



icare Health Literacy Framework  
**lifetime injuries**

## **icare Health Literacy Framework V1 - lifetime injuries**

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The icare Health Literacy Framework V1 has been developed for application in the lifetime schemes of icare.

These schemes include:

- Lifetime Care & Support Scheme (Lifetime Care)
- Workers Care Program (Workers Care)
- Dust Diseases Care
- CTP Care.

Participants, clients and workers on these schemes and programs are referred to as consumers in this Framework.

Insurance & Care NSW (icare) is the NSW government agency administering the lifetime schemes. icare oversees the operations of a number of insurance schemes and may apply the Lifetime Care Health Literacy Framework (or aspects of it) to the work we do with other icare customers.

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# What is health literacy?

More than half of the consumers who access health organisations are unsure of the information provided to them and services available to assist them in making informed decisions about their health.

Health literacy is “the degree to which a person has the knowledge, motivation and competencies to access, understand, appraise, and apply health information in order to make judgments and take decisions in everyday life concerning health care, disease prevention and health promotion to maintain or improve quality of life during the life course” (Sørensen et al, 2012; ACSQ-HC 2014).

Health literacy shapes people’s long-term health outcomes, the safety and quality of the care they receive and their overall quality of life.

More than 50% of Australians have low health literacy (ABS 2009; NSW Health Literacy Framework. 2019-2024).

The infrastructure, policies, processes, materials, people and relationships that make up the health and disability systems have an impact on how people are able to access, understand, evaluate and apply health-related information and services.



## Health literacy aligns with the safety and quality standards that every health/disability care organisation is striving to achieve.

### Why does health literacy matter?

We support people in Lifetime Care, Workers Care, Dust Diseases Care and CTP Care. They have a range of very severe injuries and illnesses which usually result in life-long interaction with icare and with health and disability services.

Health literacy is fundamental for these consumers so they can better manage their own health, rehabilitation and wellness effectively and achieve greater autonomy for long term quality of life outcomes, as well as their interactions with us.

Health literacy is a critical public health issue, and it is now well recognised that government, health, social and community service organisations have a responsibility to respond appropriately and effectively to the health literacy needs of their clients and communities.

Organisations have a vital role to play in ensuring that their services, programs and information are available and accessible to everyone.

icare operates within a range of health, disability, care and social sectors that our consumers interact with. Navigating these systems is complex and challenging.

**We therefore have a responsibility to ensure we provide information and programs in an environment which maximises health literacy outcomes for those individuals we serve.**



## Development of the icare Health Literacy Framework

Several key frameworks from health and disability international peak bodies and Australian and NSW government agencies have influenced the development of our Framework.

In addition, we considered the specific and unique needs of the consumers of our lifetime schemes to ensure our Framework was tailored their needs and to the range of services and systems that they need to engage and interact with.

### Key reference documents include:

- *NSW Health Literacy Framework – a guide to action*; **Clinical Excellence Commission**, NSW Health (2019)  
<https://www.cec.health.nsw.gov.au/improve-quality/teamwork-culture-pcc/person-centred-care/health-literacy>
- **Australian Commission on Safety and Quality in Health Care (ASCQHC)** (2013)  
<https://www.safetyandquality.gov.au/publications-and-resources/resource-library/health-literacy-taking-action-improve-safety-and-quality>
- *WHO global strategy on integrated people-centred health services 2016-2026*  
World Health Organisation, drafted 2015
- *Strategic Framework for Integrating Care*; **NSW Health** (2018)  
<https://www.health.nsw.gov.au/integratedcare/Publications/strategic-framework-for-integrating-care.PDF>

## Goals

1. Consumers of icare’s lifetime schemes have the knowledge, motivation and competencies to access, understand, appraise, and apply health and system information to make judgments and decisions concerning their health, disability and/or wellness to maintain or improve quality of life.
2. The lifetime schemes have the policies, tools and resources for staff and service providers to support health literacy in the people that we serve.

## Principles

The following principles underpin this Health Literacy Framework.

