Mutual Understanding
Health literacy is the “cornerstone” of effective communication

IF YOU HAVE EVER LEFT YOUR CLINICIAN’S office confused as to what you should do next or just how often to take your medication, you are not alone. Nearly 90 million adults in the United States have difficulty understanding and using health information, according to a 2004 report from the Institute of Medicine.

That ability to obtain, communicate, process, and understand basic health information is known as health literacy and Yale Health is making it a top priority to ensure that you never walk away from
Your visit without knowing exactly what to do next.

“Health literacy is a two-fold process,” said Dr. Andrew Gotlin, chief of Student Health and Athletic Medicine. “It is the clinical staff’s ability to clearly communicate to the patient, but it is also the ability to understand what the patient is trying to tell us. It’s an idea that sounds so simple, but it’s actually very difficult to achieve.”

Your education, language, and cultural background are often factors in your ability to understand healthcare information. As part of Yale Health’s Partnership for Patient-Centered Care (see below), all of those factors will be recognized and respected and your opinion and preferences will help to shape your healthcare plan.

“The patient has a big role and we have to help them become activated in that role,” Gotlin said. “A highly-activated patient wants to understand decisions and be involved in them. When we have patients who are engaged in their care, it typically leads to better health outcomes.”

In order to get to that point, your clinical care team must first understand your health literacy baseline. Yale Health will use the “Single Item Literacy Screen,” a highly-validated tool that can help assess the health literacy level of many patients with a single question. The screen will become part of the process for preventive visits in the primary care departments of Internal Medicine, Obstetrics & Gynecology, Pediatrics, and Student Health.

If you are found to be at risk for low health literacy, a nurse will ask to meet with you to discuss some of the challenges you are having in understanding your health information and work toward a solution based on your needs.

Yale Health will also use a tool called the “Teach-Back, Show-Back” method, which asks you to repeat health information back to your clinician or demonstrate how to use a device such as an inhaler to ensure proper understanding prior to leaving your visit.

“Healthcare terms can be difficult,” Gotlin said. “Understanding each other is such an important element of the healthcare relationship. With improved health literacy, visits become more satisfying for both the clinician and the patient, which ultimately leads to a healthier patient.”

What is Partnership for Patient-Centered Care?

The relationship you have with your clinical care team is, at its core, a partnership. Health care does not exist without both a patient and a clinician.

Partnership for Patient-Centered Care, a new strategic initiative at Yale Health, helps to strengthen that partnership by ensuring that you are respected and cared for as a unique individual and that your opinions, choices, values, beliefs, and cultural background help to guide the care you receive.

You will be treated with respect and dignity and your clinicians will provide you and your family with information that is complete, accurate, and easy to understand. You and your family will be supported to actively participate in your care and decision-making at whatever level you feel comfortable in order to help you reach your health goals.

When you and your family are more engaged in your healthcare decisions and goals, it helps your clinicians better understand your needs, builds better relationships, and has been shown to improve health behaviors and outcomes.

While this model of care is not a major change for Yale Health, there is a renewed focus on this initiative to do it more consistently as an organization to ultimately lead to a more positive experience for you and your family.

To read more about Partnership for Patient-Centered Care at Yale Health, see “From the Desk of Paul Genecin, MD” on page 3.
FROM THE DESK OF PAUL GENECIN, MD

Sometimes it feels like we’re bombarded with health-related information: advertisements about the newest drug and its scary sounding side effects, newspaper articles about exciting new research, talk shows about wonder diets, and office chatter about whatever “bug” is making the rounds. It’s all around us and sometimes it feels like too much information.

Yet, in the midst of all this, we know that many people lack basic information about health and disease that would make it easier for them to reach their health goals. Good, useful information is always competing for our attention with rumor, hype, and traditional ideas (like catching a cold from sleeping in a draft). And biology is complicated. A useful understanding of many disease conditions requires time and effort at the very point when you may feel like you have little of either to devote to your health education.

In this issue of the newsletter, we highlight the topic of health literacy and its importance in our concept of patient-centered care. One of our commitments to you is to provide you with useful, understandable information that allows you to participate more fully in your own care. We will be talking with you in your visits about how well you understand the information we provide and what we can do to communicate more effectively. Our interest in health literacy has nothing to do with your reading ability or educational level. It’s really a matter of whether you have the knowledge you need to take effective charge of your health.

Of course, you shouldn’t feel you need to wait for us to initiate a discussion when there are things you don’t understand as well as you wish. No one should feel embarrassed or reluctant to say “I really don’t understand what you just told me” or “what does this test result really mean?” or “I have some more questions about this medicine.” We welcome your questions.

We’ll also do our best to help you find reliable information on your own, if that’s what you prefer. An excellent place to start is with our Web site at yalehealth.yale.edu. The Take Care of Your Health page has links to a great deal of high-quality, user-friendly information.

It’s often said that knowledge is power. This is especially true when it comes to managing your health. More knowledge allows you to make better-informed decisions to stay healthy and to participate more fully in your treatment if you become ill. Giving you information you can use, in a way that is understandable to you, is part of our commitment to better communication.

