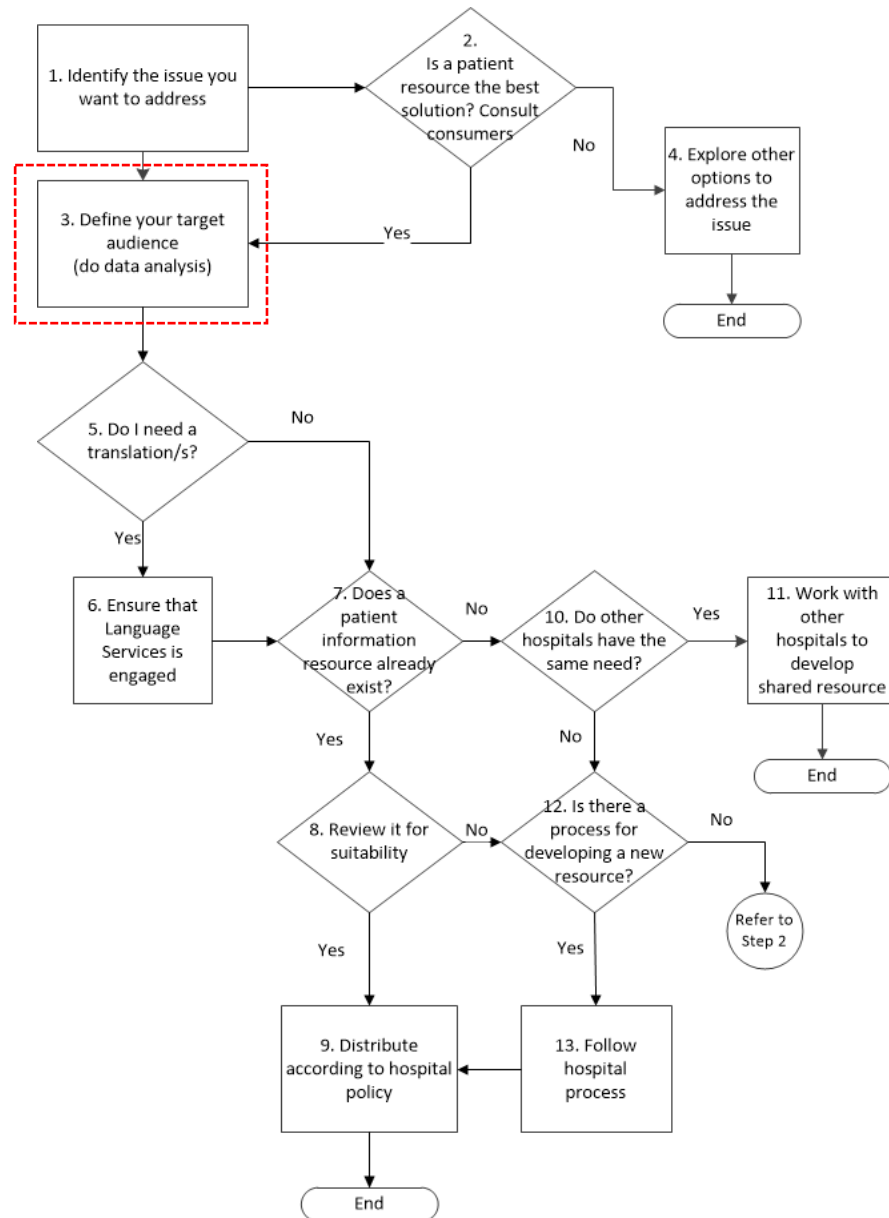


1.+ 2. Before proceeding, ask yourself:

- What is the issue you want to address?
- Is the issue best addressed with a patient information resource? Could there be a better solution? Ask consumers what they need.
- What information do you think patients need?
- What information do patients say they need?
- How do you want the patient information resource to be used? What do you hope to achieve?

By talking to consumers early on, you are more likely to get your project right from the beginning. If your aim is for patients to be able to ask better questions to their doctor, you can plan for the format of the resource early on.