1. The needs of consumers and their families/ carers are at the centre of our health literacy strategy.
2. icare is a part of the individual’s environment and can directly impact their health literacy.
3. Staff programs, information and systems are accessible, easy-to-read, relevant and supportive; they should consider our diverse consumers’ needs (e. g. First Nations, CALD, gender diversity, aging).
4. icare’s lifetime schemes understand the health, disability, personal injury and insurance sectors within which it operates and effective partnerships with stakeholders to maximise the experience and have understanding of shared consumers.

5. The lifetime schemes’ leadership team will lead our health literacy strategy, but implementation is the responsibility of all.
6. All lifetime schemes are actively engaged in the health literacy strategy – assessing, monitoring and reporting on health literacy in order to improve continuously.
7. Health, disability and wellness programs and services are person-centred and promote empowerment, autonomy and self-directed management.
8. Health, disability and wellness interventions are timely.
9. Services are accessible, and where possible, local to where the consumer lives.
10. Services are coordinated across health and social sectors. Where necessary, consumers will receive care coordination (or case management) support to achieve integrated service coordination.
11. The capability of service providers in achieving health literacy outcomes for consumers is a shared responsibility.



# Our framework

The icare Health Literacy Framework places individual health literacy at its heart.

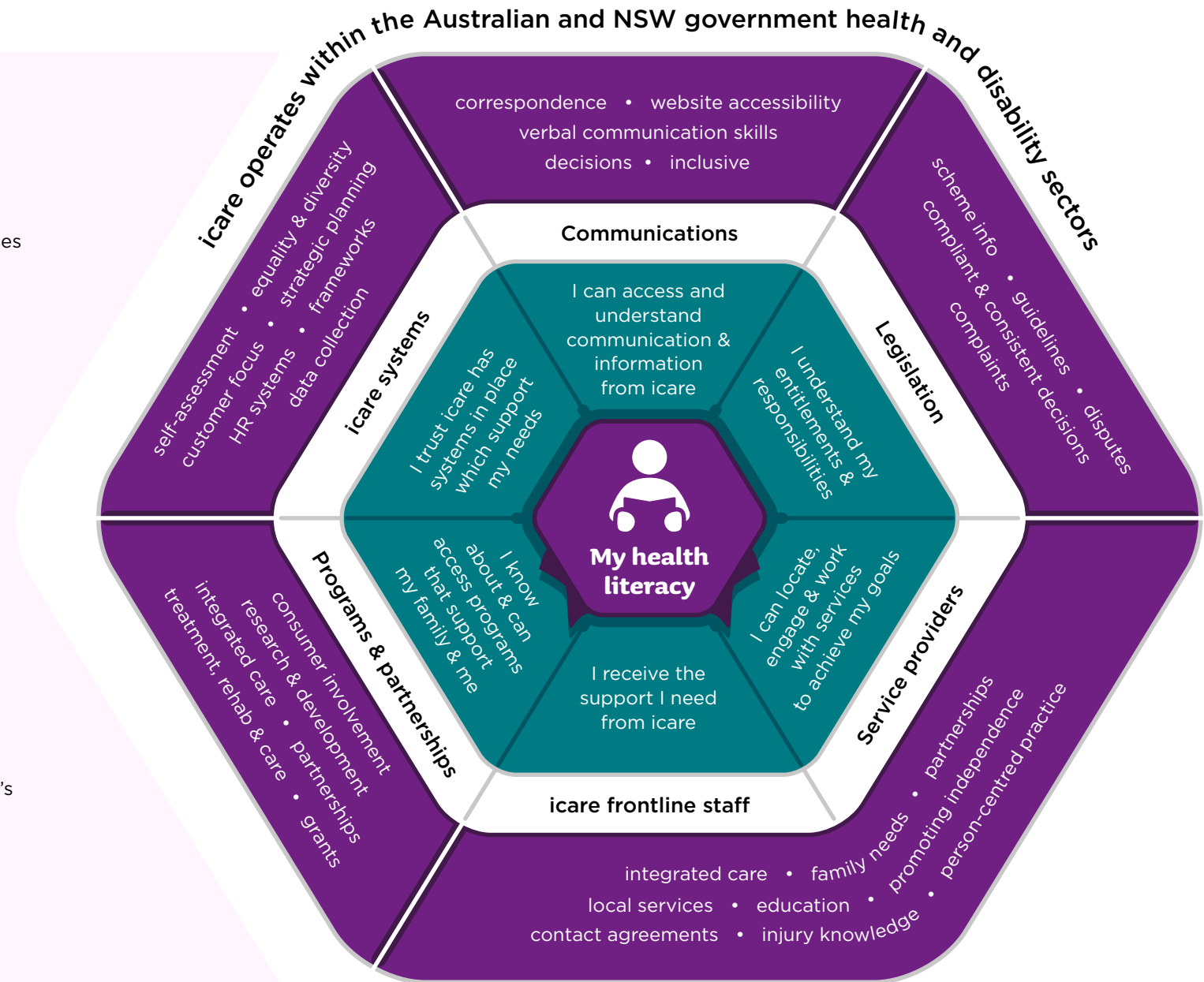
It segments the health literacy environment into six environmental domains:

