# The Health Pack

#### Resource Pack for Literacy tutors and Healthcare Staff





National Adult Literacy Agency An Áisíneacht Náisiúnta Litearthachta do Aosaigh

### THE HEALTH PACK

A NALA Resource Pack for Literacy Tutors and Healthcare Staff

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Written by Janet Kehelly

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#### Introduction

The idea for this pack came from literacy tutors and learners who took part in the NALA Health and Literacy Survey carried out in 2002. The survey highlighted the experiences that people with literacy difficulties and/or low self esteem have when it comes to managing their health.

"They won't tell a doctor they cannot read".

Those interviewed talked about the difficulties they had reading medicine labels and in choosing the right medicine for different illnesses as well as the difficulties in dealing with the health system and healthcare staff.

"It is very frightening to have to read a form and sign it". "It makes me feel powerless to help my child".

The sense of powerlessness that patients often feel in dealing with healthcare staff is not a new one and nor is it confined to people who have literacy problems. However, it is compounded when literacy is a problem and reinforces feelings of being talked down to or feeling stupid.

"I thought the doctor was talking to someone behind me she was so nice".

Although healthcare staff are being trained in improving their communication skills with patients, there is also a need for patients to develop their skills. We hope this pack suggests ways that this can happen.

#### Content

There are four topics, each given a separate section:

- 1. Being Healthy
- 2. Taking Medication
- 3. Filling Out Medical Forms
- 4. Being A Patient

**Section 1:** Being Healthy looks at what being healthy means and encourages people to reflect on their own lifestyle choices and the extent to which these impact on their health for better or worse. It uses the familiar themes of diet and stress to do this but there are a whole range of issues which could be more relevant to your group such as children's health, older persons' health, gender health, sexual health or mental health.

**Section 2:** Taking Medication explores the complex area of taking medication. The section starts by highlighting the fact that half the people on medication don't take it in the prescribed way. Although personal choice certainly makes up some of that number, there is no doubt that being able to read and understand information is a factor in taking medication safely and effectively.

**Section 3:** Filling Out Medical Forms looks at form filling within the healthcare system and the sort of information commonly requested by healthcare staff. Each local health board area has its own forms and you should get copies from the relevant health board.

**Section 4:** Healthcare Settings looks at what healthcare services are available locally and what issues can arise when visiting the GP surgery and the hospital. These issues include preparing for appointments, communicating effectively with healthcare staff and knowing what is involved in hospital visits.

Before looking at how to use the pack it is important to know what it isn't. It isn't an A to Z on illness and cures and nor is it something that can be photocopied and used directly as a workbook. It is designed to give you ideas and suggestions on how to develop skills which people will find useful in matters relating to their everyday health. It is up to you to adapt the content and ideas to suit the group you are working with. Some sample worksheets are included to give you ideas but it is assumed that you'll adapt these as needed.

The skills that it aims to develop include:

- Interpersonal
- Problem solving
- Decision making
- Communication

These skills are developed through different activities including:

- Discussion
- Reflection
- Problem solving
- Role play
- Information finding

You don't have to use the activity suggested if you think there is a more suitable way for your group to explore this skill. In other words, if your group has limited literacy skills it might be better to taperecord some of the patient/doctor conversations and have a discussion based on what people have heard. If you are using the pack as part of literacy classes you will probably have to make accompanying worksheets to develop literacy skills.

#### What do you need to know in advance?

Firstly, you don't need to be an expert in health or an expert in adult literacy to use this pack. What you do need however is the motivation to empower people to play as active a part in their health as possible.

If you are using the pack in a healthcare setting you may find that literacy is a problem for some people in the group. Depending on the person and situation you could tell someone what literacy services are available locally or maybe invite the local literacy organiser in to meet the group or advise you on what to do. On the other hand if you are a literacy tutor and the group want to explore a particular health matter in more detail you could suggest they invite a healthcare worker to talk about the topic.

#### How to use the pack

Each section stands alone from the other sections, so you can select a section or part of a section depending on what you want to do. There isn't always a natural sequencing to these and many of the sub-headings stand alone. The content is designed to give you background information and ideas on how to use the material with your group. In some cases sample worksheets are included which could be photocopied but in most cases these are templates for you to work from. The activities suggested can be replaced with ones you think are more suitable for your group.

Always check that material is still relevant and up to date. Medical forms and entitlements are often changed in the December budget so make sure to keep your forms up to date.

There is also scope to invite outside speakers to talk to your group about topics they are particularly interested in. Parents and grandparents might be interested in knowing more about first aid for babies and children, or older people might be interested in hearing how to set up an active aging group. The possibilities are endless! And of course your group will be shaping the content by bringing in their examples and sharing their experiences.

Each section starts with an overview detailing the:

- The aim and objectives
- Suggestions on how to use the material
- The main content
- List of key words associated with the content
- Additional resource material

#### Keywords

Each section highlights a number of key words specific to that topic which you may want to introduce at the beginning as part of an activity. Although some health words are difficult, it is important to explain that healthcare workers nearly always use medical words and therefore it is important to recognise what they mean. These are a sample of the words which people hear everyday but don't necessarily understand.

| symptoms     | prognosis | acute   | procedure | dosage  |
|--------------|-----------|---------|-----------|---------|
| side-effects | diagnosis | chronic | screening | persist |

A list of keywords could emerge from a brainstorming exercise followed by the groups definition of what each word means. This could be developed further as a project by making an information sheet which the local healthcare clinic could find useful. The idea is not to limit yourselves to the content but rather to think about how to build on what is there.

If you're not from a healthcare background you can check the meaning of some of these words in Appendix 1. You don't want to risk being seen as a health expert so be sure to explain to the group what your expertise is and who to talk to about specific health issues.

#### Resource material

Depending on what you are trying to achieve, it's very likely that you will need to use other material to reinforce your aims. At the end of each section there is a list of resource material which includes further health information, websites and workbooks.

#### lcons

The icons listed below give an indication of the sorts of skills and activities used in the pack



#### Giving feedback

Through the Literacytools website (www.literacytools.ie) we can post updates on how people are using this pack and share suggestions on how it can be developed further. For this to work well we need your input so please tell us of your experiences, what worked well, what didn't and any suggestions for other activities and resource material.

You can contact NALA by phone at 01 – 8554332, or by e-mail at nala@nala.ie or through the website www.nala.ie

### Being Healthy

## Section 1

#### Aim

To look at the factors which contribute to being healthy.

#### Objectives

- Explore what it means to 'be healthy'
- Be aware of the factors that determine health
- Examine how personal choices can impact on health
- Look at the relationship between food and lifestyle
- Recognise what stress is and ways of managing it
- Set personal goals towards improving lifestyle

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#### How to use this section

Use whichever of the activities in this section suit your group. You might also want to consider other activities such as:

- Brainstorm what health is and what makes people healthy or not.
- Explore the link between health and different variables such as lifestyle, income, location, family, networks, employment.
- Discuss being responsible for your health and what makes this difficult.

- Debate should the medical profession be expected to treat people who do not take responsibility for their health.
- Discuss the notion of the 'body beautiful' and who is responsible for promoting that.
- Explore the role of advertising in influencing children's food choices.
- Invite a speaker in to look at parenting and children's diet.
- Reflect on personal ups and down and what factors contributed to the low points and what helped overcome them. Equally what contributed to the ups!
- Design health diaries to suit individual goals.
- Pull together information about local activities including classes, voluntary work, support groups.
- Organise someone to do a class on yoga, dance, massage, reflexology .....

#### Keywords

| hereditary | supplement  | diary      | plaque   | lifestyle | balanced |
|------------|-------------|------------|----------|-----------|----------|
| diet       | resolutions | prevention | exercise | genetic   |          |
|            |             |            |          |           |          |

#### Being healthy

Everyone has an opinion on what "being healthy" is. Start by asking the group for their opinions and make a list of everything mentioned. Compare the views with the following points.

Being healthy means;

- Having as good a quality of life as possible.
- Preventing illness in so far as is possible.
- Managing illness well when the need arises.

Using these definitions as an example then a person who has asthma is "being healthy" if they don't smoke and if they take medication as prescribed. On the other hand, a person might give the impression of being healthy because they go to the gym after work but if they also take diet pills to keep their weight down or drink a bottle of wine a day, they could be doing more harm than good. Being sensible and not doing things to excess is probably a good rule!



| My healthy side | My unhealthy side |
|-----------------|-------------------|
|                 |                   |
|                 |                   |
|                 |                   |
|                 |                   |
|                 |                   |
|                 |                   |
|                 |                   |
|                 |                   |

| Work | sheet 🕢 A healthy lifestyle                                       |
|------|---|
|      | Make a list of the things that help in having a healthy lifestyle |
| List |   |
|      |   |
|      |   |
|      |   |
|      |   |
|      |   |
|      |   |
|      |   |
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|      |   |
|      |   |
|      |   |
|      |   |

#### The factors which determine our health

Many factors influence and determine the health of individuals and of populations. This can be seen in the diagram below. The diagram shows **external** or **structural** factors that influence health; these are social, economic, cultural, and environmental. It also shows **individual factors** that affect our health; these include our age, sex, heredity and lifestyle factors.