Working together to put you at the center of your health care is our goal and our promise. I hope you will accept this invitation of partnership. Because, we’re better together.
Engaging Discussion
Yale Health creates Patient & Family Council

As the healthcare provider for roughly 37,000 people in the Yale community, Yale Health is constantly embarking on new initiatives, with the most recent focus on patient-centered care. The newly-created Patient & Family Council gives Yale Health an opportunity to partner with a diverse group of its members to develop and implement patient-centered practices.

“The council allows our members to help shape how we put things into practice throughout the organization,” said Nadine Morandi, associate director of patient experience. “This is not a focus group where the members just tell us the things they would like to see happen. We have people on the committee who are very committed to our vision and are willing and prepared to help see an idea through to fruition.”

Fourteen Yale Health members were selected for the council after submitting applications and going through an interview process with Yale Health leadership. They join four Yale Health leaders to meet throughout the year. The council members represent diverse backgrounds both personally and professionally and include clerical and technical staff, managerial and professional staff, faculty, retirees, as well as spouses of employees who are Yale Health members.

“We are really proud of the selection process we’ve put in place and it speaks to the level of commitment Yale Health has put behind this,” Morandi said. “We have different ages, genders, tenures, cultural backgrounds as well as different University roles and classifications. Some people have families with children and some do not. We really wanted to be broad in the composition of this group to allow for the best possible thinking.”

To this point, topics for the council include MyChart and various patient engagement strategies. Half of the members will have a one-year term while the other half will have a two-year term in order to avoid the entire council turning over at the same time. Yale Health is accepting applications for future seats on the council as well as opportunities to become a patient-partner on other committees and initiatives that take place throughout the year.

“We have identified patient-centered care as one of our strategic initiatives and we are looking for ways to engage our patients more,” Morandi said. “One way of engaging our patients is through the clinical encounter as well as through the patient-provider relationship. The Patient & Family Council gives us an additional opportunity by working together, routinely with our members, to implement ideas that will ultimately benefit the entire Yale Health population.”

To learn more about the committee members or to submit an application, visit yalehealth.yale.edu/volunteer.
University Unveils Tobacco-Free Yale Assistance Program

LATE LAST YEAR, PRESIDENT PETER SALOVEY announced Yale would become a tobacco-free campus. The University is providing a unique behavior-focused solution to help meet that goal.

The Tobacco-Free Yale Assistance Program includes telephonic coaching to allow participants to develop a trusting relationship with a health coach and create an individualized plan for change. The health coach takes a whole-person philosophy in multiple areas of life and health to uniquely tailor the tobacco cessation program to each individual.

Those interested in becoming tobacco-free can call 866 237 1198 to speak with a Yale-dedicated engagement specialist to enroll in the program. The engagement specialist will conduct a 10-minute health survey, assign the participant a health coach, and schedule the first telephonic appointment.

The first two phone calls with the health coach are generally 30 minutes long with subsequent calls lasting roughly 15 minutes each. The frequency of appointments is based on individual needs.

The program is available to all Yale faculty and staff members as well as their dependents.

Participants may also discuss options for nicotine replacement therapy (NRT) or other tobacco cessation prescription medications with their health coach. Yale Health members are eligible to receive six months of NRT or other tobacco cessation prescription medications with no co-pay at the Yale Health Pharmacy. A prescription is required to use this benefit and can be discussed with the health coach.

“One of the University’s top priorities is the health and well-being of its faculty and staff,” said Lisa Kimmel, MS, RDN, CDN, senior wellness manager of Being Well at Yale. “We understand that quitting tobacco is difficult and complex and the University is committed to helping create an environment to support faculty, staff, and their families in their quit attempts.”

For more information, visit http://beingwell.yale.edu/programs/smoking-cessation-resources.
New Clinicians Join Yale Health

Bryce Serpe, PA-c
Acute Care

Bryce Serpe has joined the Acute Care Department after spending more than a year at Stony Creek Urgent Care where she treated patients ranging from pediatrics to geriatrics in an outpatient care setting.

She had previously worked in the emergency department of Waterbury Hospital, performing physical exams, interpreting diagnostic reports, and working on treatment plans with the patient’s medical team. Serpe has also worked at the Cornell Scott-Hill Health Center where she assisted in the management of chronic diseases such as hypertension, diabetes, and asthma, collaborated on a smoking cessation grant program by providing counseling on techniques to quit as well as medication education and management, and provided acute care services at homeless shelters, soup kitchens, and social recovery programs.

She earned her undergraduate degree in general health sciences from Quinnipiac University in 2006 and her master’s degree in general health sciences, physician assistant studies from Quinnipiac University in 2008.

She is certified by the National Commission on Certification of Physician Assistants.

Andrea Jacobs-Stannard, PA-c
Dermatology

Andrea Jacobs-Stannard received her undergraduate degree in biology and chemistry from the University of Rochester in 1998 before earning her MPH in epidemiology from the University of Medicine and Dentistry of New Jersey in 2002. She graduated from the Yale University School of Medicine’s physician associate program with her master’s of medical science degree in 2004.

