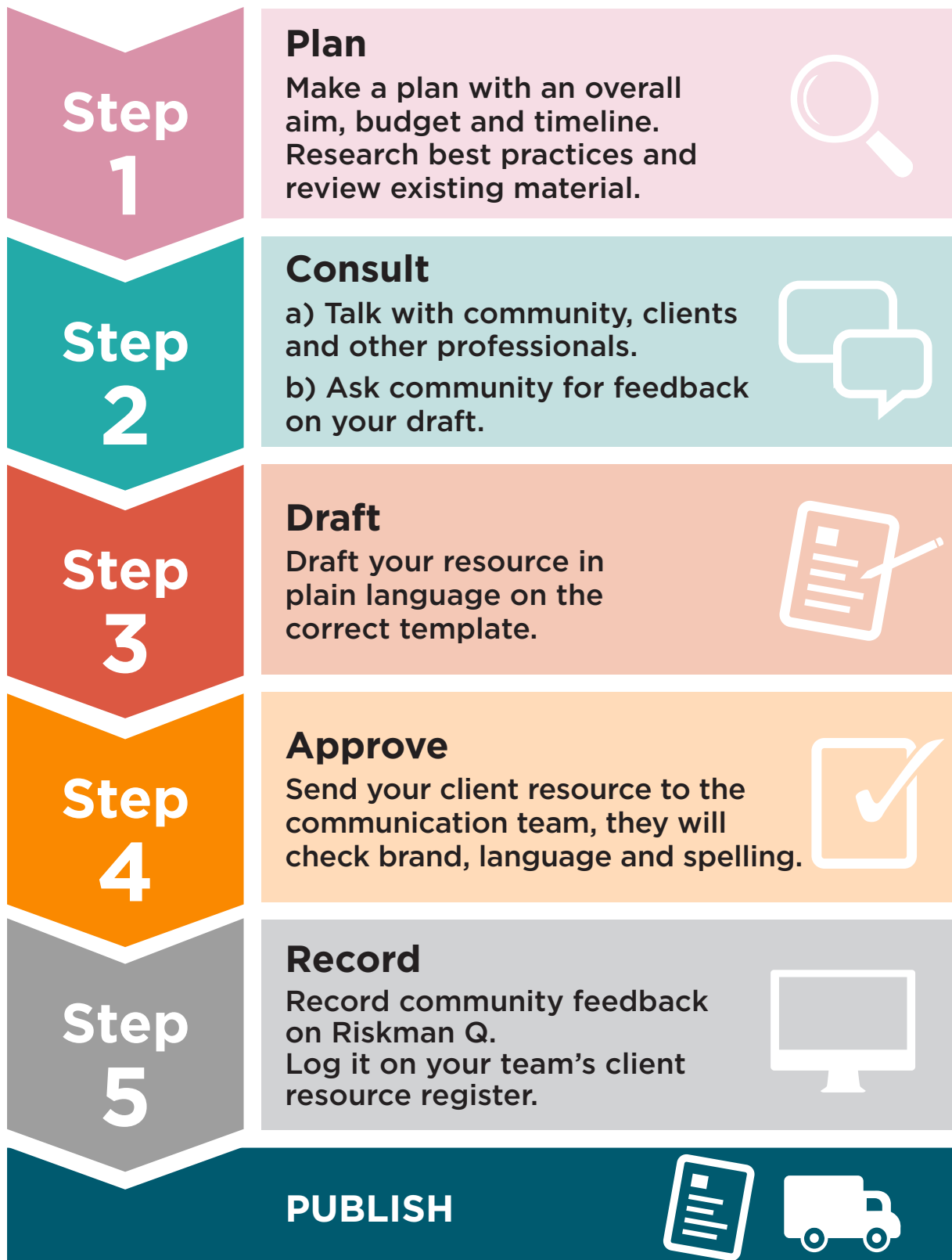


# Health Literacy Guide

Making client resources  
easy to use  
and understand



# How to make a client resource



For more information or assistance contact the communication team at [communication@ipchealth.com.au](mailto:communication@ipchealth.com.au)

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# About the health literacy guide

This guide will help you to produce professional and easy to read flyers, brochures, handouts, forms, letters, surveys and PowerPoint presentations for our clients.

We recognise that health literacy is a safety and quality issue in healthcare and we are committed to communicating and writing in plain language.

Plain language is easy to read, understand and use. It avoids the use of complex sentences, phrases and jargon.

Writing in plain language supports and facilitates a person's access, understanding and use of health information irrespective of their health literacy skills. It is important that the information we give clients is accurate, concise and in line with organisational policies.

All client resources produced by us should meet the health literacy guide standards. Using resources published by other organisations and peak bodies is allowed providing they meet our clients' needs. All other materials should follow the corporate style guide.

## **Health literacy tools and resources on iNet**

There are a range of health literacy resources and tools available on iNet for staff

How to find them:

1. Log on to iNet
2. Click on 'One-Stop-Doc-Shop' on the left hand menu
3. Look under category > 'Health literacy'

# STEP 1

## PLAN

- Plan your time for consultation, drafting, approval, printing, translating etc.
- Investigate clients' needs. Then purpose and content of the resource
- Consider developing a timeline and indicate potential costs
- Think about who you need to involve and how you will involve them: clients, community, colleagues and other stakeholders
- Get approval to undertake this work from your manager

## Plan

Written health resources must be simple and seek to empower people to take control of their health rather than just provide information. To create an effective resource, authors must understand their target audience, the intended goals for the resource, and the context it will be used in.

## Investigate

Consult your intended audience and your colleagues. Then take your idea and your plan to your manager for approval.

Demonstrate that you have thought about the following:

### 1. Overview of the resource

- Does a similar resource already exist that can be used or adapted?
- What is the purpose of the resource?
- Who is the target audience? Why?
- Why is the resource needed?
- What are the three important messages?
- Will it need to be translated, if so in which languages?

### 2. Timeline

There are many things to think about before you start drafting. The time required to do this will depend on the type and length of the resource.

Allow adequate time for:

- Consultation with staff and community members
- Drafting the resource, getting photos and images
- Testing the resource with community members
- Getting it approved and printed

### 3. Anticipated costs

With your manager, consider costs associated with:

- Translation
- Printing
- Graphic design if appropriate and approved

The Communications team can help you investigate and plan your resource. Contact them by email at **communication@ipchealth.com.au**

## Investigate the topic

Whether you have identified a need for a new client resource or are reviewing an existing resource, you should investigate and research your topic.

Your investigation may include:

1. Searching existing literature and similar resources available on the topic
2. Reviewing professional recommendations and best practice
3. Asking your colleagues, community, clients and carers:
  - For their opinions/beliefs on the topic
  - What information they would want to know?
  - How they would like to receive the information?

For more information and tools to help you consult with community, clients and carers go to **Step 2 - Consult** (page 9).

## Things to think about before preparing your draft

### **Limit the number of messages**

Write only the key points of information that the reader needs to know. Give your audience no more than three or four main ideas in each section of your resource.