Discuss

Discuss what each of these factors means. How can they affect a persons health?

What factors do the group think have the strongest and weakest influence? Compare these to the facts!

The facts53% Individual Lifestyle – "choices I can make"16%: Sex, age and hereditary factors – "things beyond my control"10%: Health care – "the services and supports available to me"21%: Environment – "the things and people around me"

#### **Determinants of health**<sup>1</sup>



1. Department of Health and Children (2000). National Health Promotion Strategy, 2000-2005. Dublin, Stationery Office.

#### Six types of health

**Physical health** is being able to rely on your body to work efficiently and relates to being physically fit and well and living to full physical potential.

Mental health is the ability to think clearly and coherently.

**Emotional health** is being able to recognise and express emotions such as fear, joy, grief and anger. It may also mean coping with normal stress, tension, depression and anxiety that are part of most peoples lives.

Social health is being able to relate healthily to other people.

**Societal health** is about promoting healthy and caring communities and neighbourhoods. It is difficult to be healthy in a society that does not provide the resources for basic physical and emotional needs.

**Spiritual health** may be expressed through religious beliefs and practices, love of nature, and is also to do with personal and moral beliefs and ways of achieving peace, serenity and creativity.<sup>2</sup>



2. Enjoying the Whole of My Health, Being-Well, Health Promotion Unit, Department of Health and Children.

Worksheet



#### My health Circle

Divide up your health circle into 6 parts, giving the bigger part to the things which are most important in your life. Then write in all the words you associate with that part of your life, for example on the spiritual part you might have prayer, nature, beliefs.



#### Taking steps to improve lifestyle

Sometimes we set ourselves unrealistic targets or aim to make changes that are 'too much, too soon'.

I'll join the gym, go everyday and not eat between breakfast and tea

Making lifestyle changes, even small ones isn't easy and we're good at putting things off or finding reasons not to do anything.

I'll buy these jeans and I should fit into them by the end of the month

I'll give up the fags once the holidays are over

If we don't succeed, we get discouraged. However, lifestyle changes that are well thought out and realistic have a much better chance of working. So it's important to be realistic and plan our changes well.



Have a look at the picture of Ann and her son. How would you describe Ann's lifestyle?

Discuss

Role play

You call into Ann and she tells you that the doctor says she has a chest infection. You think that her lifestyle is unhealthy and you decide to

offer some friendly advice. Continue in a role play and afterwards discuss how it felt to give advice and to take advice.



#### Stages of change

Lifestyle changes that are well thought out and realistic have a much better chance of working. There are a number of stages involved in making changes.



Take a look at the 'relapse' point. We're all familiar with that. For example, if we're trying to stop smoking we might relapse by having 'just the one'. Relapses are common and there are two ways to deal with them One is to throw in the towel and use the relapse as an excuse to give up. The other is to see it as a lapse, pick yourself up and keep going towards a healthier life.



Worksheet

Look at your own lifestyle and list the things which are not good for your health. Then ask yourself what can you do to change.



#### Taking responsibility for childrens' health

Parents responsibility for their children's health starts even before conception, for example when the mother starts taking food supplements such as folic acid. The choices that a mother makes about smoking, drinking alcohol and her diet all have long term impact on a child's physical and emotional well-being. Parents' responsibilities continue during pregnancy, infancy, on through childhood, onto adolescence and sometimes beyond.



List the types of decisions which parents make at each stage of their child's development. An example has been given in each section to get started.

| Pre-pregnancy       | Pregnancy                      | Infant            | Child                   | Adolescent        |
|---------------------|--------------------------------|-------------------|-------------------------|-------------------|
| • Taking folic acid | • Avoid alcohol and cigarettes | • Being immunised | • Regular dental checks | • Rubella vaccine |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |
|                     |                                |                   |                         |                   |

#### Staying healthy

"Your health is your wealth"

Being healthy is more than the absence of sickness and disease. It's also about feeling good about yourself. In the same way that people get their car serviced to make sure that it is running well, our bodies also need to be serviced and looked after. There are many things we can do to keep well and prevent illnesses happening in the first place.

Being healthy requires a number of things:

- Understanding how your body works and what it needs to stay fit and well.
- Believing that your health matters.
- Being aware of what illnesses may effect you.
- Knowing how to protect yourself against illness and disease.
- Being able to read leaflets and understand health campaigns.
- Knowing what services are available and how to access them.

Being able to do these things depends on having information, knowing where to get information and being able to interpret that information and act upon it. This often requires good reading and communication skills which can put people with literacy problems and low self-esteem at a disadvantage when it comes to maintaining good health and preventing illness. Information can also be misinterpreted or misunderstood which can cause huge problems. This happens not just at an individual level but also at a national or international level, particularly in relation to the spread of disease.



Can you think of cases where information has been misunderstood or wrongly presented?

Reflect

#### Food and Lifestyle

A balanced diet helps maintain a healthy lifestyle. The food pyramid is often used to show how you can achieve a balanced diet.





Fill in your food pyramid from yesterday. For example, a bowl of cereal with milk would be one serving from the bottom shelf and one serving from the diary shelf.

How does it compare with the recommended pyramid?

#### Healthy eating guidelines

Use these guidelines to discuss how learners could improve their eating habits.

#### Healthy eating guidelines

- Eat a variety of different foods using the food pyramid as a guide.
- Eat the right amount of food to be a healthy weight and exercise regularly.
- Eat four or more portions of fruit and vegetables every day.
- Eat more foods rich in starch bread, cereals, potatoes, pasta and rice.
- Eat more foods rich in fibre bread and cereals (especially wholegrain), potatoes, fruit and vegetables.
- Eat less fat, especially saturated fats. Make lower fat choices whenever possible. Ovenbake instead of frying.
- If you drink or eat snacks containing sugar, limit the number of times you take them throughout the day.
- Use a variety of seasonings try not to rely on salt to flavour foods.
- If you drink alcohol, drink sensibly and preferably with meals.



Divide into two groups and put together arguments for and against one of these statements.

Discuss

- "Many schools are introducing healthy lunch guidelines which is great."
  - "It costs money to eat healthily."
  - "The media has a lot to answer for!"

#### What food does for your body

Food does three things for the body.





Choose a discussion topic relevant to your group, for example:

Discuss

School children are dieting in greater numbers than ever before. Why is this happening?

- On the one hand we are surrounded by information which tells us what food is good for us and what to avoid and yet surveys show that more and more people are eating readymade meals and fast food.
- ➡ What has changed food habits and is it always for the worst?
- Sou are what you eat.



#### Stress and lifestyle

Stress is not always a bad thing. A certain amount of stress is good as it can help to motivate us into action. However, stress becomes a problem when the demands of life are greater than we can cope with.

The stress bar below shows the extreme ends of how stress can impact or not. You could use this to get the group to reflect on how stress effects them.



There are a number of things worth remembering when it comes to stress:

- Everyone feels stressed at some stage.
- Stress is different for each person and what one person finds stressful another may not.
- A person's ability to deal with stress can be different at different times.
- Stress can be managed and recognising when it is taking over is the first step in managing it.



Louise and her three children are living in her mother's house since her separation. Louise's mother looks after the baby when Louise is at her part-time job. Her mother often picks the older children up from school and gets them started on their homework. Louise hopes to rent a place before Christmas but the rents are so high.



Discuss

What are the stress points in Louise's life and also her mother's life?
What about the children?

What stresses are around today that add more pressure to people's lives?

#### Dealing with stress

Developing ways to deal with stress is essential in maintaining a healthy lifestyle. A first step is to look at whether our own behaviour leads to stress.



Recognising when you are more stressed than normal is important in doing something about it..

People sometimes try to ignore stress by doing the following:

Drinking

Isolating themselves

Taking on more







All of these actually ADD to the stress. You'd be better off DOING

Exercise

Leaving work on time





Talking to someone



#### Dental health

Healthy teeth are important for our appearance and are necessary for speaking clearly and chewing food. Bad teeth not only look bad but they also cause pain and bad breath.

There are three basic ways to maintain healthy teeth and gums:

- 1. Eating the right foods
- 2. Brushing twice a day
- 3. Having regular check-ups with the dentist



Dentists do more than drill!

Discuss

#### **Dental Words**



| Words              | Meanings  |
|--------------------|---|
| Tooth decay/cavity | Hole in the tooth caused when tooth enamel breaks down                        |
| Plaque             | Sticky substance that builds up around teeth which bacteria feed on           |
| Dentures           | False teeth   |
| Сар                | False tooth which fits over real tooth  |
| Wisdom teeth       | The last four adult teeth at the very back                                    |
| Baby teeth         | The first teeth   |
| Fluoride           | Mineral added to drinking water and toothpaste which helps reduce tooth decay |
| Dental floss       | Thread that goes between teeth to remove plaque and food                      |
| Braces             | Wires to correct the shape of teeth in the mouth                              |
| Orthodontist       | A specialist dentist who straightens teeth                                    |

#### Taking steps towards a better lifestyle

Being informed about what a healthy lifestyle is and why it is so important are the first steps in taking control of your health. Most of us could do with making some changes to our lifestyle. These changes can be small, like cutting down on coffee or taking a walk at the weekend. For those who feel that their lifestyle needs a major overhaul, it's still better to break it into manageable changes.