- front-line staff
- service providers
- legislation
- icare systems
- programs and partnerships
- communications.

It considers the individual's needs across these domains, and how those needs influence our health literacy focus.

The Framework identifies key aspects of the work and systems developed by icare's lifetime schemes that that impact health literacy.

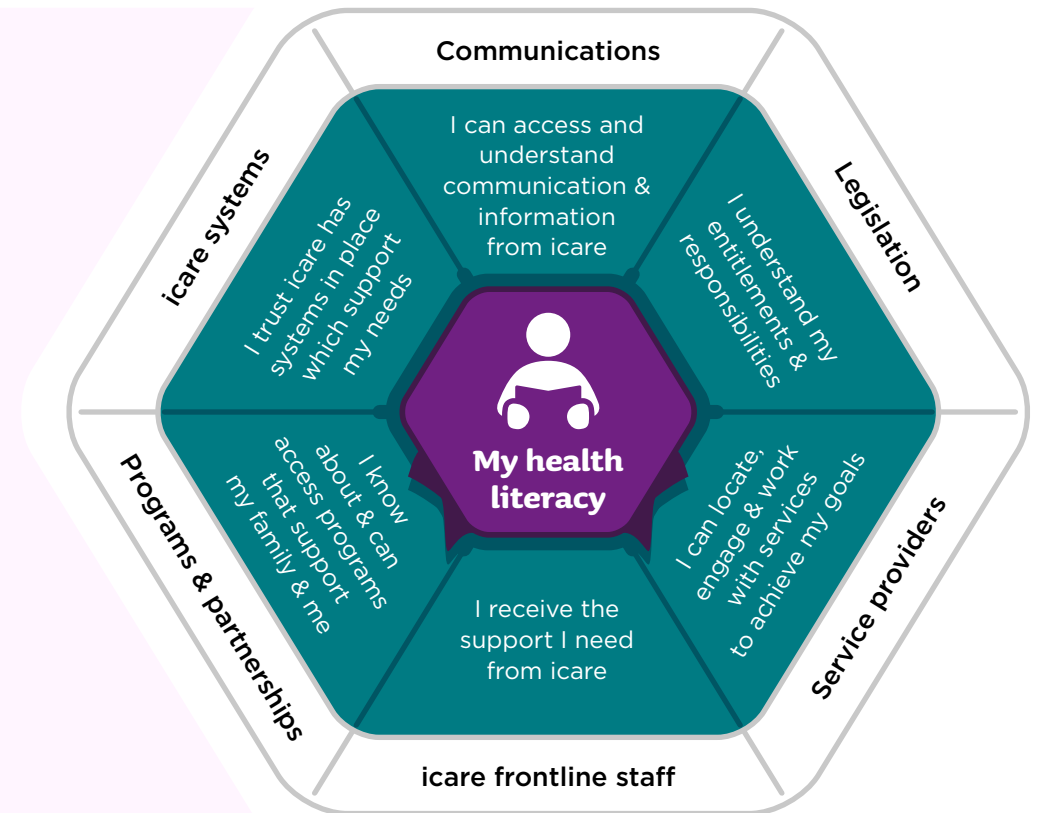
It recognises that we work within the context of the NSW and Australian Government health and disability sectors.



