



Health Literacy Check-Up

Introduction

Congratulations on taking your first step in becoming a Health Literacy CHAMPION.

NALHD's developed this check-up tool for you to assess the level of integration of health literate practices within your organization.

Contact NALHD's Health Literacy experts to discuss your technical assistance needs. Call us at 402-904-7946 or email nalhd@nalhd.org.

To be considered for a Health Literacy Champion designation, your organization must answer 'yes' and provide supporting documentation for at least:

- **2 items in the Focus Area of *Performance Management***
- **1 item in the Focus Area of *Policy and Procedures***
- **1 item in the Focus Area of *Community Partners***
- **You must also complete and commit to a Health Literacy Action Plan.**



Health Literacy Check-Up

Focus Area: *Performance Management*

To be considered for a Health Literacy Champion designation, your organization must answer 'yes' and provide supporting documentation for at least 2 items within this focus area.

* 1. Does your organization have a Health Literacy Category or is health literacy explicitly included as part of an annual Employee Evaluation?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

* 2. Which positions are evaluated on health literacy practices annually?

* 3. Which positions are NOT evaluated on health literacy practices annually?



Health Literacy Check-Up

Focus Area: *Performance Management*

Please submit copies of the evaluation template(s) used to evaluate health literacy for employees [here](#). If you are experiencing trouble uploading documents, please contact NALHD at nalhd@nalhd.org.

Note: If you are getting an error message related to attaching documents, you can restart the survey using an alternate browser such as Explorer or Safari. Your responses thus far will be saved.



Health Literacy Check-Up

Focus Area: *Performance Management*

* 4. Does your organization require any type of health literacy training for new employees within 6 months of hire?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

* 5. What type of health literacy training does your organization use? (check all that apply)

NALHD Health Literacy Trainings

CDC Health Literacy on-line training

Health Literacy Advisor Software Training

Workshop at PHAN

In-house training

Annual conference (please specify below)

Other (please specify below)

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

Please submit documentation of health literacy training for new and existing employees [here](#). If you have difficulties uploading documents, please contact NALHD at nalhd@nalhd.org.

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Health Literacy Check-Up

Focus Area: *Performance Management*

* 6. Does your organization require/provide any type of *annual* health literacy training for employees?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

* 7. What do you use for your organization's health literacy training? (check all that apply).

- NALHD Health Literacy trainings
- CDC Health Literacy on-line training
- Health Literacy Advisor Software Training
- Workshop at PHAN
- In-house training
- Annual conference (please specify below)
- Other (please specify below)

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

Please submit what your organization uses to document employee training here. If you have difficulties uploading documents, please contact NALHD at nalhd@nalhd.org.

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Health Literacy Check-Up

Focus Area: *Performance Management*

* 8. Does your organization evaluate employees on how well they incorporate Health Literacy best practices into their scope of work?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

* 9. Please indicate which Health Literacy best practices are evaluated (check all that apply).

Teach Back

CDC Clear Communications Index

Plain Language

Patient Education Materials Assessment Tool (PEMAT)

Limited use of jargon

Health Literacy Universal Precautions

Easy to Read Materials

Usability Testing

Use of pictures and models

Other (please specify below)

Comments:



Health Literacy Check-Up

Focus Area: *Performance Management*

Please submit the performance management tool(s) template used to evaluate how staff incorporate health literacy into their scope of work [here](#). If you have difficulties uploading documents, please contact NALHD at nalhd@nalhd.org.

Note: If you are getting an error message related to attaching documents, you can restart the survey using an alternate browser such as Explorer or Safari. Your responses thus far will be saved.



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

To be considered for a Health Literacy Champion designation, you must answer 'yes' and provide supporting documentation for at least 1 item in the Focus Area of *Policies and Procedures*.

* 10. Does your organization incorporate Health Literacy best practices and/or tools into presentations/programs?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

* 11. Please indicate the Health Literacy best practices and/or tools used in presentations/programs (check all that apply).

- Teach Back
- CDC Clear Communications Index
- Plain Language
- Patient Education Materials Assessment Tool (PEMAT)
- Limited use of jargon
- Health Literacy Universal Precautions
- Easy to Read Materials
- Usability Testing
- Use of pictures and models
- Other (please specify below)

Comments:

* 12. Does your organization routinely evaluate the effectiveness of Health Literacy best practices and/or tools you used in *presentations/programs*?