Writing things down helps get focussed and sets out steps that need to be taken. Writing helps in building an accurate picture of what your current situation is, as well as recording what goals have been reached. This gives the motivation to go on and is there as a reminder when the going gets tough!

Although people don't set out to fail, it is good to predict possible pitfalls that might happen and have a way of dealing with them. Doing this when you're feeling enthusiastic and motivated is the best time.

#### Keeping a Health Diary

It helps to write down what changes you want to make and keep track of your successes and hiccups! Have a look at how Brendan used a diary to prepare for giving up cigarettes.

#### My Health Diary

Brendan used a diary to help quit smoking. He kept a record of what he smoked each day over one week. This gave him a true picture of the number of cigarettes he smoked in a week. It also helped him see what times he smoked most and least.

#### What I smoked in the first week of April





|           | Morning                         | Dínnei | r Afternoon                | Tea | Evening                            | Total |
|-----------|---------------------------------|--------|----------------------------|-----|------------------------------------|-------|
| Monday    | 2 at home                       | 4      | 3 at break                 | 3   | 7                                  | 22    |
|           | 1 walking to work<br>2 at break |        |                            |     |                                    |       |
| Tuesday   | 5                               | 3      | 2                          | 4   | 10                                 | 24    |
| Wednesday | 8 (had the<br>morning off)      | 3      | 4                          | 3   | 3 (looking after<br>grandchildren) | 21    |
| Thursday  | 3                               | 2      | 3                          | 4   | 15 (went to pub)                   | 27    |
| Fríday    | 3                               | 3      | 4                          | 2   | 6                                  | 18    |
| Saturday  | 6                               | 2      | 10 (watched<br>game on TV) | 2   | 10                                 | 30    |
| Sunday    | 2 (gardening)                   | 3      | 4 (went to<br>cínema)      | 4   | 6                                  | 19    |
| TOTAL     | 32                              | 20     | 30                         | 22  | 57                                 | 161   |

#### My smoking habit

Always - walking to work, at break, after dinner and tea, having a drink, watching telly

Rarely - near the grandchildren, busy doing something

Cost per week - about €50

Now that Brendan has a better idea of how many cigarettes he smokes and when he smokes most and least, he can predict when he'll find it hardest. Brendan knows that he smokes less when looking after his grandchildren and when he's busy doing jobs.



#### Week 1

Starting date: 7th April

I díd not smoke OR I díd smoke

The hard part was at work and after my dinner

The easy part was when I kept myself busy
- I thought about them but not all the time

What I'm pleased about is I did it - this is the first time I've quit. My family are delighted

I saved €50 on cigarettes and €20 on not going to the pub

#### My plan for week 2

Keep it up Paint the gates Go to Joe's party and refuse any cigarettes and not drink too many pints just in case. Take my wife out for surprise with the money I've saved.

#### Resource Material

| Resource  | Suggested uses  |
|---|---|
| Guide to Daily Healthy Food Choices   | Leaflet containing good, clear<br>information on healthy eating, using the<br>food pyramid. Available from the Health<br>Promotion Unit.  |
| Health Promotion Unit<br>Department of Health and Children,<br>Hawkins House,<br>Dublin 2<br>Ph.: 6354000<br>Fax: 6354372<br>Web: www.healthpromotion.ie                  | Large range of health information<br>leaflets available from health promotion<br>units of each health board. Check out<br>publications database on<br>www.healthpromotion.ie  |
| Home Economics for Junior Certificate<br>by Carmel Enright and Maureen Flynn.<br>Published by Folans (1995)   | Useful tutor resource on basic nutrition, healthy eating, food pyramid.   |
| Moving-On Manual – Available from Cherish<br>cost €35<br>Cherish Association of Single Parents,<br>2 Lr. Pembroke Street,<br>Dublin 2<br>Ph. 6629219                      | Topics covered include personal<br>development, stress, health issues. Useful<br>handouts and worksheets.   |
| The Irish Heart Foundation,<br>4 Clyde Road,<br>Ballsbridge,<br>Dublin 4.<br>Ph. (01) 6685001<br>Fax: (01) 6685896<br>Email: info@irishheart.ie<br>Web: www.irishheart.ie | The Irish Heart Foundation has a wide<br>range of information on heart health.<br>Issues such as cholesterol, physical<br>activity, smoking – good resource<br>material for tutors and information for<br>students. |

The Health Pack - The Basic Skills Agency Cost €19.65 Available from NALA., 76 Lower Gardiner Street, Dublin 1. Ph: (01) 8554332 Fax: (01) 8555475 Email: literacy@nala.ie Web: www.nala.ie

### The MANUAL – For men on cancer prevention and early detection

Available from: Irish Cancer Society, 43-45 Northumberland Road, Dublin 4 Ph.: 01 2310500 Web: www.cancer.ie

#### Women and Health – a workbook

Published by the Workers' Educational Association, 1 Fitzwilliam Street, Belfast BT9 6AW

#### www.drugsinfo.ie

www.malehealth.co.uk

www.unlocked.ie

Resources, worksheets and activities with health as the theme.

In addition to this specific booklet, the Irish Cancer Society has a wide range of healthy lifestyle information focusing on cancer prevention.

Topics include knowing your own body, heart health, breast cancer, menopause and osteoporosis. Contains worksheets, quizzes and handouts

Health Promotion Unit site dealing with the issue of drugs. Booklet for parents available on this website.

Information on male health issues. This is a UK based health charity.

Health Promotion Unit site dealing with the issue of alcohol. Tutor resource.

# Taking

# Medication Section 2

#### Aim

To build confidence and knowledge around issues concerning medication.

#### **Objectives**

- Distinguish between the various types of medications.
- Recognise key words associated with different types of medication.
- Feel more confident in talking to the doctor or pharmacist about medication.

#### Content

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| Types of medication | 36 |
| Taking medication   | 36 |
| Getting advice      | 37 |
| Reading labels      | 42 |
| Medication diary    | 44 |
| Table quiz          | 46 |

#### How to use this section

- Discussion on how members of the group treat illness, such as going to the doctor, chemist, doing nothing, using traditional cures, taking alternative medicine.
- Discuss what influences the sorts of medication we take.
- Ask the group to make a list of the words on the medicines that they have at home and check for understanding and meaning. Ask the group to come up with their understanding of the word or symbol and ask the local chemist for feedback.
- Invite the local chemist in to talk about taking medication and how the chemist can help.
- Debate whether advertising medication is a good or bad thing.
- Compare Ireland's access to medication with other countries people have visited or know about.
- Identify what makes it difficult to ask the chemist for advice and explore solutions to these problems. Role play might be useful.

#### **Keywords**

| pharmacy     | prescription drugs | dosage | complete | chemist | alternative medicine |
|--------------|--------------------|--------|----------|---------|----------------------|
| side effects | as required        | nausea | apply    | consult |                      |

#### Background

Repeated studies have shown that as many as half the people taking medication are not taking it properly <sup>3</sup>. In some cases this is out of choice but in others it's because the person has difficulty reading the instructions, calculating the doses or simply remembering to take the medication. This section looks at ways to help people better understand and follow the instructions to take medicine safely and effectively.

In the past, people relied on remedies and cures derived from local herbs and plants. People in the community who knew how to use plants in this way were widely respected as healers. Although many of the old ways have disappeared, some are still used today.

| Nettle sting – dock leaf | Sprains – vinegar bandages |
|--------------------------|----------------------------|
| Bee sting - vinegar      | Sun burn – raw potato      |
| Sore throats - honey     | Chilblains - urine         |

Today, the treatment of illnesses is very different and most people take manufactured medicines bought in the chemist or shop. There are medicines for every illness and the pharmaceutical industry is a very profitable business. However, there is an increase in the number of people who are opting for alternative medicine such as homeopathy, acupuncture, reflexology and aromatherapy.



🐔 🖒 The pha

c)

Discuss

- S What other cures do people know or use?
  - Why do you think that alternative medicine is growing in popularity?
  - The pharmaceutical industry is sometimes accused of being more
  - interested in their profits than our health. Is this fair?
# Types of medication

The most common types of medicines can be broadly categorised into one of three types.

| Prescribed by the doctor | Medicine bought over<br>the counter in a<br>chemist or shop | Homeopathic, herbal or<br>vitamin |
|--------------------------|---|-----------------------------------|
| Antibiotics              | Asprin  | Tea tree cream                    |
| Steroids                 | Cough bottle  | Rescue remedy                     |
| Inhalers                 | Rash cream  | Cod liver oil                     |

Medicine can be used for different things:

- To prevent an illness occurring, for example taking a steroid inhaler for asthma.
- To redress imbalances in the bodies system, for example taking insulin for diabetes.
- To cure illness, for example taking antibiotics for infection.