### **Begin your resource with the most important information**

To engage your readers quickly, give the most important information first, then tell them what action they need to take. Tell readers how your document will help them. Answer the question 'What's in it for me?'.

### **Focus on what your audience needs to know and do**

Focus on what matters most to your readers. Address their issues and concerns as well as possible misunderstandings. For example, your readers don't need to know how and when Lyme disease was discovered, instead tell them how to prevent it.

### **Organise your key messages in the order that your audience will use them.**

Stick to one idea at a time. Use headings and subheadings to highlight new information.

## Printing

Be aware that any colour in your draft will transfer differently when printed in black and white.

Do a test print to make sure colour and margins are correct and of high quality.

- **Colour printing** is available at each campus. Ask a manager at your campus for the contact details of the nominated staff member. It may take up to three working days for colour printing to arrive to you once you've requested it.
- **Professional printing** - some resources may be printed externally. You need your manager's approval and budget allocated to do this.

## Getting resources translated

English phrases can lose their meaning when translated into other languages. Therefore it is important that all client resources are first developed in plain English before being translated into another language. This assists the translation process.

We can translate some languages in house; others will be translated by an external agency. The cost is covered by the program that requires the resource.

Speak to your manager for more information.

### Process for translating client resources:

1. Follow the same process for developing client resources in English
2. Get your manager's approval to translate the resource into specific languages
3. Ask for a quote
4. Use a bi-lingual community member to test translated resources with the community who speaks this language

### Common pitfalls to avoid when having written resources translated:

- Be careful to not translate English slang phrases or idioms literally
- Do not translate into a dialect unless it is used by your audience
- Take care to not omit foreign language characters or accent marks used in that language. Missing characters or punctuation can change the meaning of a word or sentence
- If you list a phone number to call for more information also add that a phone interpreter can be organised





## STEP 2

## CONSULT

- Consult community to help you plan and develop the resource
- **Community members** include anyone who lives, works, accesses services or studies in Brimbank, Hobsons Bay, Melton or Wyndham
- Consult your colleagues and other stakeholders
- Test the draft with community and clients, incorporate their feedback
- Log community feedback on Riskman Q as a quality activity

## Consult community members

The best way to judge if your resource will be read, understood and if it meets the needs of your target audience is to plan it, develop it, and test it with them.

### Before starting a resource

Get an understanding of your target audiences' values, their understanding of health and their cultural perspectives. This will help you draft a resource that meets their needs, is appealing and culturally specific. It will also save you time re-drafting and re-testing a resource.

Ask community or clients about the topic. Find out if they would like to receive more information and how they would like to receive it: paper, electronic, video, images etc.

### Test the draft resource with community

When testing the draft with community you are aiming to find out if it:

- Provides the reader with the information they need
- Helps them remember key points
- Is straight to the point, easy to understand and easy to use
- Is appealing and appropriate to them when considering age, gender and culture

### Who should be consulted?

Members of the community who represent your target audience should be consulted. They will help you to develop resources that are culturally appropriate and presented in a way that will engage your target audience.

### How many people need to be involved?

A minimum of 5 community members should provide their input or feedback.

### Where can I recruit community members from?

- Use our community participation register
- Contact the community participation officer on 8368 3000
- Ask existing clients, carers and their families
- Utilise community groups
- Ask organisations that work closely with your target audience for help

## How can I consult community for feedback?

Community can provide feedback via focus groups, surveys, or simply by asking them what they think (i.e. you may ask clients while they sit in the waiting room).

The table below suggests the method you may use depending on the type of resource you are developing.

Type of client resource	Focus group	Survey	Ad hoc
Client forms - (e.g. consent)	✓		
Testing usability of website	✓		
Surveys or questionnaires	✓		
Reports - (e.g. Quality of Care)	✓		
Letter templates	✓	✓	✓
Handouts	✓	✓	✓
Flyers	✓	✓	✓
Service brochures	✓	✓	✓
Website pages	✓	✓	✓

Notes:

- Choose one of these methods. One method is sufficient
- When existing resources are updated they should be retested
- Surveys can be completed in person, online or by mail

## What questions should I ask?

Use the **Community feedback survey** (page 35) to guide your conversation with community members. The survey questions can be adapted for any type of consultation.

Remember to:

- Explain who the resource is for and how it is given out to clients
- Give the 'tester' a colour copy of the draft resource
- Use the survey questions to guide your conversation
- Write down or record their responses

In a focus group:

- Use open-ended questions
- Ask community to explain in their own words a section of the resource
- Or act out a specific instruction, activity or exercise

## Focus group testing resources

You won't get as in-depth information from survey or ad hoc testing as you will from a focus group.

**A focus group** is a small group of people (minimum of 5 - 8) who come together with a facilitator to share their point of view on a topic. It is the preferred method of consultation as it encourages group discussion, problem solving and decision making.

**We recommend that all forms, surveys or questionnaires be focus group tested.** This is to make sure they are easy for someone to fill out correctly.

**Test usability of forms or questionnaires by asking the following questions:**

- Which questions did you find hardest to answer? Tell me about that
- Which questions did you have difficulty answering?
- Were there any questions you felt uncomfortable about answering? Why?
- Were any of the multiple choice combinations missing an answer?

## What do I do now with the community's feedback?

Evidence of community consultation must be recorded for accreditation of the organisation's quality and safety standards.

Record the community feedback you receive. The evidence of community feedback and the resource are logged into Riskman Q as a quality activity.

For more information, see **Step 5. Record** (page 32) and **Tool 3** (pages 37).

## Find more community consultation tools on iNet

**Go to iNet > One-stop-doc-shop and you will find:**

- Community feedback survey for client resources (page 35)
- Focus group guidelines – to help you plan a focus group discussion

## STEP 3

## DRAFT

Client resources should be written in **plain language**

- Test the readability of your draft in MS Word
- Readability score must be above **60 out of 100**
- Reading level must be under school **grade 6**
- Follow the design and formatting tips in this section and test the draft resource with community to make sure it is easy to understand

## Templates for client resources

All client resources must be on our standard templates.

Templates are designed using evidence-based health literacy design principles; to maximise readability and to ensure consistent branding across all resources.

### Flyers and handouts

#### A4, A3 or larger - one/sided

A flyer is designed to promote a short term message such as advertising an upcoming group, event or program.



### Service brochures

#### A4 - double sided, three folded

A brochure provides information about a specific service or program.

It can be used to provide more detailed information about a group, or event that cannot comfortably fit on a flyer template.



### Information booklets

#### A5 booklets, folded

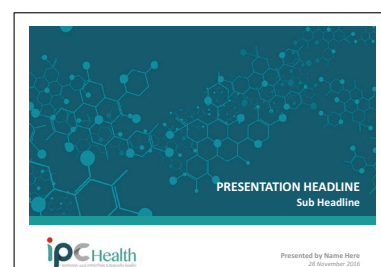
Reinforces information given in appointments or group sessions. Handouts can be developed in house or can come from other peak health bodies and organisations.