- Yes
- No

Comments:



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

* 13. Please indicate how your organization evaluates the effectiveness of Health Literacy best practices and/or tools used in *presentations/programs* (check all that apply).

- Participant Evaluation Form
- Peer Evaluation
- Quality Improvement Process
- Program Outcome Measure
- Other (please list/describe below)

Comments:



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

Please submit 1-3 examples of documentation used to evaluate Health Literacy best practices in presentations/programs [here](#). If you have difficulties uploading documents, please contact NALHD at nalhd@nalhd.org.

Note: If you are getting an error message related to attaching documents, you can restart the survey using an alternate browser such as Explorer or Safari. Your responses thus far will be saved.



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

* 14. Does your organization incorporate Health Literacy best practices and/or tools into *client interactions* (ie. Immunization Clinic, WIC, dental screening, one to one education, referrals)?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

* 15. Please indicate which Health Literacy best practices and/or tools your organization incorporates into *client interactions* (check all that apply).

Teach Back

CDC Clear Communications Index

Plain Language

Patient Education Materials Assessment Tool (PEMAT)

Limited use of jargon

Health Literacy Universal Precautions

Easy to Read Materials

Usability Testing

Use of pictures and models

Other (please specify below)

Comments:

16. Please *briefly* describe how your organization incorporates the Health Literacy best practices selected above into *client interactions*.

* 17. Does your organization have a policy which outlines how to include Health Literacy best practices and tools in the development of internal materials, including web-based materials?

Yes

No

Comments:



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

Please submit a copy of the policy used to develop internal materials, including web-based materials [here](#). If you have difficulties uploading documents, please contact NALHD at nalhd@nalhd.org.

Note: *If you are getting an error message related to attaching documents, you can restart the survey using an alternate browser such as Explorer or Safari. Your responses thus far will be saved.*



Health Literacy Check-Up

Focus Area: *Policies and Procedures*

* 18. Please indicate which Health Literacy best practices and tools your organization uses to develop your printed/web-based materials (check all that apply).

- Teach Back
- CDC Clear Communications Index
- Plain Language
- Patient Education Materials Assessment Tool (PEMAT)
- Limited use of jargon
- Health Literacy Universal Precautions
- Easy to Read Materials
- Usability Testing
- Use of pictures and models
- Other (please specify below)

Comments:



Health Literacy Check-Up

Focus Area: *Community Partners*

To be considered for a Health Literacy Champion designation, you must work with at least 1 Community Partner.

* 19. What type of community partners does your organization work with to promote health literacy? (Please select all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Preschool Providers |
| <input type="checkbox"/> Clinic (such as FQHC, Free Clinics, etc.) | <input type="checkbox"/> K-12 Education |
| <input type="checkbox"/> Private Practice | <input type="checkbox"/> Higher Education/Academic Institution |
| <input type="checkbox"/> Local Public Health Department (other than your own) | <input type="checkbox"/> Faith-based Organization |
| <input type="checkbox"/> State DHHS/Government Agency | <input type="checkbox"/> Community Organization (such as non and for-profit) |
| <input type="checkbox"/> State Organization | <input type="checkbox"/> Other (please specify) |
| <input type="checkbox"/> Childcare Providers | <input type="checkbox"/> N/A |

Comments:

* 20. Please *briefly* describe your organization's efforts to promote health literacy with your community partners.

* 21. Which of the following Health Literacy organizations does your organization participate in (check all that apply)?

- Health Literacy Nebraska
- Nebraska Association of Local Health Directors (Outreach Partnership to Improve Health Literacy)
- Health Literacy Missouri
- Health Literacy Wisconsin
- Institute for Healthcare Advancement
- Other (please specify below)
- N/A

Comments:



Contact Information

* 22. Please list your name and contact information in order to provide you with further technical assistance associated with this tool.

Name:	<input type="text"/>
Company:	<input type="text"/>
Address:	<input type="text"/>
Address 2:	<input type="text"/>
City/Town:	<input type="text"/>
State:	<input type="text" value="-- select state --"/>
ZIP:	<input type="text"/>
Email Address:	<input type="text"/>
Phone Number:	<input type="text"/>



Thank you!

Thank you for your interest in becoming a Health Literacy Champion.

You will receive a follow-up phone call/email shortly.

If you need to contact us, please email nalhd@nalhd.org.