# Taking medication

To take medication properly you need to be familiar with the words used and what they mean. Check with the group what words they are already familiar with. Depending on what comes up you could add others from the list below.

| Different types<br>of medication | Directions | Dosage          | Side effects       |
|----------------------------------|------------|-----------------|--------------------|
| Tablet                           | Orally     | Spoonfuls       | Headache           |
| Capsule                          | Swallow    | Tablets         | Rash               |
| Cream                            | Inhale     | Puffs           | Breathing problems |
| Bottle                           | Apply      | Apply sparingly | Vomiting           |
| Spray                            | Dissolve   | Drop            | Nausea             |
| Drops                            | Instil     |                 |                    |
| Sachet                           |            |                 |                    |
| Powder                           |            |                 |                    |
| Injection                        |            |                 |                    |
| Inhaler                          |            |                 |                    |
| Suppository                      |            |                 |                    |
| Patch                            |            |                 |                    |

Check that you and the group understand the words and phrases commonly used in medicine instructions. For example:

> "take at regular intervals" "excessive pain" "increased anxiety" "use sparingly"



The group might come up with suggestions about the meaning of these words but the only way of knowing the exact meaning is to check the chemist or doctor.

# Getting advice

People get advice about their health problems in lots of different ways. Friends and families are often very good for support but not always very qualified! Information sources like leaflets and the internet can provide factual information which may or may not apply. In many cases we self-diagnose and buy medication which we hope will do the trick. Without knowing it we could be doing ourselves more harm than good, so it's always a good idea to get advice from either the doctor or chemist.

People with low literacy skills often find it more difficult to ask for advice and to discuss their symptoms with health professionals than people with good literacy skills. There are a number of reasons for this including fear of exposure, a lack of confidence dealing with authority figures and not understanding medical jargon. This can lead to unsafe and ineffective use of medication as well as reinforcing negative feelings.

Rather than waiting for the chemist or doctor to ask if you understand, a good technique is to politely interrupt and get clarification whenever you're unsure.

These might be useful

"Excuse me, can I just check something you just said. "

"I'm not quite sure I got that".

"Excuse me, is this what you mean......".

"Sorry, I'm a bit lost".

#### At the chemist

The word 'chemist' has traditionally been used to describe both the shop and the person. However nowadays all chemist shops use the word 'pharmacy' and chemists are often known as pharmacists. They are the same thing.

Many people go to the chemist for a diagnosis and advice. Chemists are experts on medicines and they are also trained to recognise and treat minor ailments and give healthcare advice. They can also tell if someone should go to the doctor.

The more they know about the symptoms the easier it is to diagnose and advise.



Discuss why the chemist is annoyed and how the mother might feel.

Worksheet

# My Symptoms

Gathering the facts helps the chemist to diagnose what the problem is and advise you. Here is a list of questions the chemist might ask.



#### Asking the embarrassing question

Many of us have at one time or another felt embarrassed or shy about asking the chemist a question. Have a look at Kate's situation.



Men are sometimes reluctant to get medical help when they are ill. For example, Tony feels embarrassed about getting help with his peeing problem but eventually gives in by going to the chemist. Kate decides to ask the chemist for advice after forgetting to take the pill yesterday but feels embarrassed. What advice would you give to Kate on how to feel less embarrassed?



# Worksheet

# Designing the ideal chemist



You've been asked to design the ideal chemist shop. In smaller groups think about:

Discuss

• what items would go where

the layout

• where could you talk in private



# Reading labels

Even with good reading skills, reading medicine instructions can be tedious and confusing. The writing is often very small and there is so much information contained in a small space. Many people end up just scanning to find what they are looking for. For people with reading problems medicine labels can present enormous problems and potentially serious risk. Reading is one challenge and the other is understanding what the information means.

There are four important things to know when taking medication:

- 1. Taking the right medication for the illness.
- 2. Taking the right dose at the right time.
- 3. Knowing what the side effects might be.
- 4. Knowing if the medication can be taken with other medication.

All medicines contain standard information on the box. Additional information is printed on a leaflet found inside the box. Look at the sample below and the information it contains.



### Prescription labels

When the doctor prescribes medication they also write when and how it should be taken. The pharmacist prints this information on a label. The label is then put on the box or bottle. Although labels can vary they do contain standard information which is shown below:



#### The key information is

- ➡ Who the medication is for
- The dosage, or how much to take
- $\Rightarrow$  When to take it
- Specific instructions about taking it before or after food

EECO (

 $\Rightarrow$  When it was bought



Some medicines come in liquid form, particularly medication for children. The dosage is usually given in millilitres (ml) which can be confusing but they usually give you a spoon or syringe with the measurements marked out. Always check that there is a measuring spoon or syringe is in the box and if not, ask the chemist for one.



Discuss

Ask the group to bring in or write out some of the details from the labels they have at home and see what information is easy to follow and what is difficult to follow. The group might want to discuss their suggestions with the local chemist.

# Medication diary

Taking medication at the right time is the safe and effective way to take it.

Designing a personal medication diary to help someone keep track of when and how much medication to take can be useful. Start by looking at the labels and what the instructions say.



Most instructions are based on taking medication before or after meals and assumes that people eat breakfast, dinner and tea.

So get advice on how to take medication if:

- You work shifts and eat at different times.
- You're looking after a patient who sleeps a lot and you aren't sure if they should be woken to take medication.
- You forget to take or give a dose.



The diary will be more effective if the person has to fill in something. Make sure the diary suits the person and the way they have to take their medication.

Write

| My Medicin      | e Diary       |               |
|-----------------|---------------|---------------|
| Doctor's name   | and number:   |               |
| Chemist's nam   | e and number: |               |
| Medication I ta | ake           |               |
| Name            | How often     | What it's for |
|                 |               |               |
| I'm allergic to |               |               |
|                 |               |               |
|                 |               |               |
|                 |               |               |

Worksheet

| This example is for someone taking two type  | s of medication  |
|--|--|
| My Medicine Diary  |  |
| My doctor  | -  |
| My chemist   | -  |
|  |  |
|  |  |
| Name of medicine   | Name of medicine   |
| What is it for   | What is it for   |
| Date started   | Date started   |
| Time $\bigcirc$ $\bigcirc$ $\bigcirc$ $\bigcirc$ Mon $\checkmark$ $\checkmark$ $\checkmark$ $\checkmark$ Tues $\checkmark$ $\checkmark$ $\checkmark$ $\checkmark$ Wed $\checkmark$ $\checkmark$ $\bigcirc$ Thurs $\square$ $\square$ Fri $\square$ $\square$ Sat $\square$ $\square$ Sun $\square$ $\square$ | Time →   before food.   Mon   ✓   Tues   ✓   Wed   ✓   Thurs   Fri   Sat   Sun |
| Date finished  | Date finished  |
|  |  |

# Medicine table quiz

You have a sore ear. Should you
 a) ask a friend to pour warm cooking oil in?
 b) go straight to accident and emergency?
 c) go to the pharmacy or doctor?

2. A chronic sickness is

- a) a terribly bad sickness
- b) a life threatening sickness
- c) slowly developing and long lasting sickness
- 3. Avoid alcohol means
- a) don't take alcohol
- b) don't take as much as normal
- c) don't take spirits
- 4. Instruction Take half a 5ml spoonful three times a day.

What is half of 5 ml?

5. Instruction - One to be taken twice daily

How many tablets should you take each day?

6. Instruction - Take 6 tablets on day one and reduce by one until finished.

How many tablets should you take on day 3?

7. Instruction - Take two once weekly on the same day each week

How many days a week should you take tablets?

8. True or False?

Medicines shouldn't be stored in the bathroom because the heat and moisture can damage them

9. True or False?

Chemists and pharmacists are the same

Answers to quiz on next page.



# Resource Material

| Trick Dharman antical Haalthaan Association |
|---|
| Irish Pharmaceutical Healthcare Association |
| (IPHA),<br>Franklin House                   |
| Franklin House,                             |
| 140 Pembroke Road,                          |
| Dublin 4                                    |
| Ph.: 6603350                                |
| Fax: 6686672                                |
| Email: info@ipha.ie                         |
| Web: www.ipha.ie                            |
| Knowledge is the Best Medicine –            |
| Information on taking medication.           |
|   |
| Managing Your Minor Ailments                |
| Effectively                                 |
| Vaccination – Children have a right – we    |
| have a responsibility                       |
| Your Child's Immunisations                  |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |
|   |

| Answers: | <b>1</b> . c) | <b>2</b> . c) | <b>3</b> . a)   | <b>4</b> . 2.5ml | <b>5</b> . 2 |
|----------|---------------|---------------|-----------------|------------------|--------------|
|          | <b>6</b> . 4  | <b>7</b> . 2  | <b>8</b> . True | <b>9</b> . True  |              |

# Filling out medical forms Section 3

#### Aim

To provide information on forms used in the health system and patients' rights within the health system.