### Powerpoint presentations

#### Powerpoint slides

For tips on planning, developing and delivering your presentation, refer to the 'Tips to improve your presentation' skills kit, located on iNet.



### Other

If you need other resources please contact the Communication team by email at [communication@ipchealth.com.au](mailto:communication@ipchealth.com.au)

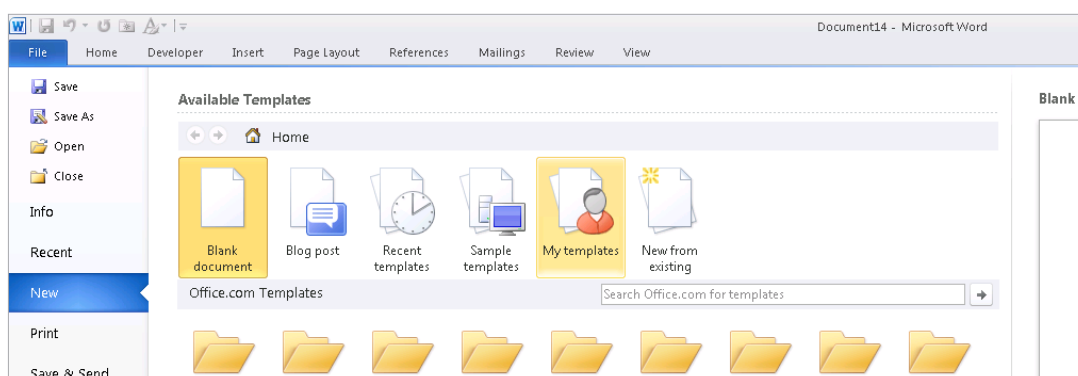
## Templates can be found on iNet or in Microsoft Office

### 1. iNet home

- On the left side click on 'Office templates'

### 2. Microsoft Office application

- Open Word for flyers or handouts; Publisher for brochures; and PowerPoint for presentations
- Go to the File Tab > New > My Templates
- Choose the appropriate template tab that you want.  
For example: Flyer, Handout, Brochure or 'More' to view all template folders at once.




- Use of staff names on client resources is not recommended however if required staff can use their first name on a client resource
- Use reception phone numbers or program intake phone numbers for bookings and as a contact point for further information
- Set a review date and include this in the footer
- If the resource has been translated, state the language on the top right corner of the title page in English
- Ensure the disclaimer is included in the footer of clinical handouts
- Make sure the resource and its review date has been recorded in your program's client resource register for quality control

## Do not change the formatting on any template

Do not change the logo, margin widths, font or size, spacing justification or remove headings, picture frames from the templates.

## Language

All client resources must be written in **plain language**. This is our minimum standard. **Easy language** is more appropriate for linguistically diverse clients.

Language level	Examples
<b>Complex</b> High school year 7 and above Age: 13 years +	It is important that you read the notes, advice and information detailed opposite then complete the form overleaf (all sections) prior to its immediate return to the council by way of the envelope provided.
<b>Plain</b> Primary school grade 6 and below Age: 9 -12 years	Please read the notes opposite before you fill in the form. Then send it back to us as soon as possible in the envelope provided.
<b>Easy</b> Primary school grade 4 and below Age: 6-8 years old	<ul style="list-style-type: none"> <li>• Read all the information on page 13</li> <li>• Fill in the blue form</li> <li>• Put the form in the envelope</li> <li>• Send the envelope to me by Friday 20 May 2005</li> </ul> 

The way you write, the formatting and the page design all contributes to your resource's readability and language level.

See page 18 for **Tips on how to write in plain language** and improve readability.

## How to write in plain language

- **Write as simply as you can**
  - Be casual and conversational, write as you were speaking to the client
  - Call the reader **'you'** and the organisation **'we'**
  - Try to use words with less than 2 syllables
- **Be clear and direct**
  - Need to know information only
  - One idea per sentence
  - Give instructions that are actionable and number each step
- **Be specific** - state dates, times, size, and amounts
- **Use positive language** - tell the reader what they 'can do'; avoid 'don't do'
- **Explain** - abbreviations, acronyms, difficult words or medical jargon



## Test readability in Microsoft Word

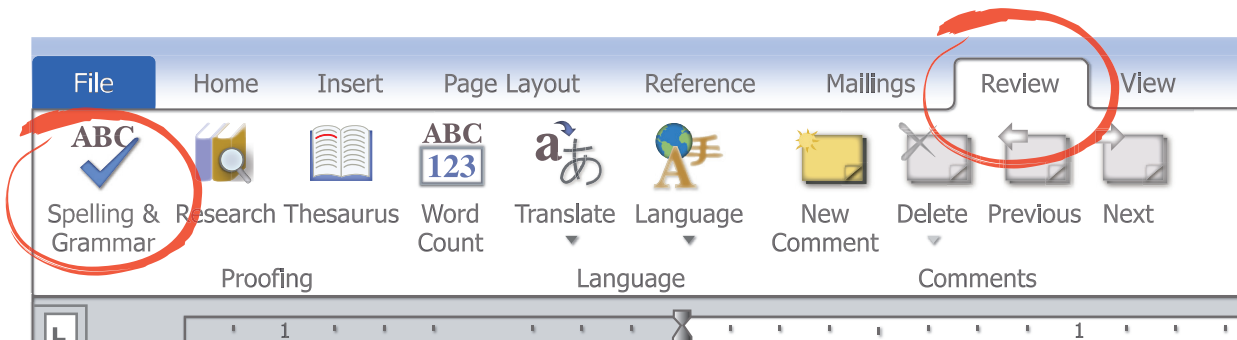
Readability tests use mathematical logic to estimate the reading level of written resources and can be used as a guide to tell you if you are writing in plain language.

You can easily view your readability statistics in Microsoft Word.

Every time you complete a spell check, a pop up box will provide you with your readability statistics.

