



Activating previous knowledge – gathering information

Short description

Group activity. Activate previous knowledge by answering the questions and sharing the answers in mind maps.

Duration: 15 minutes

Learning goals

The student

- describes the characteristics of a shame free environment and how to establish that
- selects and describes effective communication techniques to identify the level of HL and to gather information

Materials

- 3 x A2 white sheet of paper
- Markers

The three questions are written separately on an A2 sheet of paper and placed on different tables in the classroom. Vary the number of papers depending on the group size.

- Question 1: What can you do to create a shame free environment?
- Question 2: How do you identify the level of Health Literacy of a client?
- Question 3: What are adequate communication skills you should use in gathering information from people with limited HL?

Instructions

Make mind maps about three subjects in subgroups.

Write down as many answers as possible on each question for 4 minutes.

Then go to another question and add new answers.

Underline three most important answers of the previous group(s)

- Question 1: What can you do to create a shame free environment?
- Question 2: How do you identify the level of Health Literacy of a client?
- Question 3: What are adequate communication skills you should use in gathering information from people with limited HL?







Tips for supervisors

WHAT CAN YOU DO TO CREATE A **SHAME FREE ENVIRONMENT?**

- Be aware that 1 out of 3 clientscould have limited HL
- Be aware of 3 levels of HL:functional, interactive and critical HL
- Don't judge immediately when a client isn't on time
- Adjust your website to a B1level (plain language). Add the 'reading outloud' functionality.
- Show pictures/pictogrammes close to the information inall your written communication
- Make the entrance of your practice/ clinic easy to find and welcoming
- Invite clientswhen it is their turn to enter
- The assistent/physiotherapistis attentive, friendly and helpfull
- Make eye-contact, speak slowly, don't be rushed, use normalising statements
- Etc....

HOW DO YOU **IDENTIFY THE LEVEL OF HEALTH LITERACY** OF A CLIENT?

- Fulfilling appointments or no -shows
- Poorly formulating questions
- Difficulty answering questions, e.g. client is unable to clearly indicate complaints or unable to name chronology
- Difficulty filling out forms / using instructions
- Making excuses: Sorry, I forgot my glasses

Could you fill out this for me, I write so illegibly.

I'll fill it out at home.

I can't read because I'm word -blind.







HOW DO YOU ACTIVELY **IDENTIFY THE LEVEL OF HEALTH LITERACY** OF A CLIENT?

- Offer leaflet upside down (client with limited HL will often not turn it to the right side)
- Ask how many years client has been able to go to school
- Ask if client receives help with reading leaflets or filling in forms:
 - "How confident are you that you fill in medical forms correctly yourself? "
 - "How often is someone helping you to read letters or leaflets from your GP or the hospital?"

"Do you find it difficult to find out more about your health, because you do not understand written information well? "

WHAT ARE ADEQUATE COMMUNICATION SKILLS YOU SHOULD USE IN **GATHERING INFORMATION** FROM CLIENTS WITH LIMITED HL?

- Be aware that 1 out of 3 clients could have limited HL.
- Be aware of 3 levels of HL: functional, interactive and critical HL
- Normalise = Acknowledge and connect to the experience
 - "How hard it must be for you to...," or
 - "Many people have difficulty with the language used by physiotherapists and doctors".
- Ask what the client knows, thinks and feels about his condition
- Do not presume much basic knowledge of the body







WHAT ARE ADEQUATE COMMUNICATION SKILLS YOU SHOULD USE IN **GATHERING INFORMATION** FROM CLIENTS WITH LIMITED HL?

- Use short sentences and simple words
- Be concrete, use examples from clients' ADL
- Avoid sayings and expressions
- Connect to the client's language use

References	Lectures:
	General communication skills
	Role of PT to apply HL
	HL on Micro level
	Gathering information - Challenges in Anamnesis







Recognizing non-verbal signs of possible Limited HL

Short description

Communication skills with drama exercise.

Training communication skills: verbal and non-verbal / create a shame-free environment

Duration: 10 minutes

Learning goals

The student shows effective communication techniques

- a) to make contact and create a shame-free environment
- b) to identify the level of HL

Materials

Short role instructions for the students in the exercise

Instructions

Exercise Recognizing non-verbal signs of possible Limited HL

Exercise 1

- Tell **one** student beforehand to express the following signs: do not look up, posture, and face a bit shy or restless, hands in the pocket or restless.
- Place two chairs in front of the group. Ask two students to take a seat and to remain seated in their position.
- Ask the group to look at them carefully as if they were seeing them for the first time.
 Ask them which of these two shows more non-verbal signs of limited HL.
 Then ask what this is due to and have them describe the signs as best they can.
- Then ask students to give instructions to the person with the limited HL: how to change the behavior / attitude to look more "literate."
 - **Or**: ask the student with Limited HL to change the behavior to look more "literate" and then ask the group to what extent he/she succeeded.