#### **Objectives**

- Know where and how to apply for health services.
- Recognise key information being requested.
- Practice filling in forms.
- Raise awareness of patients' rights and access to information.

#### Content

|   | Applying for health services | 50 |
|---|------------------------------|----|
| I | Filling out forms            | 53 |
| I | Making appointments          | 58 |
| I | Your medical records         | 63 |
| I | Resource material            | 65 |

#### How to use this section

- Look at how the health system works.
- I Invite a speaker in to talk about medical entitlements.
- Discuss what changes are currently planned which will effect people.
- Explore what inequalities people feel exist in the system and what people can do to voice their opinions.
- Gather as many forms as possible through contacting health services, calling into local services and using the internet.
- Design useful information cards.
- Use calendars and abbreviations for days of the week and months.
- Use role play for making appointments.
- Make a list of patients rights.

- Make a health record to suit the patient.
- Information gathering involves a range of skills which may meet some of the requirements for FETAC. Try to link the use of the phone or requesting information or completing forms to meet these requirements.
- This could be a good section to show the group how the internet works. Each health board has a website and it's likely that some of the group will recognise some of the locations or photos.

#### Keywords

| health boards | benefits     | application | dependents |
|---------------|--------------|-------------|------------|
| eligible      | entitlements | PPS         | applicant  |
| spectacles    | out-patients | refer       | fluids     |
| appointment   | preparation  | fasting     | consent    |
|               |              |             |            |

# Applying for health services

The state provides health services to all citizens and charges according to income. Some people are entitled to medical cards and others have to pay for services. Approximately a third of Irish citizens have private health care with BUPA or VHI.



Why do so many people have private health cover when the state provides it free?

To apply for health benefits you have to know what you might be entitled to. There are a range of benefits available which are means tested or needs assessed. Many people do not claim everything they might be entitled to because they do not know it is available. Knowing what is available is the first step. Check with the group what their existing knowledge of benefits is.

This is a list of services that provide information and application forms.

| SOURCES                                   |  |
|---|--|
| Local Health Centre                       | Information and forms  |
| Regional Health Board                     | Good for an overview of what is available. Each health board has a website giving details of what is available. Forms can be downloaded and printed off.   |
| Doctors/dentists/opticians                | All have the necessary tax and social welfare forms for treatment.   |
| Citizens Information Centre<br>(C.I.C)    | Offer free information on all issues including health. CIC's help citizens access their rights and entitlements.   |
| On-line OASIS website<br>www.oasis.gov.ie | This site aims to provide information to the public on a wide range of topics,<br>including health. It explains what is available, who is eligibile, criteria for<br>health services, where to get forms, appealing decisions. |



For those with computer access this could be a good opportunity to introduce computers into the session. It could simply be a matter of showing people what their local health board site looks like.

#### What am I entitled to?

Most people who have a medical card or private health insurance know the basics of what they are entitled to but not always the detail. This can result in people not maximising their entitlements. In the case of medical card holders, entitlements can change every year after the budget.

#### Medical cards

Medical cards are issued by the health board and entitle the card holder to get certain health services free of charge. In most cases this also covers the card holders children and dependent spouse. Doctors who accept patients with medical cards have a GMS (General Medical Services) contract with the health board.

#### Remember this information can change so always check it before using with the group.

#### If you have a medical card you are entitled to: (2004 information)

- GP services
- prescription medicines
- in-patient hospital stays
- out-patient hospital services
- dental services
- hearing services
- medical appliances such as crutches
- medical care during and after pregnancy
- and €10.16 when each child is born

#### Who is eligible?

- Everyone over 70 years
- In general, people who are getting the maximum means tested payment (full unemployment benefit, disability benefit)
- One parent family payment
- Children in foster care
- Students between 16 25 who are dependent on parents who have medical card



Ask the group to gather information about entitlements that are relevant to them.

Find out

# Checking entitlements in the local C.I.C (Citizens Information Centre)



A sample Change of Doctor form is on page 56

# Filling out forms

Forms can sometimes be confusing and difficult to understand. However, there are some standard things that are on every health form.

It might be useful to put those details on a small card. You could carry it in a purse, or wallet or pocket and use it when you're filling in forms.

| Name                   |    |
|------------------------|----|
| Address                |    |
| Phone number           |    |
| Date of birth (dob/Dol | 3) |
| Medical card number    |    |
| PPS number             |    |
|                        |    |



Your PPS is your Personal Public Service number which has replaced the old PRSI number.

The standard information health board forms ask for is listed below.

| APPLICANT'S NAME   |   |
|--|---|
| TELEPHONE NUMBER<br>DATE OF BIRTH<br>MEDICAL CARD NO<br>PPS NUMBER |   |
| Signature of Medical Perso<br>For office use only                  | n |



| Try these    |  |
|--------------|--|
| Your name    |  |
| Friends name |  |
|              |  |
|              |  |
|              |  |
|              |  |

#### Dates

Dates can be written in different ways including boxes. The format is dd/mm/year which means day/month/year.

| 1 March 1957 =     | 01031957 |
|--------------------|----------|
| 19 October 1964 =  | 091064   |
| Try these:         |          |
| Your date of birth |          |
| Today's date       |          |
| 10 September 2001  |          |
| 6 April 1975       |          |
| 21 August 1999     |          |

## Change of doctor form

This form is completed when the health board agrees that the patient can change doctor. The form is divided into two parts, one filled in by the patient and the other part filled in by the doctor.

List what steps the patient has to take before sending in the form, starting with who the patient contacts in the local health board.

| South<br>Eastern<br>Health<br>Board   | Community Care Headquarters,<br>James' Green,<br>Kilkenny,<br>Ireland,<br>Telephone: (056) 52208<br>Fax: (056) 64172 |
|---|--|
| date<br>SOUTH EASTERN   | HEALTH BOARD   |
| I wish to change my choice of Doctor u<br>Please arrange to transfer me and my o<br>of:-                                |  |
| Doctor:   |  |
|   | (Please use Block Capitals)  |
| who has signed the "Doctor's Acceptar   | ce" part of this form, below.  |
| Cardholder's Signature:   |  |
| Name:   |  |
| Address:  |  |
|   |  |
| Card Register No:   |  |
| Number of Persons Covered:  |  |
| DOCTOR'S ACC  |  |
| I agree to provide general practitioner s<br>named above (and his/her dependants<br>Section 63 of the Health Act, 1970. | services for the medical card holders  |
| DOCTOR'S SIGNATURE:   |  |
| REGISTER NUMBERS:   | AND ADDRESS  |
|   | (Please use Block<br>letters or rubber stamp)  |
| THE APPLICANT LIVES<br>RESIDENCE  | MILES FROM   |
| DATE  |  |
| DATE:   |  |

#### Application for an eye test

Many forms use the medical name and not the familiar name. For example, the health board service which deals with "Eyes" is called the "Ophthalmic Services Scheme". Many medical words are based on the Latin or Greek language. Words connected with eyes come from the Greek word optic, which means eye or vision. Have a look at these words:

Optician (ophthalmic optician) - the person who specialises in eyes

Optical – helping vision

Optical illusion - something we think we saw

| Application For Eye Examin   | ation/Op                   | otical Ap      | plianc        | es    |
|--|----------------------------|----------------|---------------|-------|
| This Application applies to adult medical card h<br>not qualify for Optical Benefit under the Depar<br>Altairs Optical Benefit Scheme.<br>An applicant must not arrange to have an eye<br>Health Board approval has been received.<br>Health Board | Iment of Soci              | sl Communi     | ty and Fa     | rniły |
| APPLICANT'S NAMEADDRESS  |                            |                |               |       |
|  | DATE OF                    | вктн []]<br>[] | 566<br>[   1] |       |
| Do you use spectacles?   | YES                        |                | NO            |       |
| Do you wish to have an eye examination?  | YES                        |                | NO            |       |
| When did you last have an eye examination?   |                            |                |               |       |
| of source to the source source advances  |                            |                | _             |       |
| If application is for replacement glasses<br>please state when glasses were last<br>supplied and reason for this application   |                            |                |               |       |
| please state when glasses were last  | l da you wish              | to receive y   | our cye       |       |
| please state when glasses were last<br>supplied and reason for this application<br>From which member on the Health Board pane  | do you wish<br>Optical Die |                | our eye       |       |
| please state when glasses were last<br>supplied and reason for this application<br>From which member on the Health Board pane<br>examination/optical appliance?  | Optical Di                 |                | our cye       |       |
| please state when glasses were last<br>supplied and reason for this application<br>From which member on the Health Board pane<br>examination/optical appliance?<br>Optical Examiner  | Optical Di                 | -penser        | our eye       |       |
| please state when glasses were last<br>supplied and reason for this application<br>From which member on the Health Board pane<br>examination/optical appliance?<br>Optical Examiner  | Optical Dis                | -penser        | our cye       |       |

#### Hospital Forms

Hospital patients are described as in-patients when they are staying in the hospital, and as out-patients when they are being treated in the hospital but staying at home. In both cases there are a lot for forms to be completed which contain personal details and medical information.