### Instructions to run readability test:

1. Open the 'Review' tab
2. Click on Spelling and Grammar
3. Complete the spell check and the pop up box with statistics will appear



### Reading the scores:

#### 1. Flesch Kinkaid Grade Level

Reflects school grades or year levels

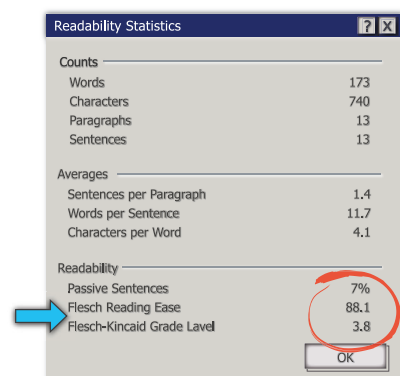
**Grade 3 - 4 is easy language**

**Grade 5 - 6 is plain language**

#### 2. Flesch Reading Ease

The closer to 100, the easier it is to read

**Aim for above 60 out of 100**

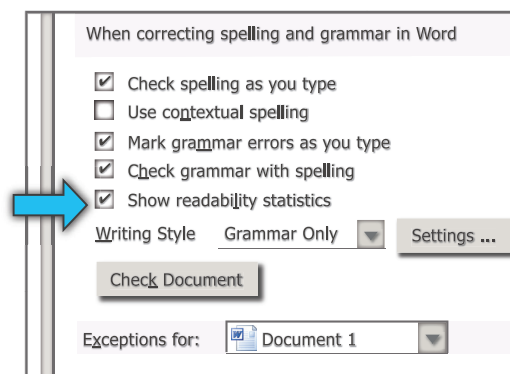


### If your statistics are not showing:

Apply automatic readability test settings

You only need to set up the settings once

1. Open Microsoft Word
2. Go to File > Options > Proofing
3. Tick the box that says 'Show readability statistics' and press the 'Ok' button



## Tips on how to write in plain language

Tip	Explanation	Example
<b>Use words with a single meaning</b>	People with limited literacy skills may not be able to figure out the meaning from the context.	'poor workers' could mean workers with poor performance or workers with limited income.
<b>Choose words that your readers use</b>	Pick the most familiar words that your audience uses.	Ask your audience if they use the word: medication, medicine or drug. Use the word they choose consistently.
<b>Use doing words (verb) not phrases (phrasal verb)</b>	Phrasal verbs are phrases that tell people to do something. Verbs are doing words.	<p>✗ Make a choice (phrasal verb is to 'make a choice')</p> <p>✓ Choose (verb is 'to choose')</p>
<b>Action</b>	<p>This is clear and direct and sounds less formal than the passive voice.</p> <p>Passive voice has less punch than active voice.</p>	<p><b>Instead of writing:</b> Heart disease and lung cancer are caused by smoking.</p> <p><b>Write:</b> Smoking causes heart disease and lung cancer.</p>
<b>Tell readers what they need to do</b>	Clearly state what actions you want your audience to take.	<p><b>Instead of writing:</b> Following safety precautions can reduce food-borne disease transmission.</p> <p><b>Write:</b> Follow these rules to avoid getting sick from food:</p> <ul style="list-style-type: none"> <li>• Cook meat until pink in the middle</li> <li>• Wash your hands after touching raw meat</li> <li>• Wash fresh fruits and vegetables before eating them</li> <li>• Keep hot food hot and cold food cold</li> </ul>
<b>Be specific with:</b> <ul style="list-style-type: none"> <li>• Dates</li> <li>• Time</li> <li>• Size</li> <li>• Amount</li> </ul>	<p>Avoid using terms that are open to interpretation or require judgement.</p> <p>Such as: adequate rest or heavy lifting.</p>	Try to get 8 hours sleep at night and have a short sleep after lunch.
<b>Use generic names of medications</b>	When you refer to a medication include the generic and brand names.	<p>Acetaminophen, like Tylenol<sup>®</sup> or Advil<sup>®</sup></p> <p>Paracetamol, such as Panadol<sup>®</sup></p>

Tip	Explanation	Example
<b>Limit use of quotation marks</b>	Choose other formats to show who is speaking when writing dialogue.	<b>Jane:</b> How hard can it be to stop smoking? <b>Ann:</b> Most people have a very hard time quitting. I had to try three times before I quit for good.
<b>Give context and explain new terms</b>	Explain a new term or concept when you use it. Continue to include some context to help readers remember what it means.	Eat foods that are high in fibre to prevent constipation. Foods that are high in fibre are: fruit, vegetables, legumes and wholegrain breads and cereals.
<b>Respect your audience</b>	Person before the condition or context.  Avoid blanket terms.	'A person with diabetes' instead of 'a diabetic person.' 'A person experiencing homelessness' instead of 'a homeless person'. 'Aboriginal and Torres Strait Islanders' not 'ATSI' or Indigenous people
<b>Use gender neutral terms where possible</b>	Try not to assume the reader's gender, you may leave someone out.	'Partner' – instead of wife or husband 'Carer/s' – instead of mother, father, parents <b>Use:</b> you, we, they - your, our, their <b>instead of:</b> he/she, his/hers
<b>Use two examples of measurements</b>	Use two common ways to describe a specific measurement. Spell out the measure and in brackets its abbreviation.	½ cup = 125 millilitres (ml) 5 millilitres (ml) = 1 teaspoons (tsp) 5 Centimetres (cm) = 2 inches (")
<b>Give a visual example of size that the reader will understand</b>	Use similar sized objects that your audience will recognise.	<b>Write:</b> Feel for lumps the size of a pea. <b>Instead of:</b> Feel for lumps about 5 to 6 millimetres in diameter.
<b>Use words such as 'chance' or 'possibility' instead of probability terms</b>	Probability terms like: 'risk' or 'range' are difficult to understand.	<b>Write:</b> There is very little chance of you getting sick from a vaccine. <b>Instead of:</b> There is less than 5% risk of getting sick from a vaccine.
<b>Use simple examples to demonstrate statistics</b>	Use words like: most, many or half. Demonstrate the number in clear manner.	Frequency (9 out of 10) is easier to understand than percentages (90%).

## Using inclusive language

Inclusive language promotes social inclusion; positive relationships; and plays an important role in acknowledging everyone and treating all people equitably.

### What is inclusive language?

Inclusive language is free from words, phrases and tones that belittle, exclude, stereotype or discriminate against people, on the basis of race, ethnicity, sexuality, gender, physical or intellectual ability, age, socio-economic status or religion.

Generally, descriptors that refer to these personal attributes tend to over-emphasize and draw undue attention to the distinguishing attribute.

It is a conscious effort to avoid stereotyping or marginalising people and plays a powerful role in eliminating discrimination. We are all responsible for using inclusive language to be accurate, fair and respectful.

### How will I know if my language is inclusive?

It is useful to keep the following generic questions in mind:

- 1. Is it necessary to describe individual or group characteristics such as: gender, sexuality, religion, culture, disability or age at all?**
- 2. Are descriptions of personal group characteristics stated in an inclusive and respectful manner?**
- 3. Have I made any generalisations, stereotypes or assumptions?**
- 4. Do the descriptions of people reflect the complete diversity of the intended audience?**

As language is constantly evolving, it may be necessary to seek advice or more information for situations that are unclear.