# Individual health literacy

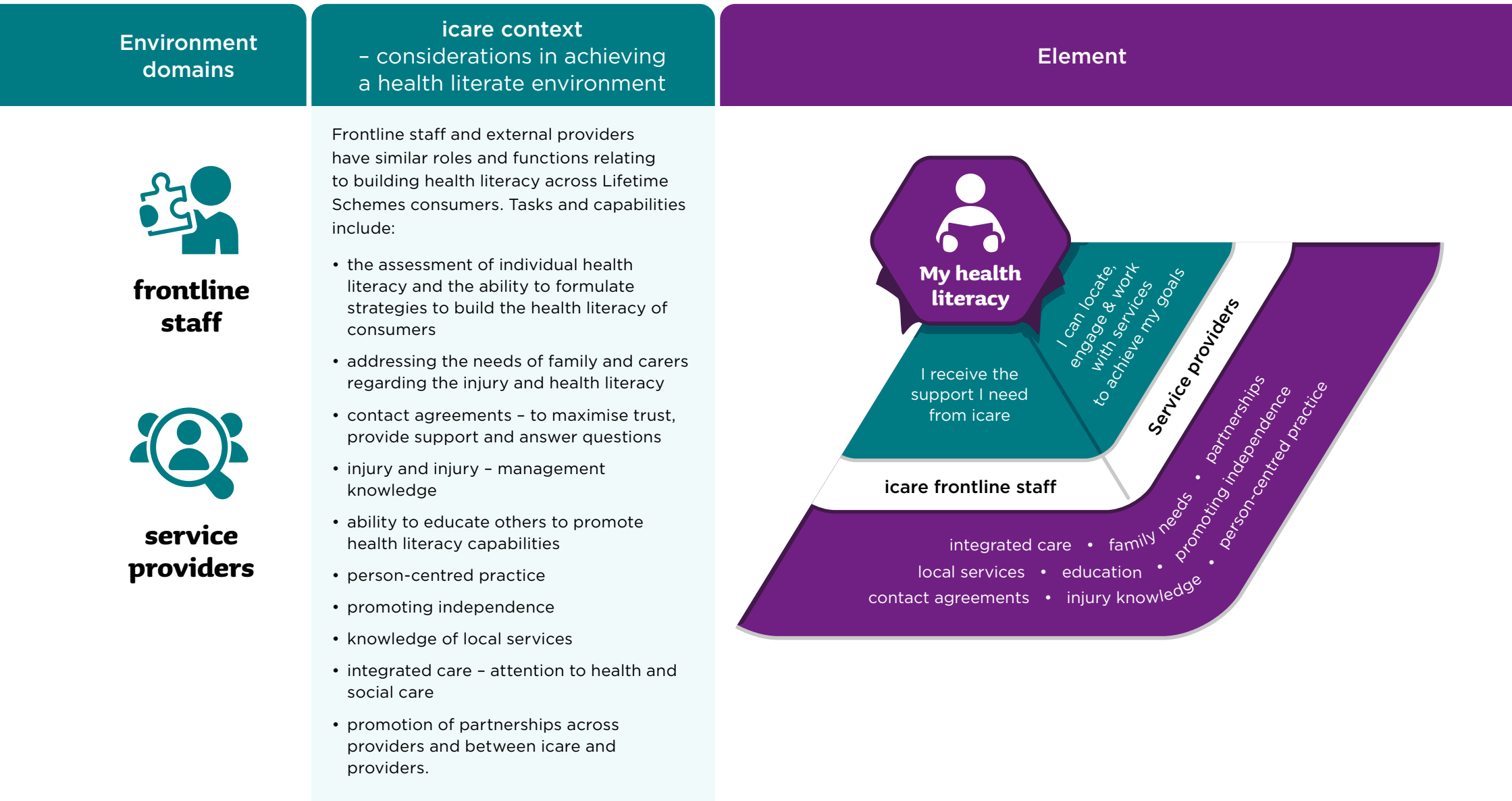
A series of statements demonstrate the individual's health literacy needs in each environmental domain:

icare frontline staff	<i>I receive the support I need from icare</i>
service providers	<i>I can locate, engage and work with services to achieve my goals</i>
legislation	<i>I understand my entitlements and my responsibilities</i>
icare system	<i>I trust icare has systems in place which support my needs</i>
programs and partnerships	<i>I know about and can access programs that support my family and me</i>
communication	<i>I can access and understand communications and information from icare</i>



# The health literacy environment

Within the icare context, health literacy needs to be actively embedded in our work within each of the environmental domains:



## Environment domain

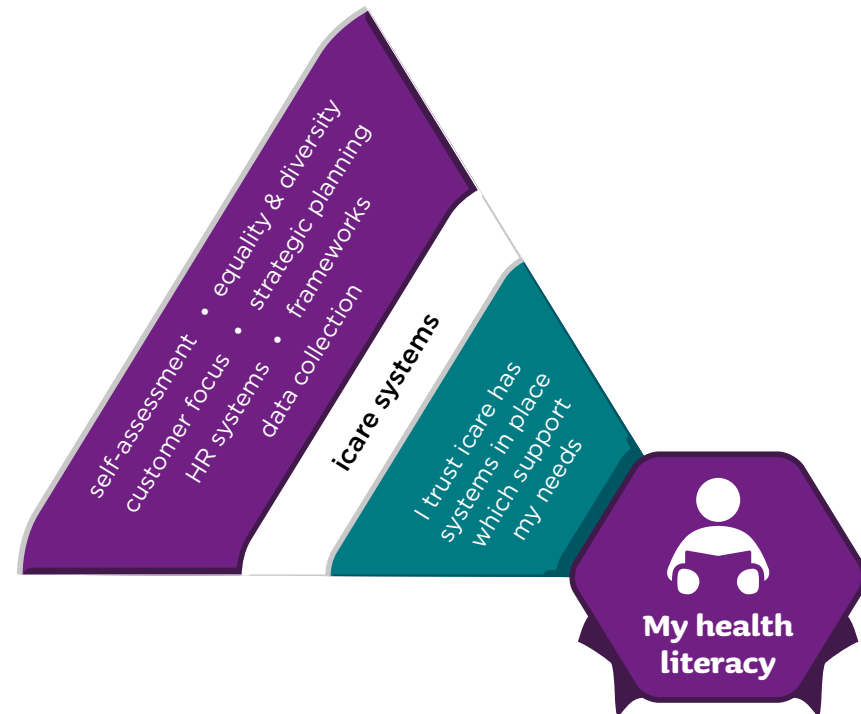
## icare context – considerations in achieving a health literate environment

## Element

icare™

### icare systems

- consumer focus in all that we do
- equality and diversity culture
- HR systems includes
  - recruitment practices
  - staff training systems
  - performance monitoring
- strategic planning – business plans that include health literacy as a priority
- organisational self-assessment against the icare Health Literacy Framework
- data collection and reporting
- frameworks include but not limited to:
  - provider engagement framework (PEF) – including defining provider relationships, performance management and performance monitoring
  - quality assurance framework
  - Health Literacy Framework