In nearly all cases the staff complete the forms on computer or by hand. Very often all the patient has to do is sign the forms. This is where your personal detail card could come in handy.

# Making appointments

It is a good idea to be prepared when phoning a hospital about an appointment.

- Look at the appointment card or letter and underline the phone number, the doctor's name and department.
- Your phone call might be answered by a voice recording, and you might have to choose a number to be put through to the department. Usually the last choice you're given is 0, for 'assistance' or the switch. Use that if you're stuck.
- Have a calendar in front of you that you can mark the date of your appointment on it.
- Ask whether you need to do anything in preparation for the visit, such as not eating, or bringing in medication you are taking.



#### Appointment Cards

After your first visit you will be given an appointment card. Each hospital has its own card but the information is usually the same.

Its important to read the appointment card or letter thoroughly.

| To avoid | connection | APPOINT     | IMENTS<br>NOT ATTEND BEFORE the time  |
|----------|------------|-------------|---------------------------------------|
| 10 20010 | Congestion | of your app |                                       |
| DATE     | DAY        | TIME        | SPECIAL NOTES OR TESTS REQUIRED       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             | · · · · · · · · · · · · · · · · · · · |
|          |            |             |                                       |
|          |            |             |                                       |
|          |            |             |                                       |



Read the appointment letter on the next page and fill in this appointment card.

Write

This is a sample letter sent to parents about their child's operation.



List the things that the parent is being asked to do in preparation for her child's admission

Discuss

## THIS NOTEPAPER MUST NOT BE USED FOR

PRESCRITIONS OR INVOICING PURPOSES

Leitrim Hospital Co. Leitrim 078 23456

15 September 2003

Ms. K. Daly,

Main St.,

Carrick-on-Shannon

No. 423956

Dear

An admission date has been arranged for your child on Monday 2nd October 2004 at 2pm under the care of Dr. Fiona Walsh.

Your child can have a light breakfast before 6.30am but please ensure that your child is fasting after this time. Please check into the Children's Ward between 10 - 10.30am. **Please contact me on 1234567 to confirm this.** 

If this date is not suitable or you no longer require this surgery for your child please contact the hospital as soon as you receive this letter.

Please bring evidence of current entitlement to health services including medical card or any private health insurance scheme including cover type and subscriber number.

Yours sincerely

Secretary to Dr. Fiona Walsh





#### Being an in-patient

When you are admitted as a patient there are lots of forms to be filled. Usually the staff ask a lot of questions and fill in the details on computer or write on the form. All your information is kept in a file which is kept at the end of the bed.

#### **Consent Form**

A Consent Form is a form which the patient signs giving permission for the surgery or procedure to go ahead. Before signing, the doctor explains what the surgery will involve and what possible side effects there might be. Doctors also outline what complications can arise. Parents or guardians sign on behalf of children under 16 years.

Very often we sign forms without knowing exactly what we are signing and we often say we understand when maybe we don't. But it is important to ask questions and say you don't understand.

| CONSENT FORM                                   |  |  |
|--|--|--|
|  |  |  |
|  | Ward   |  |
|  |  |  |
| 1  | of   |  |
| · · · · · · · · · · · · · · · · · · ·          | hereby consent to                            |  |
| _(undergo                                      |  |  |
|  | to undergo)                                  |  |
| (ward  | )  |  |
| the operation of                               | ••••••                                       |  |
| the nature and purpose of which have been      | explained to me by                           |  |
| Dr./*Mr  |  |  |
|  |  |  |
| I also consent to such further or alternation  | ative operative measures as may be found     |  |
| necessary during the course of the abov        | e-mentioned operation and to the admini-     |  |
| stration of general, local or other anaestheti | ics for any of these purposes.               |  |
|  |  |  |
| No assurance has been given to me that th      | e operation will be performed by any parti-  |  |
| cular practitioner.                            |  |  |
| Date Signed                                    | ATIENT/PARENT/GUARDIAN/NEXT OF KIN)*         |  |
| Witness  | 5  |  |
| I confirm that I have explained the nature a   | nd purpose of this operation to the patient/ |  |
| parent/guardian/next of kin*                   |  |  |
| parent guardian/next of kin                    | 5  |  |
|  | ·  |  |
| Date Signed                                    | (MEDICAL PRACTITIONER)                       |  |
|  |  |  |
| *DELETE AS APPROPRIATE.                        |  |  |
|  |  |  |
| ANY DELETIONS INSERTIONS OD AMEND              | MENTS TO THE FORM ARE TO BE MADE             |  |

#### Hospital Charters

Every hospital has a Patients Charter. These charters outline what patients have a right to expect when attending or staying in hospital.



Ask the local hospital for a copy of their Hospital Charter and review how good it is. Write and tell them your views.

Discuss

# Your medical records



Although there is no law on accessing medical records, GP's and hospital doctors generally allow patients access to their medical files on request.

The health services have a duty to maintain patients health records in confidence. They cannot show patient records to people outside unless the patient gives permission or if ordered by the courts. Medical records are considered to be the property of the GP or hospital and they will have a procedure which patients need to follow in order to see their records.

If for any reason a patient is not allowed to see their records, there a two pieces of legislation which could be used to gain access.

- **1.** The Data Protection Act was introduced in 1988 which allows people to see personal information stored on computer. GP's and hospitals have a duty to show a patient their information and correct anything that is incorrect.
- **2.** The Freedom of Information Act (FOI) was introduced in 1997 allowing people access to personal information held by public bodies. In relation to health, the Act applies to GPs if the patient has a medical card, health boards and voluntary hospitals but not private hospitals. There is a procedure to follow which starts by getting in contact with the local health board or the FOI office.

#### Have all patients the same rights?

Children under 16 do not have the right to see their records but their parents can ask to see them. If for some reason they are not allowed, they can apply under the FOI. Adults who have a mental incapacity or are severely disabled are allowed to see their records provided that the relevant health professional thinks it is appropriate. In most cases they will ask that a health professional is present to help explain what the records mean.

#### Keeping your own records

Keeping a health diary seems like a chore, but when it comes to health it can be the difference between getting the right treatment or not, and even between life and death. A healthy diary is a record of what is important to remember and know.

It's a very good way of accurately updating the doctor or nurse of how treatment is working or what changes you've noticed. It can also be very useful when someone else might be caring for the person when you're away.

This sample is a record which parents keep about their son's asthma. They use it for doctors visits and have also given a copy to their son's teacher. Everyone, including the babysitter, knows where it's kept in the house.

| Conor's Asti                     | hma Record   |
|----------------------------------|--|
| Eileen and Ton<br>Allergy to dog | n's mobíle 088 98765432<br>haír  |
|                                  | ríl 2003<br>twíce a day, morning and nigh<br>hen needed- only one puff |
|                                  | <u>ms</u> - one or some of these;<br>pale and tired.                   |
|                                  | <u>ymptoms</u> - stop playing and<br>ve inhaler if wheezy              |
| <u>Check ups -</u><br>Date       | Changes in medicatio   |
|                                  |  |
|                                  |  |

# Resource Material

This information will change by 2005

#### Health Board website addresses:

North Western Health Board, Manorhamilton, Co. Leitrim Ph (071) 9820400 Fax (071) 9820431 www.nwhb.ie

Midland Health Board Administrative Headquarters, Arden Road, Tullamore, Co. Offaly. Ph (0506) 21868 www.mhb.ie

Western Health Board Administrative Headquarters, Merlin Park Regional Hospital, Galway Ph (091) 751131 Fax (091) 752644 www.whb.ie

Eastern Regional Health Authority (includes East Coast Area Health Board, Northern Area Health Board, South Western Area Health Board or Counties Dublin, Wicklow and Kildare.) Mill Lane, Palmerstown, Dublin 20 Ph. 6201600 Fax 6201601 Web: www.erha.ie

North Eastern Health Board, Admistrative Head Office, Kells, Co. Meath. Mid-Western Health Board 31.33 Catherine Street, Limerick Ph (061) 316655 Fax (061) 483350 www.mwhb.ie

Southern Health Board Administrative Headquarters, Wilton Road, Cork Ph (021) 4545011 www.shb.ie

South Eastern Health Board Lacken, Dublin Road, Kilkenny Ph (056) 7784100 Fax 056) 7784388 www.sehb.ie

# Resource Material

#### Resource

www.oasis.gov.ie

www.welfare.ie/forms

#### Local hospitals

Child Health Record – Available from the Health Promotion Unit Department of Health and Children, Hawkins House, Dublin 2 Ph.: 6354000 Fax: 6354372 Web: www.healthpromotion.ie

#### Suggested uses

The OASIS (on-line access to services, information and support) website produces frontline information on public services for the use by the public. The information is displayed in life event order, for example grouped around child-birth, education, employment and bereavement.