## Quick tips for inclusive language

<b>Physical and intellectual ability</b>	<b>Use:</b> Barbara uses a wheelchair for mobility Marcy is living with epilepsy Individuals with schizophrenia	<b>Avoid:</b> Robert is confined to a wheelchair Marcy is afflicted with epilepsy Schizophrenics
<b>Culture, race and ethnicity</b> <i>Be specific with racial, cultural and geographical descriptors</i>	<b>Use:</b> Ethnic and racial groups People born in Thailand Vietnamese-born Australian Iraqi Arabic-speaking Australian Australians of Irish decent English as an additional language 'First name' and 'Family name'	<b>Avoid:</b> Ethnic or ethnic Australians Umbrella terms like 'Asians' ignores multiple ethnicities within Asia NESB (Non-English Speaking Background) ESL (English as a Second Language) 'Christian name' and 'surname'
<b>Aboriginal and Torres Strait Islanders</b>	<b>Use:</b> Aboriginal and Torres Strait Islanders Torres Strait Islander Aboriginal Aboriginal people Indigenous Australians	<b>Avoid:</b> ATSI; the Aboriginals; Aborigines 'Islanders' or 'TSI' 'aboriginal' with a small 'a' <i>A term generally used to describe indigenous people from around the world</i>
<b>Gender and sexuality</b> <i>Use-neutral terms and pronouns to avoid assuming gender or sexual orientation</i>	<b>Use:</b> Chairpersons; police officer They or their Ms and Mr Partner or spouse Parent or caregiver	<b>Avoid:</b> Chairman; policeman He / she or his / her Miss, Mrs and Master Husband / wife; boy / girlfriend Mother / father or son / daughter

## Formatting text

### Font

Main heading: **Calibri size 22**

Subheadings: **Calibri size 16**

Body text: **Calibri size 14**

### Colour

**Body text must be black on a white background**

Colour can be used for appeal, in headings or to highlight sections. Use no more than 3-5 colours

**Text must be much darker than the background**

Used sparingly colour can help the reader navigate

### Formatting

**Bold text for headings and important information only**

e.g. dates, addresses or phone numbers

**Sentence case**

Start every heading and sentence with a capital letter, all other words in the sentence or heading are lower case

**Bullet points and numbers** break up lists of information

**Use numerals rather than words** use 99; not ninety-nine

### Alignment

**Align text to the left** Do not centre

Always position text and headings horizontally

**Leave lots of white space**

White space is the absence of text or images on a page and allows the readers' eyes to rest between sections

- One third of your page should be white space
- Leave 2.5 cm of white space around the margins of the page
- Leave white spaces around elements (logos, graphics, tables)
- Space between paragraphs should be bigger than line spacing

### Sentence Structure

**Keep sentences simple and relatively short**

**Sentences should be no longer than 20 words**

Limit paragraphs to 3-5 sentences

Lines of text across a page should have about 75-100 letters

Columns and tables - at least 5 words per line

Don't break a word over 2 lines or a sentence over a page

## Page layout and design

Templates must be used for client resources (page 14) but for community reports, page layout and design are important considerations.

### Use colour to highlight, emphasis and appeal

Used sparingly it helps the reader to scan and navigate the information and identify with the document.

**Heading in sentence case 22pt**

Text body Size 14, text body text body text body. Text body text

Subheading size 16

1. Step one
2. Step two
3. Step three and
4. Step four

Image

**The most important point to remember**

**Second important point to remember**

Text body text body text body text body. Text body text body text body text body text body.

**For more information call 8368 30000 or visit [www.information.com.au](http://www.information.com.au)**

We have given you this handout for your knowledge. We are not responsible for the way you may use this information. We ask you to use this information alongside professional advice or treatment.

Only 5 colours used including black and white

Colour of heading is re-used to highlight key information

Captions must be included for images and diagrams side

Important messages can be highlighted in text boxes or using side bars

Bold or highlight where the reader can get more information

Footer contains page number, review date and disclaimer.

### Disclaimers

Use the disclaimer found in client resource templates. Ask your manager if you need to add an acknowledgment. The disclaimer and review date should be located at the start of the document with the copyright or contents page.

## Images, photographs and illustrations

Images convey information quickly and help people remember key messages.

They should be used as educational tools and to engage or grab the reader's attention, drawing them to the resource.

### Photographs



Monitor your blood sugar before exercise

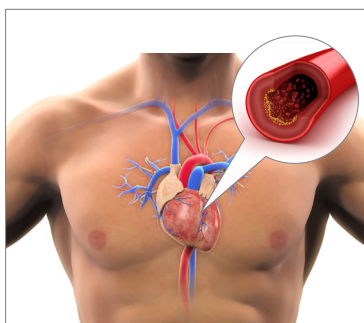
**Photographs are realistic and will help people identify with your message.**

- Use photographs that represent our clients
- Ensure the background isn't too busy, drawing attention away from the image

Written consent is required for photographs of staff, clients and community

**Find the consent form on iNet in the Consent for use of media policy.**

### Graphics



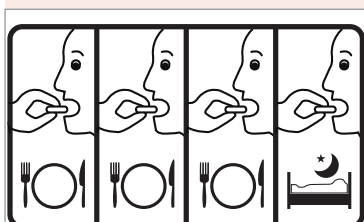
Plaque build-up in the heart

**Graphics act like photos, they provide detail and help people relate to the image.**

Best to show:

- Socially sensitive issues or concepts such as depression, addiction and diversity
- Hard-to-see objects, e.g. bacteria
- Internal body parts like arteries. Show where it is in the body first to give context and location to the audience

### Illustrations



Take one tablet with every meal and before you go to sleep

**Illustrations simplify a complex idea.**

Best to show:

- A sequence of instructions
- Posture or physical exercises
- Icon for instruction, e.g. telephone icon near phone number

**Acknowledge the original owner of the image, by providing a reference.**

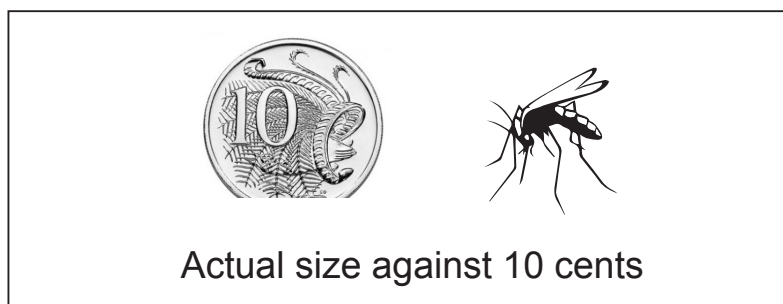
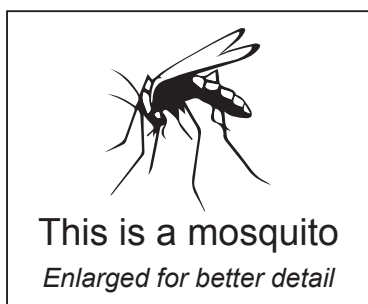


## How to use images

- Images should measure at least 3cm x 3cm on an A4 page
- Place images near related text
- White backgrounds are preferred or use minimalistic backgrounds that won't distract from the main image
- Use circles (not arrows) to point out key information in your images
- Add labels that include your key message. Give one message per image



- Use images that are culturally relevant and familiar to your audience
- Pay careful attention to the quality, size and placement of images
- Draw small objects larger to show detail. Show size of the object next to something that is familiar to the audience



## Images to avoid

- Avoid unnecessary detail
- Show images of what 'you want them to do' rather than 'what not to do'



## Forms and questionnaires

Use the same design and language rules for forms and questionnaires while considering how to make it user friendly.