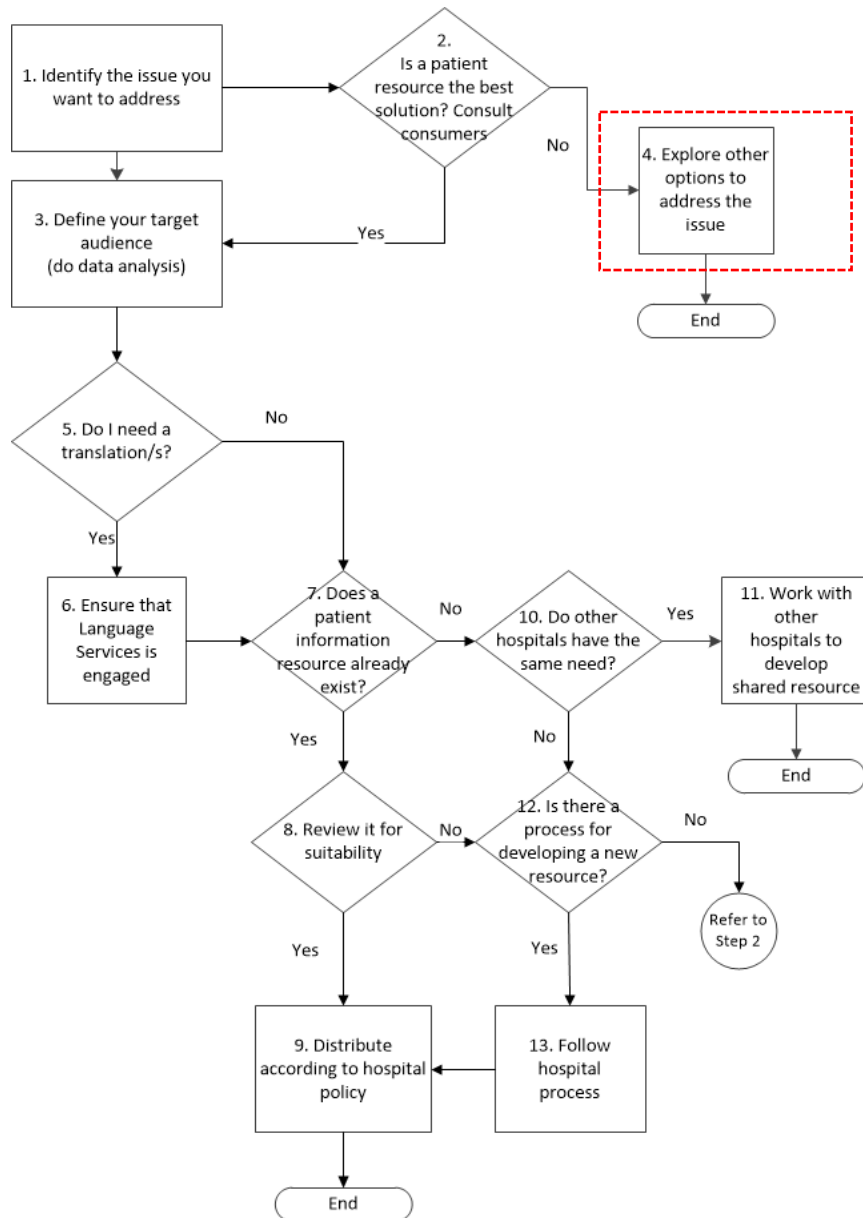
Step 1. Decision Tree: What to think about before starting a new patient information project



3. What do you know about your audience?

- Think about the age, gender, language, cultural, language background of your audience. Analysing patient data can help you identify these and other characteristics. Talk to your patients and staff. Knowing your audience will help you make decisions on the mode of information (written or audiovisual), formatting, amount of text, and other decisions.
- How is the issue understood by the community?