Prior to becoming part of the Dermatology Department team, she provided comprehensive medical and cosmetic dermatologic care at Dermatology Physicians of Connecticut for more than a year. Jacobs-Stannard had previously worked in the Griffin Hospital Emergency Department/Convenient Care where she treated acute and urgent care patients of all ages, including pediatrics.

She is a clinical instructor of medicine at the Yale University School of Medicine and a member of the American Academy of Physician Assistants.

FROM OUR MEMBERS

“I had an incredibly good experience with my doctor. He took his time in explaining things to me and discussing my options and I never felt like he was rushing to get me out of there. I came out of the appointment feeling very confident about what we had decided.”

“My clinician always shows the utmost care and concern for my condition, and well-being in general, and I like how he educates me on my condition and includes me in the decision-making process.”

“My clinician was extremely respectful of my background and personal choices.”
**ACUTE CARE**

**When Should I Come to Acute Care?**

Acute Care is there for you when you have a sudden injury or new illness that presents worrisome or concerning symptoms. It is always best to call ahead to your primary care department of Internal Medicine, Obstetrics and Gynecology or Pediatrics, if possible, to have a conversation with a triage nurse to determine the most appropriate setting for you to receive care for your situation, which may include a visit to Acute Care.

Having that conversation is the best policy whenever you can as more serious issues such as chest pain may lead to the nurse advising you to go directly to the hospital.

There are also situations where you may be sent to the hospital from Acute Care, especially if your issue is time sensitive. In the event of new stroke symptoms, a severe allergic reaction or a severe injury, you should call 911 and go directly to the hospital.

For situations where you just don’t feel quite right, it is best to call your primary care department during regular business hours or Acute Care after hours, weekends, and holidays to speak with a nurse.

Roland Jermyn, MD
Chief, Acute Care

**PHARMACY**

**What is a Pharmacy Formulary?**

A formulary is a list of drugs that an insurance company uses to identify which drugs are covered by the insurance benefit as well as the tier they are assigned, which determines your co-pay when you fill your prescription.

Yale Health’s formulary, or Drug List, is determined by a group of physicians, pharmacists, and specialists who make up the Pharmacy and Therapeutics Committee.

Medications in the Yale Health Drug List are divided into three tiers. A tier 1 drug is made almost entirely of generic medications and first-step therapies for treating conditions and has the lowest co-pay. A tier 2 drug, or preferred brand, is a brand-name product with a mid-range co-pay and is preferred over the tier 3 drugs. Tier 3 drugs are brand-name products that are usually new to the market or have an alternative drug therapy available in a generic equivalent. Tier 3 drugs have the highest co-pay.

The Yale Health Drug List contains 800–900 products available in the Yale Health Pharmacy and includes their tier and any restrictions they may have. The Drug List is available at yalehealth.yale.edu/druglist.

James Porzio, RPh, MPharm
Pharmacy

**Making the Rounds**

**HEALTH AND WELLNESS INFORMATION FROM YALE HEALTH STAFF**

**BEHAVIORAL THERAPY**

**What is Web-Based Cognitive Behavioral Therapy?**

Mental health treatments are often divided into two types. One is medication based and one is based on psychotherapy, an interactive process most often involving a conversation between the patient and a mental health professional. Cognitive behavioral therapy (CBT) is a special type of psychotherapy aimed at changing patterns of unhelpful thinking or behaviors.

Confidential web-based CBT, offered by Magellan Healthcare, is relatively new, but provides many of the same functions you would see during in-person therapy. This model of care presents you with a number of questions and worksheets to encourage you to examine your thoughts or behaviors and, based on your answers, offers various choices of alternative thoughts or behaviors to practice.

The web-based care includes programs for depression, substance abuse, anxiety, insomnia, and obsessive compulsive disorder.

To access these web-based services, visit yalehealth.yale.edu/behavioralhealth and click on the link to Magellan Healthcare. You can then click on the Benefits tab and Web-Based Care.

While you may find this web-based care helpful, it is not meant for severe or urgent issues. If you have a problem that is interfering with your ability to function day-to-day, it is always recommended that you consult a mental health professional for advice. In these cases, you can contact Magellan Healthcare directly at 800 327 9240.

Borislav Meandzija, MD
Chief, Behavioral Health

For more on these topics, listen to the complete healthcasts on yalehealth.yale.edu/healthcasts.

yalehealth.yale.edu
KEEP IN MIND

Pharmacy Summer Hours
Tuesday, May 31st through Saturday, September 3rd.

Monday – Friday 8:30 am – 6:00 pm
Saturday 8:30 am – 2:30 pm

The pharmacy will be closed on Monday, May 30th in observance of Memorial Day and Monday, July 4th in observance of Independence Day.

Do you ever find it hard to understand health information?

Let us know, so we can help.
It’s our job.

Working with you to help you take control of your health.