

## Testing the Ask Me 3™ Health Literacy Intervention in Wisconsin's Community Health Centers

**Abstract**—Six community health centers tested the effectiveness of using Ask Me 3 to increase patient engagement in their own care by improving patient-provider communication. A pilot study compared two different treatment conditions among a diverse, low income population. The evaluation suggests that Ask Me 3 may increase expectations for improved communication, but, by itself, is not sufficient to motivate patients to ask their health care provider questions. The program also raised awareness among patients and clinic staff about health literacy challenges and the importance of clear communication which may increase readiness for more intensive programs.



1. What is my main problem?
2. What do I need to do?
3. Why is it important for me to do this?

The Wisconsin Department of Health Services (DHS) implemented and evaluated a pilot project designed to improve low health literacy, increase patient engagement in their own care, and increase satisfaction with clinical visits through improved patient-provider communication. The pilot was conducted at six community health centers.

Low health literacy, the inability to read and understand health information, affects more than 90 million Americans. (Nielsen-Bohlman, et al, 2001) This has a disproportionate impact on minorities and those with low incomes and limited education—the target population of most community health centers. Research also suggests that patients' engagement, and subsequent improved management of their health, can profoundly affect health care utilization, costs, and outcomes. (Hibbard, 2008)

### Key Findings

- ✓ Ask Me 3 is an easy to use tool, but by itself may not be sufficient to increase patient engagement or satisfaction, or to get patients to ask their health care provider questions.
- ✓ Patient education about the importance of asking questions and understanding treatment plans may increase patient expectations about clinical encounters with providers.
- ✓ Exposure to Ask Me 3 raised awareness among patients and center staff about health literacy challenges and the need for better communication. This social marketing effect may promote readiness for more intensive and targeted programming.

### The Ask Me 3 Pilot Project

Research on strategies to address health literacy and improve patient-provider communication was used to inform the project design. Two focus groups, comprised of low-income individuals, were also convened to suggest strategies and tools that might help individuals take a more active role in their health. The focus groups provided feedback on Ask Me 3, an educational program developed by the Partnership for Clear Health Communication with readily available materials and promising early research.

The Wisconsin Primary Health Care Association recruited rural and urban sites from among Wisconsin's community health centers with an effort to include racially and ethnically diverse patient populations. (Table 1) Each site self-selected to implement one of two approaches: *basic* or *enhanced*. Four sites implemented the basic intervention and two sites tested the enhanced approach. The pilot project phase-in covered a six-month period with each site an active participant for eight months.

Table 1: Characteristics of Pre-Test Survey Respondents from Each Participating Site

	Site 1	Site 2	Site 3	Site 4	Site 5	Site 6
Study Condition	basic	enhanced	basic	basic	enhanced	basic
Average age (years)	42.6	37.8	37.1	41.6	38.5	42.6
Female Gender	55%	79%	76%	60%	75%	72%
Hispanic/Latino Ethnicity	19%	6%	5%	2%	6%	1%
Race <sup>1</sup>						
Black /African American	36%	36%	5%	94%	84%	-
White	45%	42%	40%	2%	7%	97%
Other race	19%	21%	55%	4%	9%	3%
Reason for visit <sup>1</sup>						
Respondent saw the doctor	81%	88%	76%	80%	69%	78%
Brought someone else	19%	12%	24%	20%	31%	22%

<sup>1</sup> The percentages in each cell of the table would be expected to sum to 100 percent, but in some cases they do not, due to two factors: rounding to whole numbers and the omission of “no answer” categories.

The basic intervention was a low-intensity approach in which sites placed Ask Me 3 brochures in the main waiting area, displayed Ask Me 3 posters throughout the center, and placed key tags with the three questions in exam rooms. A brief orientation session for all center staff highlighted the issue of low health literacy, described Ask Me 3, and reviewed the evaluation process. Patients were exposed to a four-minute DVD that played on a continuous loop in the main waiting area. The DVD emphasized the importance of patients asking their health care provider questions and demonstrated how individuals might use the Ask Me 3 questions during their visit.

Two sites adopted the enhanced approach, which included all of the activities described for the basic intervention. In addition, all clinical staff—doctors, physician assistants, and nurse practitioners—were trained on four simple, evidence-based approaches for communicating with their patients. At one of the enhanced sites, customer service representatives spoke individually to patients in the waiting area about Ask Me 3 and encouraged them to ask their clinician the three questions.

### Discussion and Evaluation

DHS managed the project and evaluated the pilot sites with support from project partners. Costs for the intervention included all printed materials—brochures, posters, key tags—and production of two DVDs—one with the role play for patients and one for the staff orientation session. Participating clinics contributed their staff time for the orientation, assisted with the patient surveys, and incorporated Ask Me 3 into their clinic processes.