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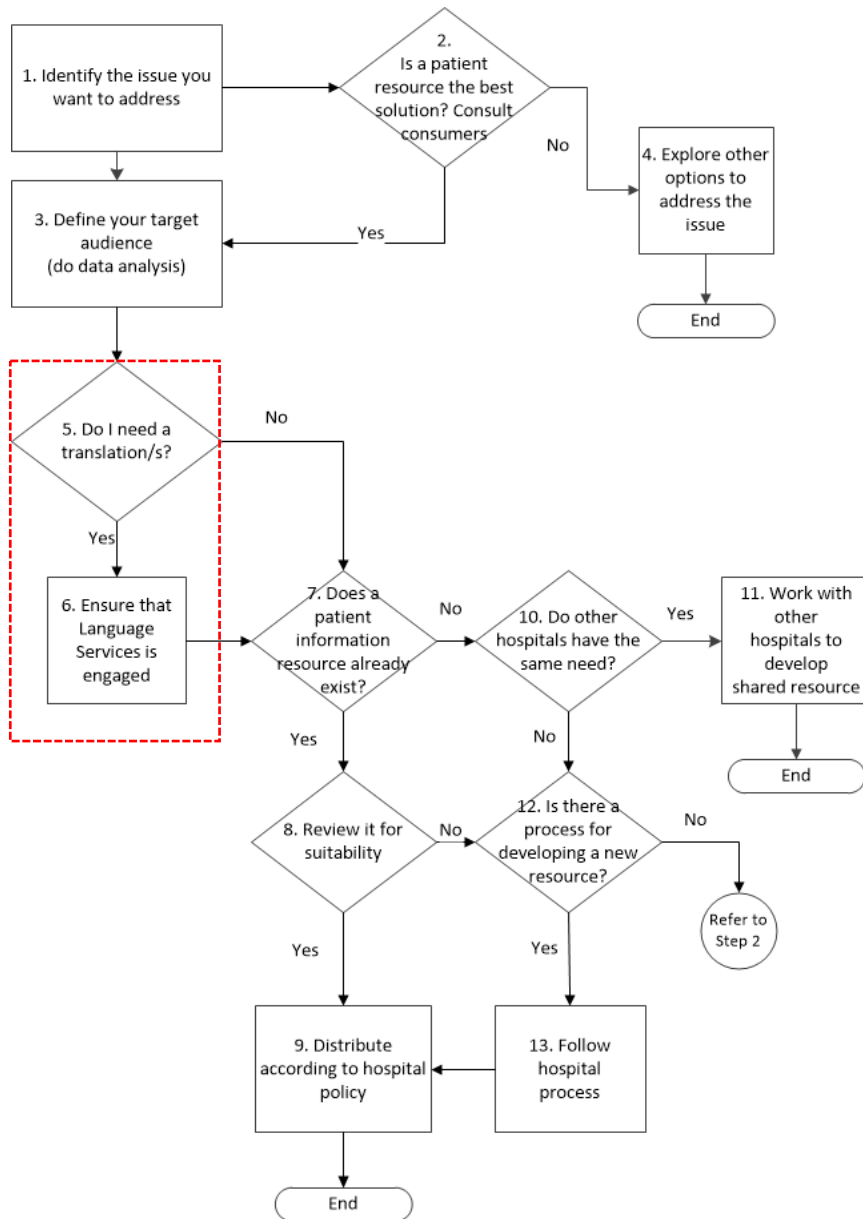


4. Work with staff and consumers to identify a better solution and implement this.

Eg. Perhaps you want to address the issue that certain patients are frequently presenting for colonoscopy procedures without adequate bowel preparation. It may be due to lack of understanding of the instructional leaflet, or it may be that they are given these instructions several months before the actual procedure and forget about them.

Perhaps consider contacting patients a couple of days before the procedure, with an interpreter, to explain the exact steps they need to take, and answer their questions. Briefing the interpreter prior to the conversation about the details you want to highlight, may help. This may be a more effective and time-efficient way of addressing the issue.