### Introduction and instructions

- Explain who and what the document is for
- Define unfamiliar terms, jargon or acronyms
- Tell the reader how their responses will be used (protection of privacy)
- Give a contact for where they can get help or more information

Example:

<p><b>Flu</b></p> <p>This form is for people over 24 years of age. It will tell you if you can have a free flu shot at the clinic.</p> <p>By filling out the form, you give us permission to use this information.</p> <p>We will keep this information private.</p> <p>Start by reading Part 1.</p> <p>Please give the form to the nurse, when you have answered all the questions.</p>	<p>← The <b>title</b> immediately indicates the purpose of the form</p> <p>← The <b>purpose statement</b> follows and conveys the full meaning of the original title without using difficult words</p> <p>← <b>Consent and eligibility information</b> should be at the top of the form or in the first question</p> <p>← Give enough instruction to get the reader started. Then add more specific instructions in each question</p> <p>← The last sentence <b>tells people what to do with the form</b> when they finish</p> <p>(Canadian Public Health Association, 1998)</p>
--	--

### Layout

- Left aligned, Calibri size 14 font/readability score  $\geq 60/100$  and  $\leq$  grade 6
- No more than 2 main columns
- Number questions and arrange them in a logical order
- Make sure that people know where to put their answers
- Provide plenty of space for people to write their answers
- Avoid using footnotes or asterisks

### End of survey

- Tell reader what to do with the completed form or questionnaire
- Thank your participant for completing the survey
- Provide a contact or website where they may get more information

## Question format

- Use tick boxes if you want a 'yes' or 'no' answer
- Provide a large and obvious space for responses, you can use:
  - A white box on a shaded background, with the question in the same box as the space for the answer. See the example below
  - Three row table with grey borders only on the bottom of each cell to create a line for writing. See question 4 in the example below
- Provide 'don't know' options to stop readers guessing an answer

## Ratings or scale questions

- Provide 3 or 5 response options with a 'neutral' option.  
For example yes, no, maybe
- Each response option must be clear and a specifically different measure.  
For example 'bad and poor' or 'probably and probably not' mean the same thing
- Only 3-5 questions should be places in one matrix. This makes it easier to read, easier to choose a response and means that the response options can be changed to be more specific to the question

Example:

**1. What is your address?**

**2. What would make it easier for you to use this service?** Tell us below.

---



---



---

**3. Is this your first visit?** Please tick one box. ☐ Yes ☐ No

**4. How important is each of the following to you?** Tick one answer in each row.

	Very important	Important	Neutral	Less important	Not important
Clean waiting room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friendly staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Short waiting times	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

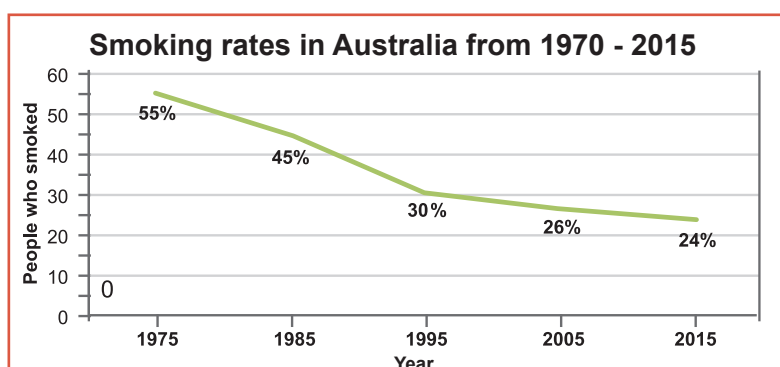
## Tables, charts and diagrams

Charts and graphs can attract attention and help people understand statistical information without having to interpret all the details.

- Make headings and labels specific and easy to understand. Label all axes
- Use rounded whole numbers and adjust ratios to the smallest denominator
- Carefully explain calculations step by step

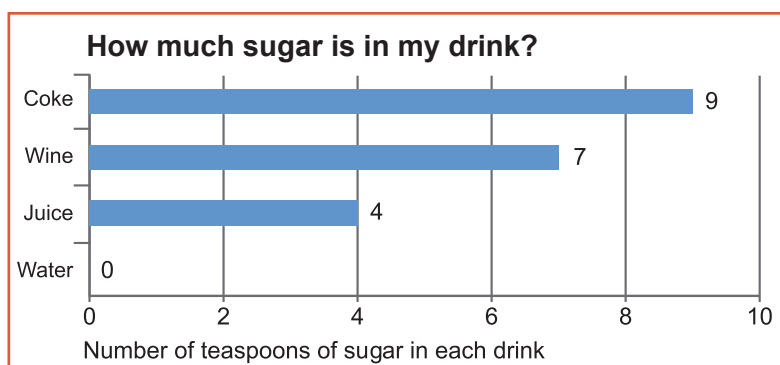
### Line graphs

Trends over time



### Bar graphs

Comparing 2 or more things



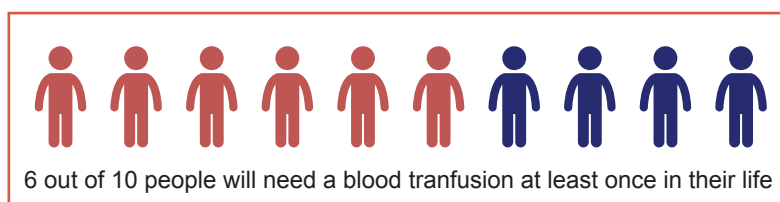
### Pie charts

Proportions or percentages



### Pictographs

Frequency or prevalence



## STEP 4&5

### APPROVE RECORD

- Use the Health Literacy Checklist to ensure your resource aligns with this health literacy guide
- It is important for every team to have systems in place for tracking the review and development of client resources
- Community feedback can be recorded in Riskman Q and used as evidence for accreditation of the organisation's quality and safety standards

## Approval process

Use **Tool 3 Health Literacy Checklist** (page 34) to ensure your resource aligns to the health literacy guide.

Staff should provide	Communication team checks
	 <p>Template, branding and formatting</p>
 <p>Readability scores</p>	<p>&gt;60</p> <p>Readability is greater than <b>60 out of 100</b> and under <b>Grade 6</b></p>
 <p>Evidence of community feedback</p>	 <p>Community feedback is satisfactorily incorporated</p>
 <p>Media consent forms</p>	<p>ABC ✓</p> <p>Information, grammar and spelling</p>

## Who is responsible for approving client resources?

The IPC Health communication team is responsible for approving client resources.

They will ensure that your resource has the correct:

- Templates, brand and formatting
- Spelling, grammar and readability
- Suitability for community

You can contact the communications team to assist you at any point of your resource development. For example, they can assist you in determining aim and target group of your client resource and have access to photographs and other images that you can use.

