

# The Group Health Plain Language Network:

## A grassroots effort to build a plain language culture from the ground up



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### Background

The Group Health Plain Language Network is a staff-driven initiative to advance health literacy at Group Health, a non-profit, consumer-governed health system providing care and coverage to more than 600,000 members in Washington and Idaho. Despite extremely limited resources, the Network has completed several projects to promote plain language across the organization and engaged dozens of individuals and departments in support of a plain language culture.

### What is plain language?

Plain language is clear and concise, uses short sentences and common words, and is focused on the needs and attributes of the audience.

### Why plain language?

Focusing our initiative on plain language frames the problem of low health literacy around the complexities of the health care system instead of the varying skill sets of our patients. It is a solution-oriented approach that cuts across disciplines, supports patient-centered care, improves patient safety, and has a strong business case in other industries.

### Primary objectives

The Network's overarching goal is to establish a commitment to clear communication—using **plain language as a “universal precaution”** in verbal, written, and web-based interactions with all patients. The following objectives support plain language as a communication standard across our organization:

- Get **leadership buy-in** for a plain language initiative
- Create a **network of plain language champions**
- Launch a strategic **communication campaign** to build awareness and buy-in
- Develop **tools** to support plain language
- Provide plain language **training**
- **Revise print and web-based materials** in plain language
- **Involve patients** when developing health education materials
- **Evaluate** the impact of our initiative

Founding members and ongoing “drivers”	Other departments and programs represented	
	Early adopters	By end of 2008
Center for Health Studies	Clinical Knowledge Support	Clinical Improvement and Prevention
Communications and Community Relations	Continuing Medical Education	Governance and Consumer Participation
Health Information and Promotion	Executive Leadership	Legal
Patient Health Education Resources	Family Practice	Marketing
Patient Safety	Hospital Administration	Medical Library
Pharmacy Services	Human Resources	Medication Safety
	Interpretive Services	Nursing Operations
	Practice and Leadership Development	Population Management
	Quality Performance Review	Primary Care
	Web Services	Screening Programs

**Question:** How do you create a plain language culture when resources are scarce?

**Answer:** Build it brick by brick

**Before**  
Washington State law **guarantees that you have both the right and obligation to make decisions concerning your health. Your physician can provide you with the necessary information and advice, but as a member of the health care team you must enter into the decision.**

**After**  
Washington State law **protects your right to make decisions about your health care. Your doctor can give you information and advice, but it's always your decision** whether or not to receive treatment.

**Revise print and web-based materials** — The Network uses existing health education writers and other trained editors to carry out planned revision projects. Requests for plain language editing from a diverse range of departments also rose dramatically. Revised materials include:

- all print and web-based health education materials
- lab reminder and results letters
- departmental consent templates
- patient medication record and other medication management materials
- patient safety brochure
- pre-op instructions
- and dozens of others

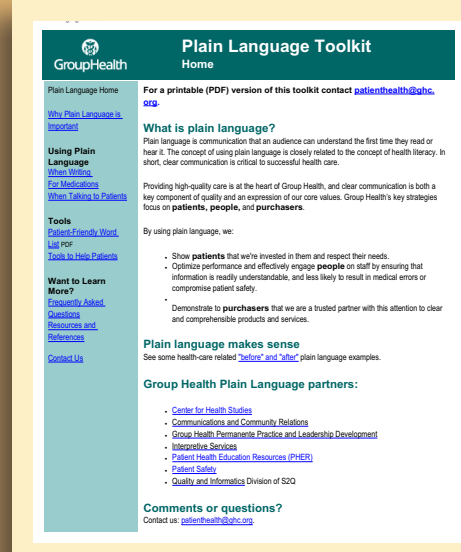
**Evaluate** — Securing a grant or other support for outcomes measurement is a top priority in 2009. Available measures suggest increased comprehension and satisfaction with two revised letters: 1) 100% decrease in calls to clarify, 2) 99% satisfaction with content and readability.

**Involve patients** — Feedback gathered from patients at the annual Group Health membership meeting informed revisions to the patient medication record. A comprehensive assessment of patient satisfaction with health education materials is under development.