Website of the Department of Social and family Affairs. Forms can be downloaded from this site.

Provide copies of consent forms, admission forms etc. for use as work sheets for students.

# Healthcare Settings Section 4

#### Aim

To have an understanding of the health system and develop skills which increase confidence in communicating with healthcare staff.

#### Objectives

- Know what services are available at local level and how to access them.
- Reflect on communications and behaviour when talking to health practitioners.
- Explore ways to communicate effectively with health practitioners.
- Recognise hospital signage and regularly used medical language.

#### Contents

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#### How to use this section

Use whichever of the activities in this section suit your group. You might also want to consider other activities such as:

Explore why so many people find it difficult to assert themselves in healthcare settings.

- How does this compare with other situations, the teacher, your boss, others in authority.
- Use humorous role play to exaggerate the doctor/patient relationship.
- Look at doctor/patient visits from the doctors perspective and what makes it difficult to treat some patients.
- Use medical tv programmes to discuss the styles of different healthcare staff.
- I Identify personal difficulties in talking to the doctor and look at ways to overcome them.
- Use the local hospital as an example and look at the signage and department names and devise ways of recognising words.
- Design a visitor friendly hospital signage board and send it the local hospital for their views.
- Discuss queueing systems and how they work or don't work.

#### Keywords

| GP        | consultant     | surgeon      | specialist |
|-----------|----------------|--------------|------------|
| symptoms  | family history | scan         | procedure  |
| diagnosis | prognosis      | departments  | ICU        |
| routine   | admitted       | cancellation | elective   |
|           |                |              |            |

# Healthcare at local level

Health boards provide a range of healthcare services under two categories. One is primary healthcare, which is based in the community and the other is hospital healthcare.

Primary healthcare staff are involved in promoting good health and preventing illnesses as well as the treatment of illnesses which don't require hospital care. They include:

| occupational therapists   | community nurses | care assistants | physiotherapists |
|---------------------------|------------------|-----------------|------------------|
| health promotion officers | social workers   | physiologists   | GP's             |
| alternative medicine      | home helps       | dentists        |                  |

There are a lot fewer hospitals than surgeries and clinics, and people often have to travel quite a distance for hospital treatment. Hospital care is either emergency or elective. Elective treatments are hospital stays that are planned in advance and people awaiting treatment go on a waiting list.

#### Your local services



Make a list of all the health care services in your area. If there isn't already a local directory you could think about making one. You could simply make a list or divide into sections for certain group such as older people, pregnant women, families and so on.

Check with the GP, dentist, chemist, the hospital, health board and public health nurse, support and counselling services, Citizens Information Centres, addiction services, mental health groups to see what is available and what they offer.



This could be a useful project and would involve using a range of skills such as computers, information finding, communications and organisational skills. It might be worth checking if the project could be shared with another tutor such as the computers or communications tutor. There could be lots of benefits like producing a better directory and maybe even progressing the FETAC portfolios.





Have a look at the list below.

Tick the box which describes you best

Reflect

Т

|    | I   | yes | sometimes | no |
|----|---|-----|-----------|----|
| 1  | feel relaxed before a doctors appointment                           |     |           |    |
| 2  | find my doctor is easy to talk to                                   |     |           |    |
| 3  | am embarrassed to talk about certain things                         |     |           |    |
| 4  | always forget to mention something                                  |     |           |    |
| 5  | usually leave satisfied   |     |           |    |
| 6  | understand everything my doctor is saying                           |     |           |    |
| 7  | explain my symptoms clearly   |     |           |    |
| 8  | find it difficult to ask questions                                  |     |           |    |
| 9  | feel like the customer getting a service                            |     |           |    |
| 10 | find it easier to talk to the receptionist or nurse than the doctor |     |           |    |
| 11 | say I understand when I don't                                       |     |           |    |
| 12 | would feel comfortable to disagree with the doctor                  |     |           |    |
| 13 | get annoyed when the doctor suggests I make changes in my lifestyle |     |           |    |
| 14 | find myself more timid than normal                                  |     |           |    |
| 15 | interrupt if I don't understand                                     |     |           |    |
| 16 | feel I'm taking up the doctors time                                 |     |           |    |

# Visiting the doctor's surgery

Most people agree that they behave differently when talking to a doctor. People talk about feeling less confident and quieter or not saying what they had planned.

One reason why this can happen is because doctors use medical language. Years of medical training results in doctors using a language which can be alien to many patients. Doctors are often unaware of how alien their language is and can overestimate how much patients understand. The greater the gap between the doctors and patients language, the greater the likelihood that the patient feels uncomfortable or powerless.



Have a look at this list and discuss whether you agree or disagree with the statements.

Discuss

GP's
Use medical jargon which they don't
explain.
Make assumptions that the patient
understands.
Always take into account the patients
personal circumstances.
Become impatient when the patient
finds it difficult to explain their
symptoms.
Get frustrated that the patient doesn't
take responsibility for their health.
Often do more than treat medical
problems.

#### Patients

Are embarrassed to talk about certain conditions.

Do not understanding what the GP is saying.

Do not have the vocabulary to explain their symptoms clearly.

Often go to the GP when there's no need.

Do not want to waste the GP's time.

Are reluctant to make lifestyle changes which the GP suggests.

In recent years the medical profession has introduced various measures to improve the relationship between patients and medical staff and the health system, such as staff training and patient charters. While this is certainly a good thing, it does not necessarily ensure that patients become more pro-active in their healthcare. It is usually the doctor who enables and encourages the patient to become more involved by creating a safe and non-threatening environment for dialogue to happen. This starts by putting patients at ease by talking to them in a language they understand. As in all relationships, people begin to engage when they feel listened to and believe that they will benefit by communicating.


## Preparing for a visit

Healthcare settings can be intimidating places when you are not used to them and particularly so when a person is ill and feeling more vulnerable than normal. This is compounded further when the patient has a literacy problem as well. Although healthcare staff play a key role in creating an environment where patients feel comfortable communicating, patients can also take steps such as:

- Finding out what to expect within the healthcare setting and anticipating what the experience might involve.
- Preparing for the visit in advance by being able to explain symptoms and bringing along any medication they are taking.
- Being prepared to ask questions and answer questions.

#### In the hospital

- In the hospital you'll be asked a lot of questions by lots of different staff and maybe even have to answer the same things more than once. Because it's your first time in the hospital they'll ask you personal questions about your family's health, what you work at, what religion you are. They want as much information as possible to make sure they give you the right treatment.
- The doctors and nurses work together to treat you and they will keep asking you questions and writing things on your chart. That's so they can keep up to date, keep track of your treatment and make sure that when shifts change, everything is up to date.
- Doctors and nurses want you to ask questions and tell them when you don't understand something. They have no way of knowing that you don't understand unless you tell them. It saves a lot of time and also worry on your part.
- Always ask what you need to do when you've being discharged. Explain what your normal routine is and ask when you can drive, what you should eat, when you can go back to work and so on. Also, ask how long it will be before you're back to normal and if there are any side effects you need to be aware of.

### Referrals

While many people are familiar with visiting the GP, referrals to others services can cause anxiety. Patients worry that they may have something serious. They are anxious about having to go somewhere new. They often have to wait for appointments and results.

Understanding how the system works can help reduce some of these concerns and many questions can be answered by primary healthcare staff. Healthcare staff and patients sometimes make assumptions about what is understood. For example an appointment for an X-Ray could be an MRI scan which is a very different experience than the conventional X-Ray.

Preparation can make the experience easier. Ask the doctor what can you expect. This is a sample of what a doctor can explain before a patient goes into hospital.



Telling the doctor or nurse that you don't understand something is important but not always easy to do. Ask the group to come up with things that a patient could say that would help, for example;

- Can you explain that to me again please?
- I don't understand what that means?
- Sorry to interrupt, but I don't understand what you're saying.
- Could you draw that for me?
- How would that affect me?
- What does regular mean?
- I'd like to try physiotherapy

# Doctor asks have you any questions about the operation?



| NALA • Health Pack • Section 4 • Healthcare Settings |
|--|

#### Cathy's visit to the doctor

Cathy hasn't been feeling well for the last couple of months. She's had a hectic time looking after her mother since she got out of hospital. She decides to go to the doctor for a tonic.





What other information could Cathy have given and what questions could the doctor have asked?

It's worth checking what entitlements are available when someone gets sick.

Depending on Cathy's mother's circumstances, she may have been entitled to a home help, a grant to make changes to her house and/or health board transport. Cathy may be eligible for a carers allowance.



Try these role plays

Role play

| <b>Doctor</b>   | <b>Mick</b>  |
|---|--|
| You've seen Mick three times in two   | You've got little else except the cigarettes   |
| months. He won't stop smoking and he's  | and you just can't give them up. You don't   |
| got asthma.   | want a lecture.  |
| <b>Doctor</b><br>There's nothing wrong with Una except she<br>reads too many health scare stories and<br>always thinks she's got it. She's beginning<br>to take up too much time. | <b>Una</b><br>You read in a magazine that headaches can be<br>a sign of something serious. To be sure you<br>go to the doctor. |

## Finding your way in a hospital

Finding your way in a hospital can be confusing. It can be made easier with good signage.