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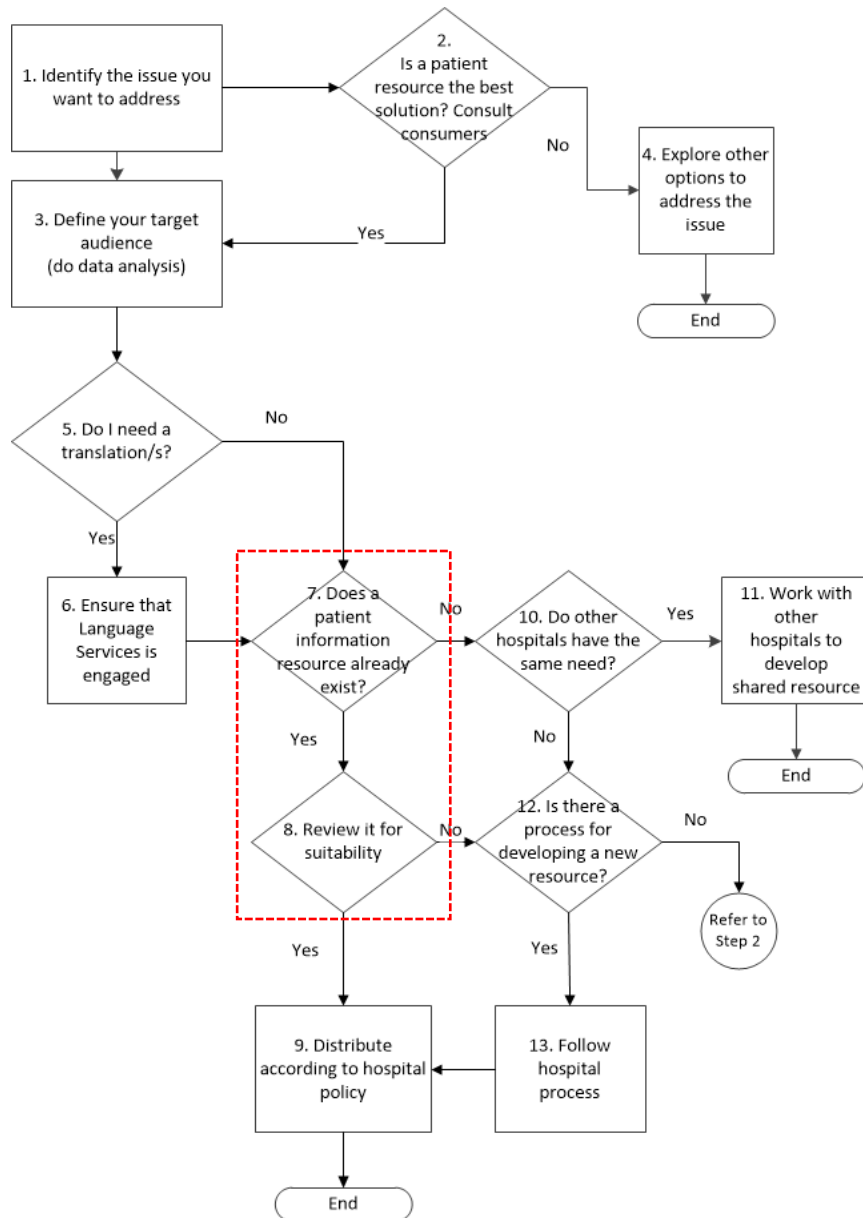
5. and 6. Think about translations early

Engage the expertise of language services and/or diversity teams early. They can help you identify cultural considerations, such as how the issue is understood by the community.

By engaging expertise early you ensure that the English source document meets health literacy standards in English, and translation success is more likely. Even if you do not require translations now, you may in the future.

Language Services will help ensure you get the highest quality professional translation to give your patient.

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7. + 8. Is there an existing resource you can use?