Exercise 2

- Beforehand take two students aside and choose which one of them has Limited HL. Ask how
 this student will express that (short sentences, looking shy, eye contact, plain language,
 interrupting, no coherence in sentences, etc.)
- These two students take a seat and have a 'meaningless' conversation with each other. It can be gibberish or a Red Riding Hood fairy tale, for example, in which you follow each other in the story. The content of what they tell is not important.
- After a few minutes, ask the group who has limited HL and what made this visible.
- Afterwards, discuss the attitude and use of voice, interrupting, etc.

Reflection

Ask every student in the group to imitate the possible non-verbal behavior of a person with limited HL. Then ask how that feels. What are the consequences of this non-verbal behavior (for example) for your mood / your self-confidence and confidence in other people?

Tips for supervisors

Be aware of generalization. Not every person with LHL will act like this and not everybody that shows these signs has LHL.

Other possible signs of LHL

- You make little or no eye contact
- You have a closed body posture
- You are a friendly person, smile all the time.
- You doubt when giving answers (you also show that in the facial expression)
- Your answers are socially desirable and do not always fit the question asked
- You wait a while before answering.
- Give an answer on every question but the answer is not always right.
- You do not ask questions.
- It is difficult for you to tell your problems in a chronological order.
- You sometimes interrupt the PT when you think of something that is important, but in fact it
 is irrelevant

The client lacks skills to engage in conversation with the physical therapist about the own health. Interactive health skills are limited.

Interactive health skills are more advanced cognitive skills used together with literacy and social skills to actively participate in daily activities to find information and derive meaning from different forms of communication and to apply new information to changing circumstances.







Roleplay - Recognizing HL

Short description

Roleplay: recognizing the signs of limited health literacy

Duration: 15-30 minutes

Learning goals

The student:

recognizes and demonstrates the (non-)verbal behavior of clients with and without LHL

 shows how to adequately react to these signs by using e.g., plain language and normalizing statements

Materials

- 1. PPT Recognizing limited HL
- 2. Role description Physiotherapist
- 3. Role description Client

Instructions

You will learn to recognize a client with limited HL by the (non-)verbal information the client provides. You will also learn how to create a shame-free environment and how to react, for example with using plain language or normalizing statements or a reflection.

Make groups of 5-7 students.

Two students are physiotherapists and prepare a conversation in which they ask the clients:

- how they experienced the doctors' visit?
- what the doctor told them about their complaint?
- and why the doctor referred the client to the physiotherapist?

One student plays the role of a client without limited HL.

The other students play the role of a client with limited HL: functional, interactive and critical HL.

Let them choose a role and prepare their verbal and non-verbal reactions.

After each round every student writes down which level of HL they expect the client to have (mention aspects from functional, interactive and critical HL) and why.

After all rounds they give their feedback. Who correctly matched the type of HL to the client case?







They can also reflect on the reactions of the physiotherapist. What kind of feeling did that give them and why? What can they say about normalizing statements, plain language, mirror behavior, reassuring attitude, gestures, and facial expressions?

Preparation

- 1. Read the slides of the lecture about recognizing signals of HL and how to react
- 2. Study the reflection tool and divide the items for feedback among the observers
- 3. Every student prepares the own part, and the student who plays the role of the client prepares the role.

Reflection

Give feedback after each student finishes their part.

- 1. The student who plays the physiotherapist describes what went well and then what to do better next time.
- 2. Then the observers give their feedback
- 3. And to conclude the patient gives feedback.
- 4. The physiotherapist summarizes the main (3) feedback where to focus on next time.
- 5. In case there is enough time, the physiotherapist can show the role-play again with a focus on the 1-2 feedback points. An observer can have the role of a 'film director' and gives directions when the physiotherapist does not focus on the feedback points. The aim is that the physiotherapist demonstrates the feedback point(s) in the right way this time.

Compare your self-assessment with the peer feedback, reflect on and write down which skills you are satisfied with and which skills you can still improve. Formulate new learning goals and a plan of action.

Tips for supervisors

Read the Teachers' manual: How to work with a simulation patient (role-player)

Reflection tool: Students can choose items from the reflection tool to focus on in the role play. Or the student describes which focus should be addressed in the reflection.

References

Lectures

- Role of physiotherapist
- HL on micro level
- General communication skills

