

Health System Navigation: Opportunities to Promote and Enhance Health Literacy Using the Omaha System

Health Literacy

“Health Literacy is the ability to make sound health decisions in the context of every day life “.

(Ilona Kickbusch—Navigating Health [www.kickbuschconsult.com/navigating health](http://www.kickbuschconsult.com/navigating%20health)).

The Language of Health: NZ Health Literacy

Help4U is a patient advocacy and health system navigation service, helping providers and consumers get to the right information, fast.

Purpose:

to research key problems in health system navigation and health literacy.

Methods:

review of existing datasets in the NZ national collections
facilitating multidisciplinary focus groups of consumers and providers
analysing referral documentation

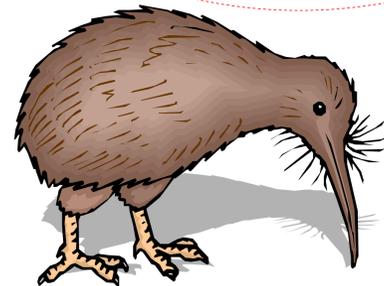


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“Looking at the community context and moving forward, there are going to be challenges about providing models of care that we don't currently employ and because we don't currently employ or deploy them, we don't necessarily have the terminology in place for them. It just struck me that we've got models ahead that we probably don't have the terms for, that we might need the terms for.” (Focus Group Participant, 2009).



“I think that consumers need to take more responsibility and have a more positive voice.” (Focus Group Participant, 2009).

Summary of Findings:

- Confusion and lack of consistent understanding and application of health terms.
- Numerous examples where misunderstood communication contributed to adverse health experiences.
- Lack of clarity and consistency in the published national data sets.

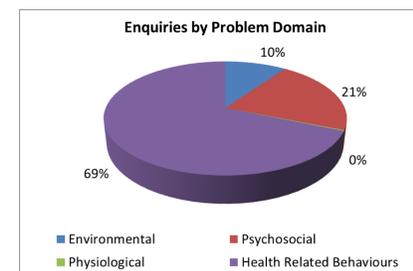
Omaha System Evaluation

Next Step: Empirical review of standardized terminology to describe health literacy and health system navigation barriers.

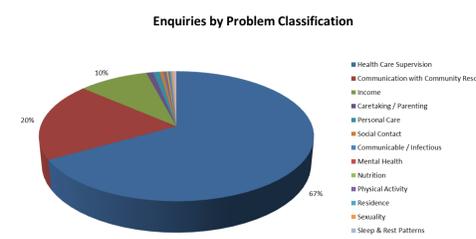
Methods: Descriptive analysis of data documented on 440 cases referred to Help4U (July 09—June 2010) coded retrospectively using the Omaha System.

Findings:

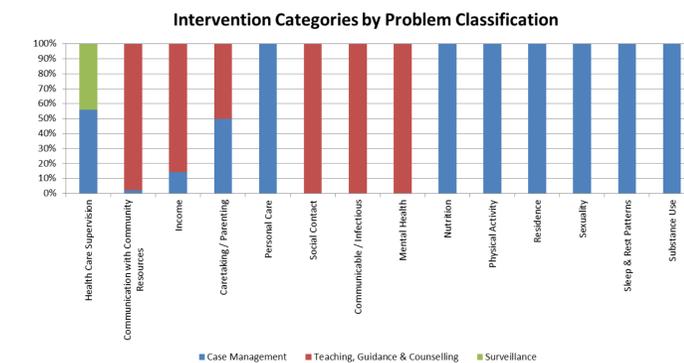
Domains: 70% of cases fit within the domain of Health-Related Behaviours.



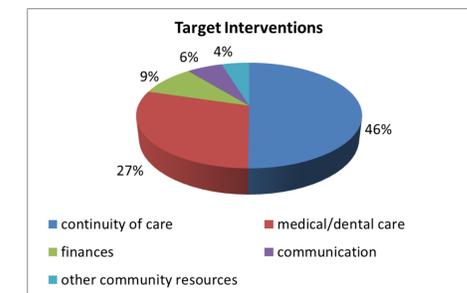
Problems: Most common were Health care supervision (68%) with signs/symptoms reflecting uninsured medical expenses, difficulty communicating concerns to providers and unfamiliarity with options/procedures for obtaining services; followed by Communication with community resources (20%) and Income (10%).



Intervention categories: case management (40%), teaching, guidance & counselling (30%), and surveillance (30%).



Intervention targets: continuity of care (46%), followed by medical/dental care (27%), and finances (9%).



Conclusion: Difficulties accessing timely and appropriate care can be meaningfully described using Omaha System.

Recommendation: Omaha System can be used as an interface terminology to facilitate consumer engagement in decision-making and health system navigation.

References:

Martin, K. S. (2005). Omaha System: A Key to Practice, Documentation, and Information Management. 2nd Ed. St. Louis, MO: Elsevier Inc.
Kickbusch, I. (2006). Navigating Health. (www.ilonakickbusch.com/health-literacy/NavigatingHealth.pdf).