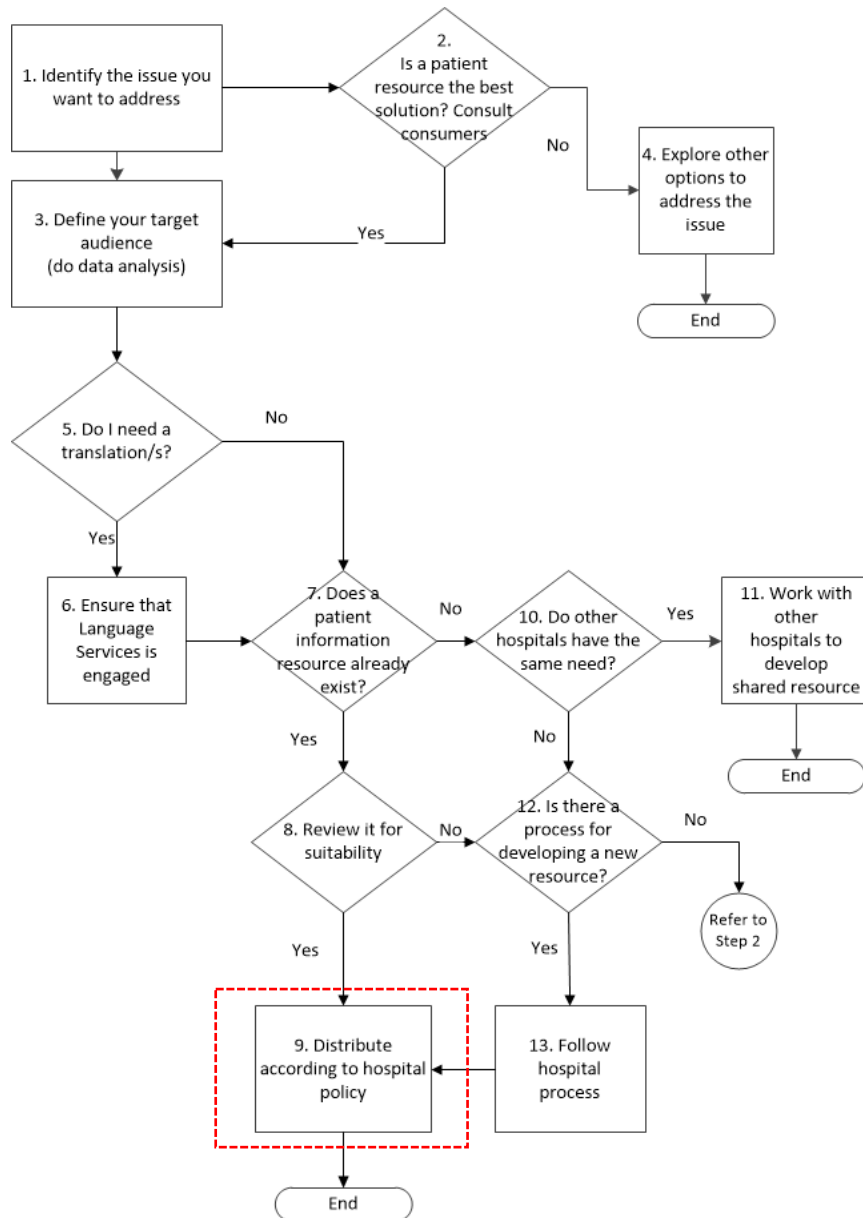
Where possible, use an external resource if it already exists. Search on government health information websites such as <http://healthtranslations.vic.gov.au/> for translated resources.

If you find a resource, make sure you review it for its suitability before distributing it. Review it for its accuracy, currency, understandability and cultural appropriateness.

For guidance on what to look for when reviewing patient information refer to:

- [Guidelines to Producing and Sourcing Quality Health Information](#). (pp.32-34)
- <https://www.dhhs.vic.gov.au/publications/language-services-policy-and-guidelines>

