

Health Literate Organisation



Leadership
commitment &
policies

A key leadership role(s) has been identified. The person(s) will be accountable for ensuring that the organisation becomes health literate in the way it supports its service users. There is a specific health literacy policy in place to embed health literate ways of working across the organisation.



Co-production &
service user
engagement

Service users are directly involved in the creation of documents, online resources or processes that the organisation delivers. Where co-production is not possible, service user feedback on materials is sought and acted upon.



Staff awareness &
ways of working

People in this organisation know what health literacy is (both “people” and “organisational”). Leadership and other influential roles have attended training. Key service-user facing roles have had training tailored to their role (which includes practical techniques for effective health literate communication).



Written
communication

Written communication is appropriate for the people it is intended for. Plain language (whatever the language) is used. Appropriate words and images are used to aid understanding. Ideally, the people whom the communication is intended for have been involved in its creation. If not, those creating the materials are aware of the importance of health literacy and how to use health literacy tools and techniques.



Verbal
communication

Verbal communication is prioritised so that service users feel more confident in being able to act on the health information that is shared with them. Service users also feel part of the decision-making process regarding their health. Those people who have interaction with the public know how to, and feel confident to, use health literacy techniques such as teachback and chunk and check.



Physical
layout

Where applicable the physical (and virtual / online) layouts of the organisation support people in finding and accessing services. Service users feel as comfortable and confident as possible when using the service to support their understanding, and ability to act on, health information.



Evaluation &
continuous
improvement

There is a conscious effort made to evaluate the impact of the actions taken to become a health literate organisation. Where possible, ‘before’ and ‘after’ measurements are made. Successes are publicised. Areas for improvement are identified.



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