## How do I ask for approval?

Ask for approval by emailing **communication@ipchealth.com.au**

You should provide the following:

1. Final draft of your resource
2. Readability scores: reading ease and reading grade
3. Evidence of community feedback. For example, copies of surveys completed by clients or focus group meeting minutes summarising the key feedback/changes suggested by community
4. Electronic media consent forms for photographs used

## Prepare the final draft for approval

Use Tool 3 - Health literacy checklist (page 34) to ensure the resource follows the health literacy principles outlined in this guide.

Also check that the:

1. Correct template, branding and formatting has been used
2. Readability score is greater than 60/100 and reading grade is under grade 6
3. Community feedback has been satisfactorily incorporated into the resource
4. Information, grammar and spelling are correct

## Quality control of client resource

All teams are responsible for developing and maintaining client resources that are current, appropriate, and easy to understand. This is our commitment to best practice and continuous quality improvement and allows us to be responsive to our clients' needs.

Developing client resources in collaboration with community is one aspect of the quality and safety standards that we must report on for accreditation.

- **Quality Improvement Council**

Standard 2. Providing quality services and programs

- **National Safety and Quality Health Service Standards**

Standard 2. Partnering with consumers

Therefore it is important to track and record our progress in this area.

Below are some ideas of what your team could do.

## Keep records of your client resources

- **Store all client resources electronically on a central drive**

Your team can agree on an appropriate filing system

- **Make a client resource register**

Log all of the team's client resources, date of next review, other important information to support your team to monitor quality control.

- **Develop a Riskman Q quality activity page for client resources**

Record evidence of community feedback and readability scores of each new or updated resource each year. These will later be used as evidence towards accreditation

Instructions:

- Create one quality activity page each calendar year
- Record new and updated resources as a new journal entry
- Attach the final draft and evidence of community feedback in the document section

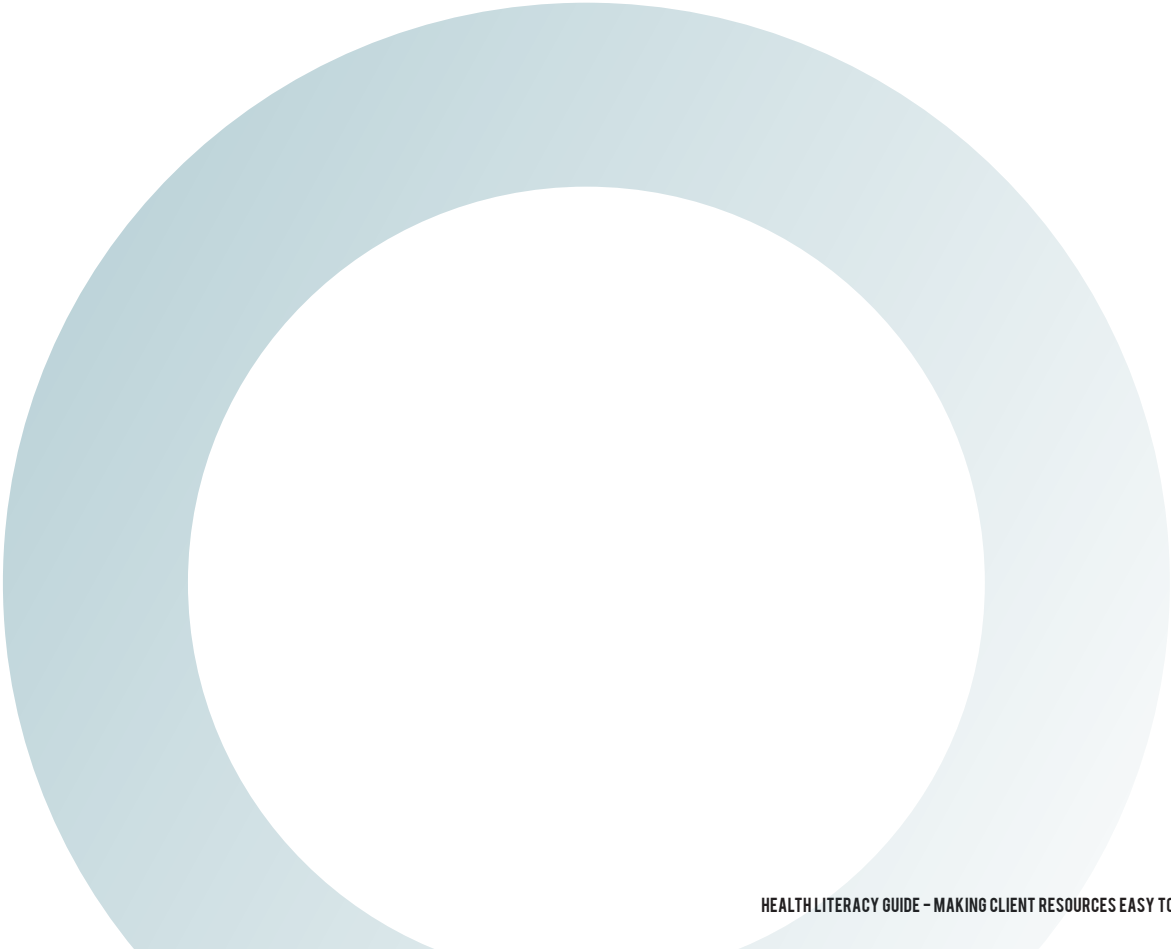
For more information see:

**Tool 4 - How to enter community feedback into Riskman Q** (page 37)





# TOOLS

- Tool 1** Health Literacy checklist
  - Tool 2** Community feedback survey for client resources
  - Tool 3** How to log community feedback into Riskman Q
- 

# Health literacy checklist

Readability score is \_\_\_\_\_ / 100      Reading grade is \_\_\_\_\_

Aim for a readability score above 60/100 and a reading grade under grade 6.0

## Content

- ☐ Purpose is clear
- ☐ Title conveys your main message
- ☐ Only 3-5 messages per resource
- ☐ Content does not distract from the key messages or purpose
- ☐ Chunk information using headings and subheadings and bullet points
- ☐ Include a contact or website to find out more information

## Plain language

- ☐ Use common words
- ☐ Use short words (2 syllables)
- ☐ Use conversational language e.g. you, we, they; your, our, their
- ☐ Use short sentences
- ☐ Put the action or verb before the object in a sentences
- ☐ Avoid jargon and acronyms
- ☐ Complex or medical terms are explained
- ☐ Use encouraging and positive words
- ☐ Person before condition e.g. Person with a disability
- ☐ Avoid judgement or blame
- ☐ Avoid using 'should' and 'must'

## Numbers

- ☐ Numbers are clear and easy to understand
- ☐ Use numerals (5), not text (five)
- ☐ Statistics are easy to understand