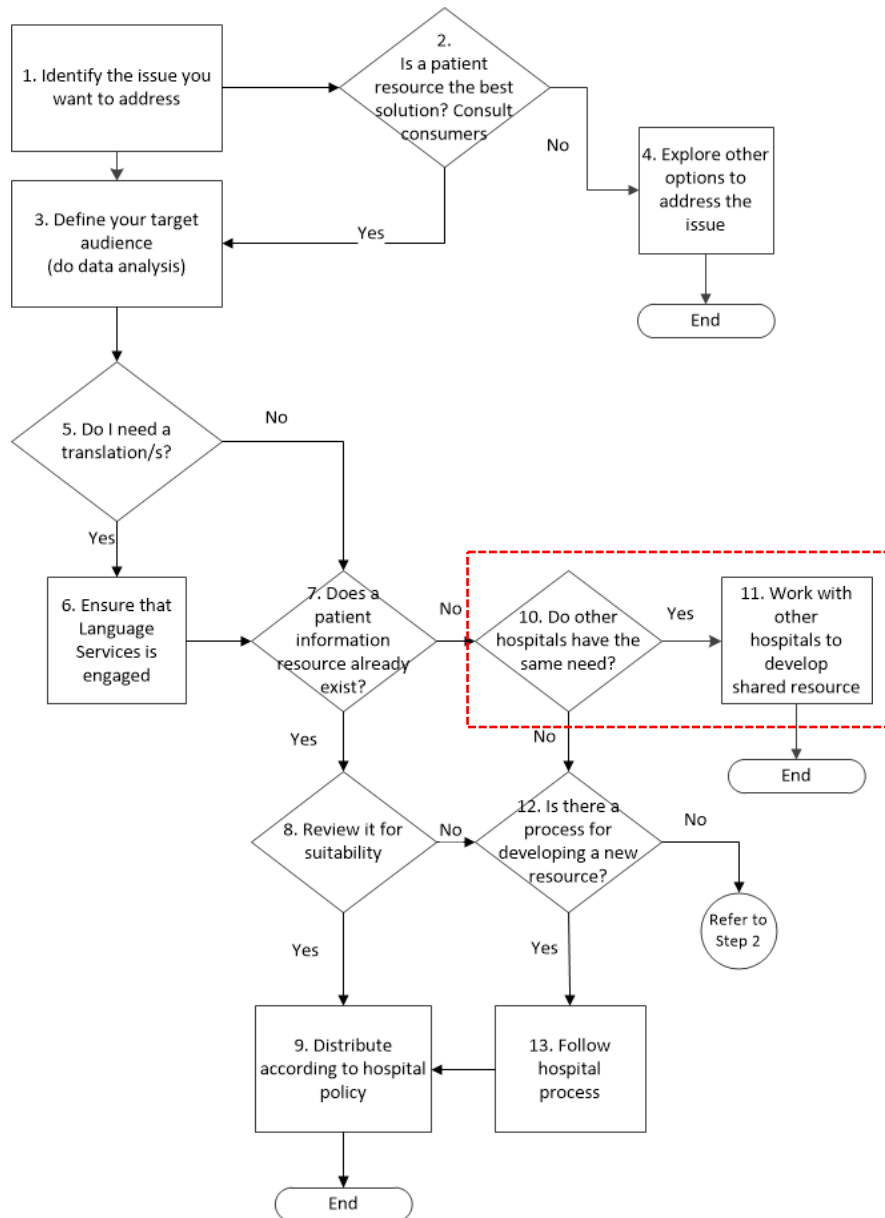
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9. Distribute the patient information resource according to the policy of your hospital.

This may involve contacting communications, nurse unit manager or someone else.