**Training** — A plain language refresher training was provided to health education writers and other staff; a customizable “train the trainer” module lets individual managers orient their staff to plain language principles; clinical leadership approved and began offering an optional online health literacy Continuing Medical Education (CME) course developed by NCQA and HRSA.

**Before**  
During the birth process, a baby's eyes **may be contaminated during the birth with organisms that are shed from the cervix and the vagina. This can cause a condition known as conjunctivitis, or Ophthalmia neonatorum. If this conjunctivitis is caused from neisseria gonorrhoeae and goes untreated, it can rapidly lead to blindness.**

**After**  
During birth, **a baby's eyes can get infected with bacteria** from the cervix and the vagina. This can cause a condition called conjunctivitis. **If this infection isn't treated, it can quickly lead to blindness.**



**Tools** — An online plain language toolkit for all staff includes:

- rationale for using plain language
- tips for verbal interactions, print materials, and medication instructions
- a list of 700+ patient-friendly words
- plain language editing examples
- tools for patients and links to other resources

**Explaining things in plain language**

- Slow down the pace of your speech
- Use analogies  
“Arthritis is like a creaky hinge on a door.”
- Use plain, non-medical language  
“Pain killer” instead of “analgesic”
- Limit information - focus on 1-3 key points
- Review and repeat each point

**Senior Outlook**

**Plain talk about your health**

When Spokane resident Clark Franklin was diagnosed with diabetes eight years ago at the age of 60, he and his wife Anne found the medical instructions to be more confusing and intimidating. Luckily, they were in a fortunate Group Health staff as well as a member of the plain language network. Clark's doctor, Dr. C. C. “Cotton” Cannon, appeared to be a caring, approachable person and they both knew that they needed to talk to him about their health.

The Franklin's were recently taken with Franklin's doctor's phrasal verb “analgesic” and “analgesic” and they both knew that they needed to talk to him about their health. Clark's doctor, Dr. C. C. “Cotton” Cannon, appeared to be a caring, approachable person and they both knew that they needed to talk to him about their health.

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**Network of plain language champions** — We started with 12 members in 2007 and have grown to > 30 members from > 20 departments. Network founders and other key members serve as a guiding coalition, which meets quarterly and sets goals annually. Most Network projects are carried out by ad-hoc work groups. Individual Network members also initiate other plain language projects in their home departments.

**Communication campaign** — New resources are publicized in organization-wide broadcasts and targeted newsletters for subgroups of staff. Network members who work in communications write periodic stories about health literacy and plain language in various staff and member news channels. We also reach out to patients at key events for Group Health members.

**Leadership buy-in** — We secured executive-level support for a “Plain Language Charter,” establishing a leadership-endorsed plain language initiative. The charter ties plain language to existing organizational goals and shows cost savings and other benefits from various plain language efforts outside health care. While it doesn't allocate any new resources for the initiative, the charter gives the Network credibility, justifies time spent on Network activities, and begins to set an organizational expectation of clear communication with patients.

### Implications

- Organizational change strategies can help jumpstart plain language culture change.
- Framing our work around a solution (plain language) rather than a problem (low health literacy) was a key step that boosted buy-in.
- Plain language is a strategy that clearly aligns with other organizational goals. It also cuts across silos and engages staff who may not otherwise feel linked to low health literacy.
- Despite new tools and training for staff, we saw a large increase in requests for plain language editing. Providing an editing resource is vital.
- Our multi-faceted approach has helped change our culture. But each segment of our work can also stand alone.

### Key message

Even with no funding, frontline staff can work together to start building a plain language culture within a health system.

**Plain language saves money and improves outcomes:**

- Washington State: \$5 million extra revenue and 95% fewer hotline calls
- Veterans Benefits Administration: Raised response rate from 35% to 55% – with a cost savings of \$8 million per year

**It boosts productivity and increases employee satisfaction:**

- Federal Communications Commission: Moved all five employees who answered public questions by phone to other jobs.
- BANCO: 61% higher employee satisfaction, with 37% increase in productivity and 77% decrease in errors