Whether an in-patient, out-patient or simply visiting a patient, all hospitals have a lot of signs to help people get to where they want to get to. The first signs are often in the drive-way up to the hospital.



Win

Once inside the hospital there are usually at least two sets of signs in the main lobby, one directing people to the wards and the other to departments within the hospital. The names can be difficult to say and read.

### Wards

Most wards have names, usually called after people or saints. However, some wards use the medical name.

I.C.U. = Intensive Care Unit Pediatric Ward = Children's Ward G.I. = Gastro Intestinal (stomach) Neurology = Head Antenatal = Before birth Cardiac = Heart

## Hospital Signage



| $\mathbf{\nabla}$           | Audiology                   | Accounts    | $\leftarrow$  |    |
|-----------------------------|-----------------------------|-------------|---------------|----|
| $  \uparrow  $              | Language and Speech Therapy | Admissions  | ÷             |    |
| $\mathbf{\Lambda}$          | Occupational Therapy        | Bank        | $\uparrow$    |    |
| $\leftarrow \rightarrow$    | Accident and Emergency      | Coffee Shop | $\uparrow$    |    |
| $\checkmark$                | Cardiac                     | Information | ÷             |    |
| $\rightarrow$               | Dietic Department           | Prayer Room | $\checkmark$  |    |
| $\rightarrow$               | Eye Clinic                  | Shop        | $\rightarrow$ |    |
| $\checkmark$                | Haematology                 |             | $\uparrow$    |    |
| $\uparrow$                  | GI Unit                     |             | $\uparrow$    |    |
| $\left( \leftarrow \right)$ | Intensive Therapy Unit      |             | $\leftarrow$  |    |
| $\checkmark$                | Theatre- Operating Rooms    |             | $\checkmark$  |    |
| $\left( \leftarrow \right)$ | Physiotherapy               | ME          | $\rightarrow$ |    |
| $\mathbf{\Lambda}$          | Rheumatology                |             | $\checkmark$  |    |
|                             |                             |             |               | 77 |
|                             | i i i                       |             |               |    |

## Hospital visits

#### ..... as a patient

Each hospital has a system for patients checking in for an appointment or being admitted. In most hospitals patients have to join a queue. One of the queuing systems used is the *ticket number*.



People can be given hospital appointments which are months or even years away, so missing an appointment can mean even further delays. Missing appointments could affect patient health and will certainly annoy the staff.



#### ..... as a visitor

Visiting someone in hospital usually takes some organising so it's worth checking out a few things before setting off, starting with finding out if the person is still there!



## Resource Material

Visit local hospital websites

Ask local hospitals for copies of their Patient Charters.

Anseo: English for Living in Ireland.

Module 1: Health

Available from NALA, cost €20

Produced by: Integrate Ireland Language and Training (iilt)

Tel: 01 – 6775344

### General Resource Material

Doak CC., Doak LG., Root JH., (1995) Teaching Patients With Low Literacy Skills, 2<sup>nd</sup> Addition Philadelphia: JB Lippincott Company

Health Promotion Unit - (01) 6364000 www.healthpromotion.ie

Writing effective health information materials – Guidelines on writing and design techniques (2003) Wide selection of resource materials available

National Adult Literacy Agency - (01) 8554332 www.nala.ie Ann McCarthy (2002) **Health Literacy Policy and Strategy Report** 

NALA Writing and Design Tips (1999)

## Websites

| NALA Literacy Tools Website     | _www.nala.ie                               |  |
|---------------------------------|--|--|
| Basic Skills                    | _www.basicskills.ie                        |  |
| Health Boards                   | _see Resource Material in Section 3        |  |
| VHI                             | _www.vhi.ie                                |  |
| Oasis                           | _www.oasis.gov.ie                          |  |
| Doctor Patient Partnerships     | _http://www.dpp.org.uk                     |  |
| Health Literacy                 | http://www.healthliteracy.com              |  |
| Health Literacy Studies,        |  |  |
| Harvard School of Public Health | http://www.hsph.harvard.edu/healthliteracy |  |

# Appendix 1 – Medical Terms

| Medical Word        | Everyday Word/Explanation   | Example  |
|---------------------|---|--|
| Doctor or Physician | Doctor who treats patients with drugs                               | Respiratory Physician is a doctor who specialises in diseases of the lungs   |
| Surgeon             | A doctor who has specialised in doing operations/performing surgery | • Cardiac Surgeon specialises in heart operations  |
|                     |   | • Paediatric Cardiac Surgeon specialises<br>in doing operations on the heart in<br>children  |
| Diagnosis           | Tells you what illness you have                                     | "You have been diagnosed with arthritis"   |
| Prognosis           | Tells you the likely course of your illness/<br>A forecast          | "The prognosis is good/ bad"<br>"The prognosis is that you can lead a<br>normal life but will have to take<br>medication to control your symptoms" |
| Chronic Illness     | A long-term or persistent illness                                   | Chronic Back pain  |
| Acute Illness       | A short-term or sudden illness                                      | Acute Asthma attack  |
| Screening test      | A test used to check a large number of people for an illness        | Mammogram for breast cancer  |
| ENT                 | Ear/Nose/Throat   | ENT Specialist   |
| Therapy             | Treatment   | Radiotherapy, Chemotherapy,<br>Physiotherapy   |

| Part of body                      | Special area of<br>medicine - ology | Pronunciation           | Name of<br>Doctor/Specialist<br>ologist | Example of<br>illness<br>- itis                       |
|-----------------------------------|-------------------------------------|-------------------------|---|---|
| Heart                             | Cardiology                          | Car-dee-ol-o-gee        | Cardiologist                            | Carditis  |
| Skin                              | Dermatology                         | Der-mat-ol-o-gee        | Dermatologist                           | Dermatitis  |
| Joints                            | Rheumatology                        | Room-at-ol-o-gee        | Rheumatologist                          | Arthritis   |
| Digestive<br>System(stomach etc.) | Gastroenterology                    | Gas-tro-ent-er-ol-o-gee | Gastroenterologist                      | Gastroenteritis                                       |
| Diabetes/Hormones                 | Endocrinology                       | N-doh-krin-ol-o-gee     | Endocrinologist                         | Diabetes  |
| Tumour/Cancer                     | Oncology                            | On-kol-o-gee            | Oncologist                              | Cancer/tumour<br>Malignancy                           |
| Kidneys                           | Urology                             | U-rol-o-gee             | Urologist                               | Urethritis  |
| Lungs                             | Respiratory                         | Res-pir-a-tor-ee        | Respiratory Physician                   | Bronchitis  |
|                                   | Medicine                            |                         |   |   |
| Children's illnesses              | Paediatrics                         | Peed-e-at-rics          | Paediatrician                           | Diseases in<br>Children eg.<br>Paediatric<br>Diabetes |

-itis at the end of a word means inflammation of e.g. dermatitis = inflammation of the skin

| Medical Word    | Everyday Word/Expanation                                   | Example  |
|-----------------|--|--|
| Symptoms        | Signs of a sickness  | Headache can be a symptom of high blood pressure   |
| Malignant       | Harmful/ tending to spread to many parts of the body       | Malignant breast cancer  |
| Benign          | Not malignant / doesn't spread<br>throughout the body      | Benign tumour in the breast  |
| Procedure       | Something done to treat your problem, such as an operation | "There is a simple procedure that will fix that"   |
| Monitor         | Keep track of  | "We will need to monitor your heart to<br>make sure everything is ok"                          |
| Normal range    | "Where it should be", common amount                        | "Your blood pressure is within the<br>normal range"  |
| Hypertension    | High blood pressure  | Hypertension is a risk factor for heart disease  |
| Associated with | Goes along with  | Osteoporosis is associated with an higher risk of fracture as you get older                    |
| Prosthesis      | Replacement for a body part                                | "We will remove the damaged joint and<br>put in a prosthesis instead" (eg. hip<br>replacement) |
|                 |  |  |

#### What is the health pack?

This is a health resource pack for literacy tutors and health practitioners. The pack can help address some of the difficulties people experience when they deal with health issues and systems. The pack is intended as a resource for you to use and adapt to suit your group. The topics covered include Being Healthy, Taking Medication, Filling Out Medical Forms and Healthcare Settings.

#### What is NALA?

The National Adult Literacy Agency (NALA) is a non-profit membership organisation, concerned with national co-ordination, training and policy development in adult literacy work in Ireland. The Agency was established in 1980 and from that time has campaigned for recognition and response to the adult literacy problem in Ireland.



#### National Adult Literacy Agency

An Áisíneacht Náisiúnta Litearthachta do Aosaigh 76 Lower Gardiner Street, Dublin 1, Ireland. Tel: 01 8554332 Fax: 01 8555475 e-mail: literacy@nala.ie Further information about NALA and literacy issues are available on our webpage: www.nala.ie







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