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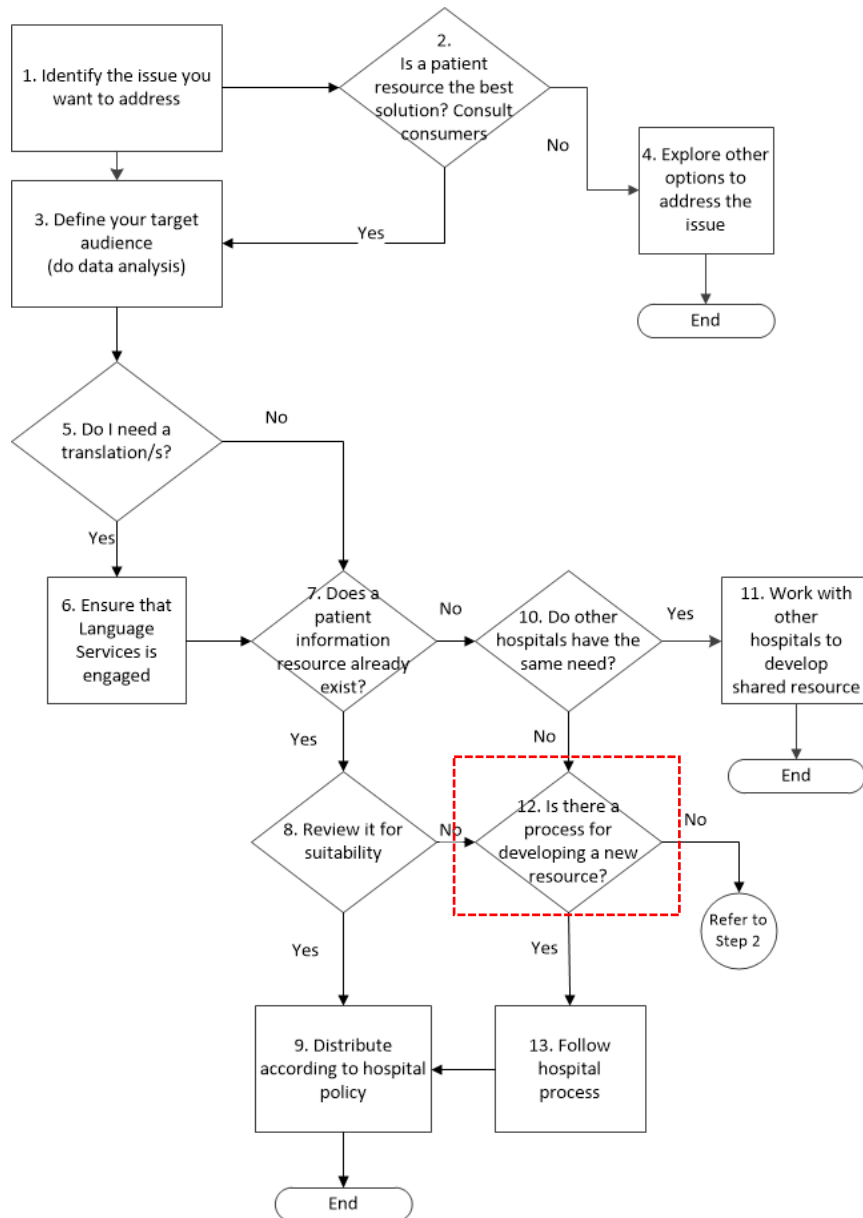


10. and 11. Do other hospitals have a similar need?

Contact other hospitals' clinical or patient experience teams to see if they require the same information resource. By working together you can share costs, avoid duplication and improve the quality of the end result.

This also helps to ensure patients receive equitable information provision in different hospitals.