The evaluation included pre- and post-program patient surveys, a post-program provider survey, and a feedback survey from center staffs. The patient survey instruments were based on the Patient Activation Measure™ to assess patients’ knowledge, skill and confidence in managing their health (Hibbard 2008) and items adapted from the Consumer Assessment of Healthcare Providers and Systems® (CAHPS) measuring patients’ experience with their visit with the health care provider on the day of the survey. The provider survey assessed perceptions of their patients’ engagement. The feedback survey asked for suggestions for improvements to the Ask Me 3 program. Several factors limited the evaluation: self-selection by the participating clinics, convenience samples, lack of control sites, and a short project time frame that limited exposure to the intervention.

Comparison of the pre- and post-test difference in patient activation scores shows higher post-program scores at the enhanced intervention sites following exposure to Ask Me 3 while there was no difference at the basic sites. This 3.9 point increase on a 100-point scale was statistically significant, but may not be clinically relevant. (Table 2)

Table 2: Patient Outcomes in the Ask Me 3 Pilot Project

Outcome		Pre-test Mean (n)	Post-test Mean (n)	Significance Level (p)
Mean Patient Activation <sup>1</sup>	Basic intervention centers	64.1 (229)	64.6 (165)	p < .05
	Enhanced intervention centers	61.5 (128)	65.4 (91)	
Mean Clinical Visit Scores <sup>2</sup>	Basic intervention centers	19.6 (260)	20.1 (179)	p < .01
	Enhanced intervention centers	19.4 (143)	16.0 (108)	

<sup>1</sup> Patient Activation measures individual's knowledge, skills, and confidence in managing their health.

<sup>2</sup> The Clinical Visit Score measures patient experience/satisfaction on a scale from 1 to 24.

Pre- and post-program patient surveys found decreased patient satisfaction (3.4 points on a 24-point scale) after implementation of Ask Me 3 at the enhanced intervention sites; there was no difference at the basic sites. (Table 2) This could suggest that patients exposed to the enhanced approach may have higher expectations of their providers and how they communicate with them. Additional study is needed to confirm this hypothesis.

Qualitative observations from the participating centers and the feedback survey indicated that Ask Me 3, by itself, may not be sufficient to motivate patients to ask their clinician questions. Patients may benefit from either group or individual coaching about the importance of actively engaging in their health care by asking questions. Providers need to encourage this behavior, perhaps by framing their instructions in the form of the three questions or by using simple, evidence-based communication strategies.

A post-program survey of staff at three centers indicated that Ask Me 3 was considered a good tool that was easy to use and understand. (Table 3) The survey also found that many center staff believed that the program increased awareness about health literacy challenges and the need for better communication between patients and clinicians.

Table 3: Staff Feedback About the Ask Me 3 Intervention and Materials<sup>1</sup>

		Strongly Agree	Agree	Disagree	Strongly Disagree
1.	The Ask Me 3 project and toolkit are helpful to me as a healthcare professional.	28 (68%)	13 (32%)	--	--
2.	I have recommended use of Ask Me 3 materials to patients.	27 (64%)	15 (36%)	--	--
3.	The Ask Me 3 project and toolkit are helpful to patients.	19 (49%)	16 (41%)	4 (10%)	--
4.	Patients have asked me questions about the Ask Me 3 materials and/or video.	11 (29%)	19 (50%)	7 (3%)	1 (3%)
5.	Ask Me 3 has helped raise awareness of health literacy concerns among patients in this clinic.	15 (38%)	20 (51%)	3 (8%)	1 (3%)
6.	Ask Me 3 has led to an increase in the number of questions that patients ask about their health condition or care.	7 (21%)	11 (33%)	10 (30%)	5 (15%)
7.	Ask Me 3 has helped raise awareness of health literacy concerns among staff in this clinic.	14 (36%)	19 (49%)	6 (15%)	--

8. Ask Me 3 has led to changes in the way that clinic staff interact with patients.	11 (33%)	15 (46%)	5 (15%)	2 (6%)
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<sup>1</sup> N = 42, Respondents were clinicians (doctors, physician assistants, and nurse practitioners), nurses, technicians, medical assistants, and customer service representatives.

### Next Steps

Ten organizations worked collaboratively to design and test a basic and enhanced intervention to increase patient engagement in their own care via improved patient-provider communication. Ask Me 3 provides a low-intensity, replicable, and relatively economical way to introduce the concept of engagement to a patient population and clinical staff. While the program did not show significant impact on patient activation or satisfaction, Ask Me 3 raised awareness among patients and center staff about the need for better communication. This effect may provide a ripe environment for more intensive interventions.

### Acknowledgements

In addition to the participating health centers and DHS, pilot partners included: the Wisconsin Collaborative for Healthcare Quality and the Aligning Forces for Quality Initiative, Wisconsin Literacy, Wisconsin Medical Society, Wisconsin Primary Health Care Association, South Central Area Health Education Center, University of Wisconsin-Madison—Population Health Institute, University of Wisconsin-Madison—Department of Family Medicine, University of Wisconsin-Madison—Institute for Clinical and Translational Research, and the Wisconsin Research and Education Network.

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