## Environment domain

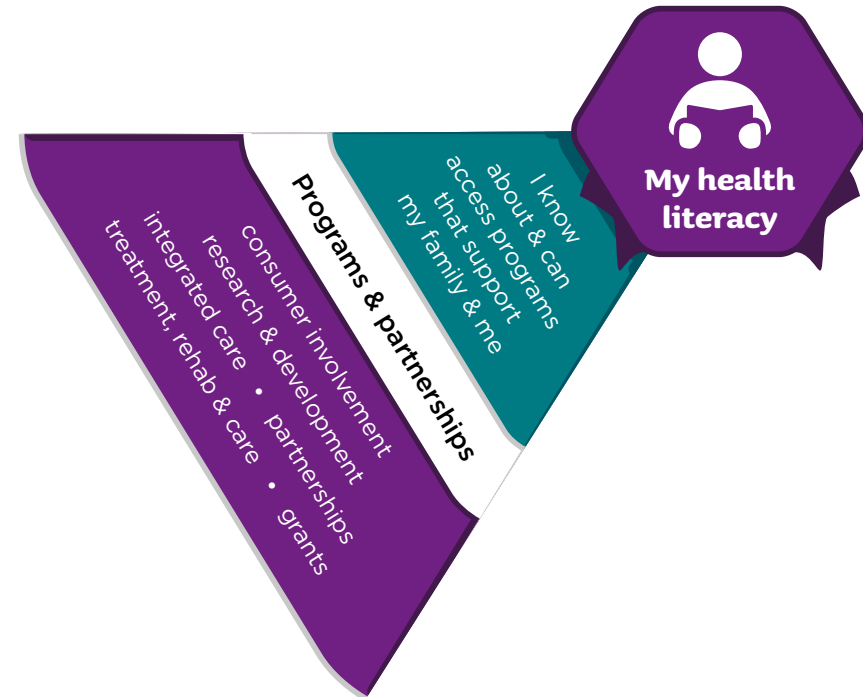
## icare context – considerations in achieving a health literate environment

## Element



### programs and partnerships

- investment in research and service development
  - commitment to evidence-based practice
- investment projects include health literacy considerations and outcomes
- consumer involvement in program development
- partnerships across sectors (e.g. health, disability, social, regulatory, funding, government)
- integrated care
- provision of reasonable and necessary (or reasonably necessary) treatment, rehabilitation and care services
- grants programs – who and what we fund through grants programs.



## Environment domain

### icare context

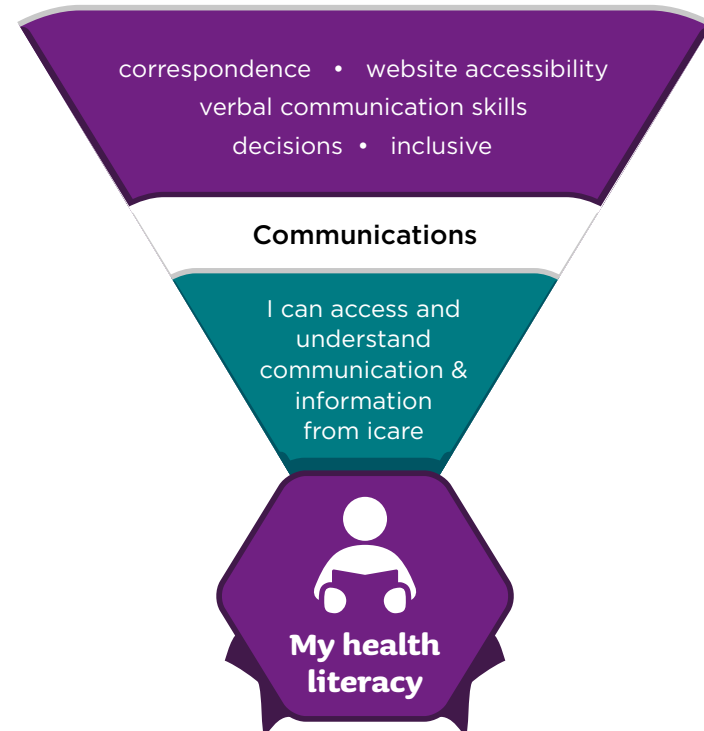
– considerations in achieving a health literate environment

## Element



### Communications

- website design and content
- information sheets/videos/graphics
- accessibility across all external communications
- correspondence documentation such as decisions, certificates, forms
- CALD accessibility considerations
- availability/responsiveness
- diverse communication channels
  - social media / website / newsletters / conversations / telephone / video calls / email
- level of communication skill of icare staff
- inclusive language for diversity.