## Text appearance

- ☐ Calibri size 14 for text body  
size 16 for subheadings  
size 22 for page titles
- ☐ Use sentence case
- ☐ Text justified to the left, not centred
- ☐ Use colour and **bold** text sparingly to highlight key information
- ☐ No words in CAPITALS or underlined

## Design and layout

- ☐ Margins 2.5 cm
- ☐ Has a light background and dark text
- ☐ Use no more the 3-5 colours (including black and white paper)
- ☐ Only 5 bullet points at a time
- ☐ Every step of an instruction is numbered
- ☐ Information is in a logical order
- ☐ Context is provided before introducing new information
- ☐ There is plenty of white space

## Images and diagrams

- ☐ Appropriate images are used to demonstrate instructions or for audience appeal
- ☐ Images at least 3cm x 3cm
- ☐ Images places adjacent to text
- ☐ Images used to reinforce text
- ☐ Use titles and captions to explain images, tables, graphs and diagrams
- ☐ Give instructions on how to read charts and graphs

## Community feedback survey for client resources

Name:	Date:
Phone:	Email:
Can we contact you by phone or email if we have more questions?	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

### Please write down your thoughts for the following questions

Is English your first language?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is the resource easy to use?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Is the font large enough to read?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Is it easy to understand?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Was the information helpful?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Does the order make sense to you?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Was the resource interesting to look at (pictures, use of colour)?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Were images clear to see?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No
Did you understand what the image was trying to convey?	<input type="checkbox"/> Yes	<input type="checkbox"/> Somewhat <input type="checkbox"/> No

**Please write down any comments or suggestions below.**

**Please write down your thoughts for the following questions**

1. What did you think was the main message of the resource?

2. What parts of the resource did you find the most useful?

3. What parts of the resource did you find the least useful?

4. Is there any other information you would like included?

5. Do you have any other ideas to improve this resource?

## How to log community feedback into Riskman Q

Community feedback on client resources should be logged into Riskman Q as a quality activity. This information will later be used as evidence in accreditation.

You only need to set up one quality activity per calendar year.

Each resource that community review in that year is then added as a 'New Journal Entry' and the resource and evidence of community feedback is attached in the document section.

### Start a new quality activity page:

1. Log in to Riskman Q > my workspace > new > quality activity
2. Complete all of the yellow fields as appropriate  
Each year you can reuse the information in the example below to describe your new quality activity. Just make sure to change the dates.

### Enter a new resource and community feedback:

1. Log in to Riskman Q > my workspace > review my > quality activity
2. Open the current year's quality activity page
3. Complete a new journal entry. For journal type select 'Task'
4. Attach the resource and evidence of community feedback under 'Add Documents'

**Example:** this is what the quality activity page will look like

Activity Details	
<b>Activity Title</b>	2016 Community consultation on client resources
<b>Activity Aim</b>	For community members to review new or updated client resources to ensure they are appropriate, easy to read and use. Methods used include but not limited to: focus group testing, surveys or informally asking clients or community for their feedback. Each client resource that is reviewed will be added to this quality activity as a New Journal Entry, and in the documents section the client resource and copies of community feedback will be attached.
<b>Anticipated Outcomes</b>	Resources developed in consultation with or user tested by community will more appropriately meet the needs and expectations of community and/or clients.
<b>Methodology</b>	Assessment Consumer/ Community Consultation
<b>Activity Reason</b>	Consumer feedback

## References

- Agency for Healthcare Research and Quality (2016) *Health Literacy Universal Precautions Toolkit*, US Department of Human Services. Rockville, MD. Retrieved October 2016 at <http://www.ahrq.gov/professionals/quality-patient-safety/quality-resources/tools/literacy-toolkit/index.html>
- Canadian Public Health Association (2008) Plain Language Service. Retrieved September 2016 at <http://www.cpha.ca/en/pls/FAQ.aspx>
- Centers for Disease Control and Prevention (2016) *Everyday words for public health communication*, US Department of Health and Human Services. Retrieved October 2016 at <http://www.cdc.gov/other/pdf/everydaywords-060216-final.pdf>
- Centers for Disease Control and Prevention (2010) *Simply Put: A guide for creating easy-to-understand materials*, US Department of Health and Human Services. Retrieved August 2016 at [http://www.cdc.gov/HealthLiteracy/pdf/Simply\\_Put.pdf](http://www.cdc.gov/HealthLiteracy/pdf/Simply_Put.pdf)
- Centers for Disease Control and Prevention (2010) *Toolkit for Making Written Material Clear and Effective*, US Department of Health and Human Services. Retrieved August 2016 at <https://www.cms.gov/Outreach-and-Education/Outreach/WrittenMaterialsToolkit/index.html>
- Currie K, Spink J and Rajendran M (2000) *Well-written health information: A guide. Communicating with consumers*, Victorian Government Department of Human Services, Melbourne. Reviewed October 2016 at <http://www.health.vic.gov.au/consumer/pubs/written.htm>
- Department of Health (2009) *Doing it with us not for us: Strategic direction 2010-13*, Victorian Government Department of Health, Melbourne. Viewed 1 March 2011 at [http://www.health.vic.gov.au/consumer/downloads/strategic\\_direction\\_2010-13.pdf](http://www.health.vic.gov.au/consumer/downloads/strategic_direction_2010-13.pdf)
- Fineberg, H (2004) *Health literacy*, Washington DC, Institute of Medicine, The National Academies Press.
- Kreps, G. L., & Sparks, L (2008) *Meeting the health literacy needs of immigrant populations*. Patient education & counseling, 71(3), 328-332.
- Plain English Campaign (2016) <http://www.plainenglish.co.uk> .
- Scope (Vic) Ltd (2015) *Clear written communications: Easy English Style Guide*, Communication and Inclusion Resource Centre. Retrieved October 2016 at <http://www.scopeaust.org.au/wp-content/uploads/2015/02/Clear-Written-Communications.-The-Easy-English-Style-Guide..pdf>
- Seubert, D (2009) *Improving Readability by Design*, Wisconsin Health Literacy Summit, March 31 – April 1 2009.
- Sudore, R., Landefeld, S., Barnes, D., Lindquist, K., Williams, B., Brody, R. & Schillinger, D (2007). *An advance directive redesigned to meet the literacy level of most adults: A randomized trial*. Patient Education and Counseling. 69, 165-195.
- Thomacos, N., Keleher, H (2009). Health literacy and vulnerable groups: What works? Melbourne: Department of Health Social Science, Monash University.
- Wizowski, L., Harper, T., Hutchings, T (2014) *Writing health information for patients and families*, Hamilton Health Sciences, Patient Education, Canada. Retrieved September 2016 [http://www.hamiltonhealthsciences.ca/workfiles/PATIENT\\_ED/Writing\\_HI\\_Edition4.pdf](http://www.hamiltonhealthsciences.ca/workfiles/PATIENT_ED/Writing_HI_Edition4.pdf)
- Weiss, B. (2003) *Health Literacy: A manual for clinicians*. Chicago, IL: American Medical Association and American Medical Association Foundation.





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