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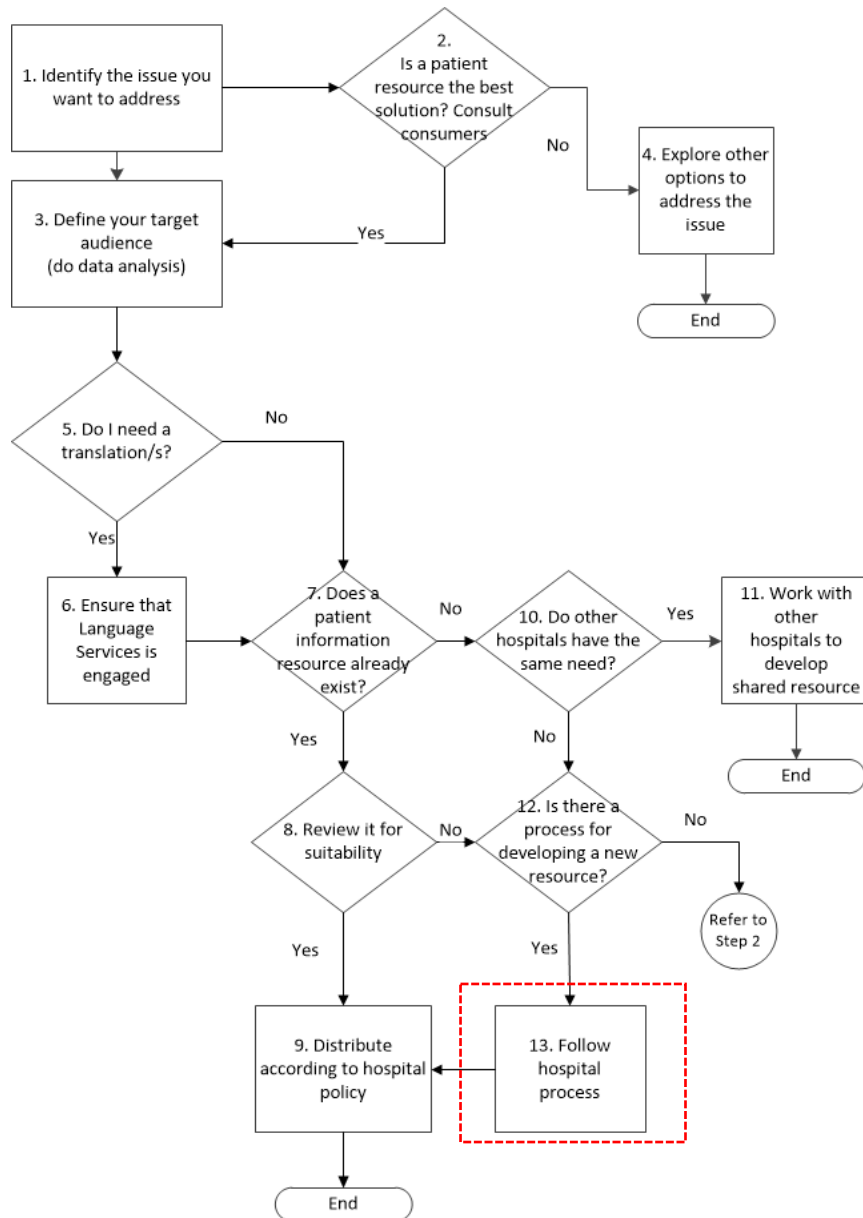


12. If the existing resource is not appropriate, based on your review, how do you make a new one?

Check on your intranet for information about your hospital's process for developing new patient information resources. There may be a contact person or committee.

If your hospital does not have a process, consider contacting the teams suggested in: [Step 2- Recruit a project team: What are the tasks and who can help?](#)

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13. Follow your hospital process to produce new patient information.

This may include a checklist and gaining approval from a patient advisory committee, or health literacy committee before commencing.

Step 2. Recruiting the project team and delegating tasks

Tasks	Suggested staff
<ul style="list-style-type: none"> • Ensure technical accuracy of content 	<ul style="list-style-type: none"> • Clinical teams
<ul style="list-style-type: none"> • Ensure the English language meets consumer/health literacy standards and processes • Organise testing/checking with consumers of English version 	<ul style="list-style-type: none"> • Consumers and/or Patient experience and/or Quality • Patient experience
<ul style="list-style-type: none"> • Manage translations • Checking of translations • Cultural considerations 	<ul style="list-style-type: none"> • Language services and/or Diversity team • Language services and/or Diversity team • Language services and/or Diversity team
<ul style="list-style-type: none"> • Project management • Branding • Distribution 	<ul style="list-style-type: none"> • Communications or Quality • Communications • Communications

Clinical departments have the expertise to ensure the accuracy and currency of the clinical information contained in the source document.

Consumers can provide information about their experience of the information. Their perspective and experience is key to assessing the impact of your project on patients. Most hospitals have patient experience team who can help you engage consumers. They may also have a checklist of questions to ask consumers in order to gain the insight you require.

Quality teams will help you ensure that your project is in line with continuous improvement initiatives (eg. with regards to health literacy). Patient information projects which involve different teams can be challenging with regards to coordinating different people and monitoring progress.

We have suggested that communications or quality teams might be well-placed to provide leadership in this area.