## Environment domain



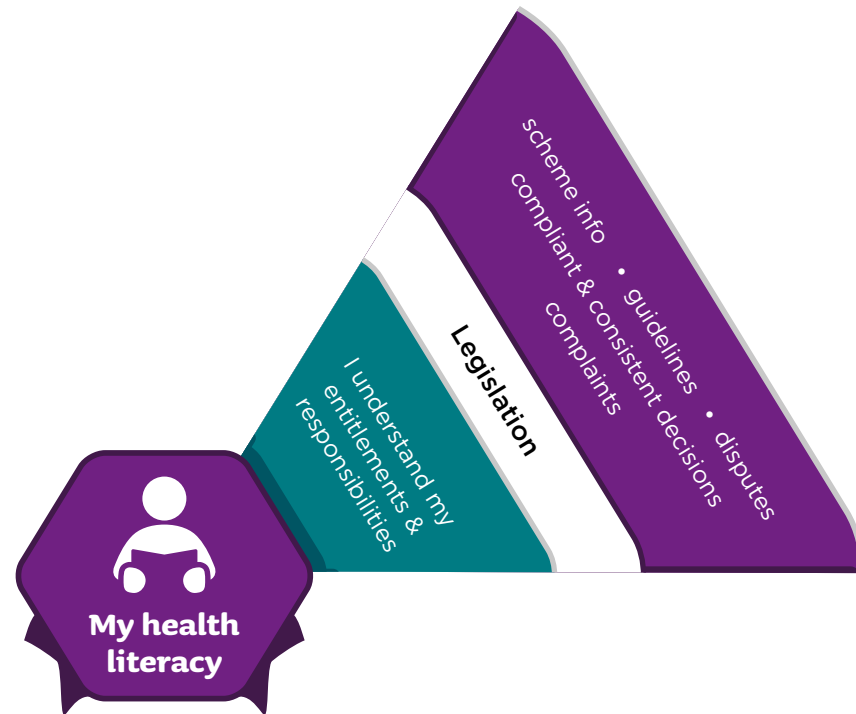
### Legislation

#### icare context

– considerations in achieving a health literate environment

- making Guidelines readily available – and available in easy-read formats
- clear and accessible complaints and disputes procedures
- scheme/program information available and accessible in a range of formats
- compliance and consistency in making decisions.

#### Element



## Framework formulation

The icare Health Literacy Framework places the individual consumer experience at the centre (My Health Literacy), a common theme across all models and frameworks regarding health literate organisations. It encompasses the four priority areas outlined in the NSW Clinical Excellence Commission (CEC) Framework:

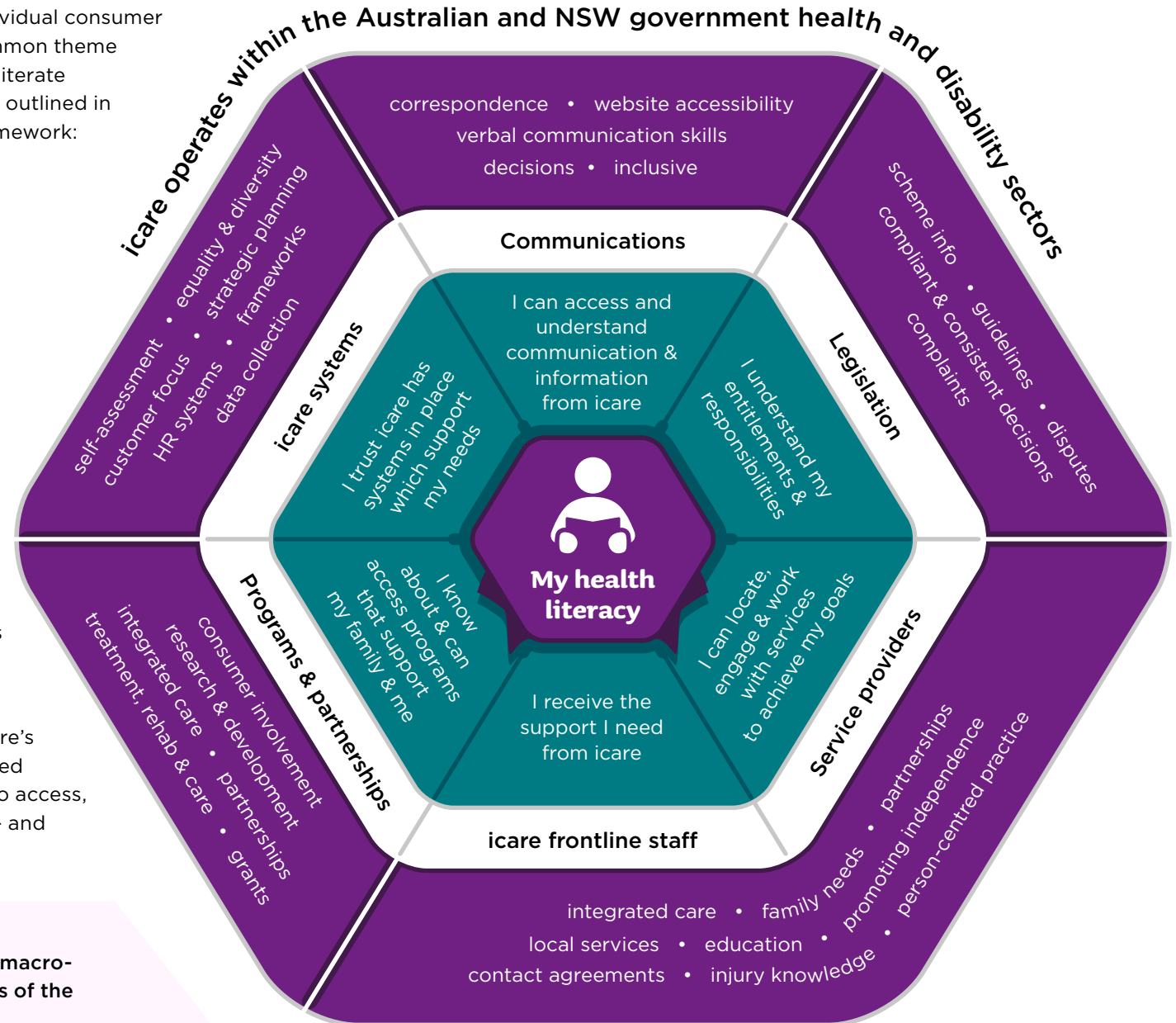
- people and their families/carers
- staff
- environment
- the health system.

It includes all levels of the integrated care systems - micro (the individual), meso (services, programs and organisation) and macro (the system within which we operate). The meso and macro levels constitute our health literacy environment.

The Framework provides detail within the context of icare's lifetime schemes to assist the organisation address the wholistic needs of all consumers, stakeholders, partners, staff and leaders in improving health literacy across our schemes and programs.

It identifies the critical context-specific elements icare's lifetime schemes need to address to achieve improved skills, knowledge and motivation in our consumers to access, understand, appraise and apply health information - and ultimately achieve greater health literacy.

**The outer-most circle of the icare Health Literacy Framework recognises that icare operates within a macro-level environment which includes other jurisdictions of the NSW and Australian governments.**



## Ten attributes of a health literate organisation

The **Australian Commission on Safety and Quality in Health Care** (ASCQHC) (2013) recommends using the Ten Attributes of a Health Literate Organisation to address health literacy within organisations. The **NSW Clinical Excellence Commission** (2019) also refers to the 10 attributes as a basis for organisational self-assessment. Focus on these attributes helps organisations to identify and harness opportunities to improve their health literacy. icare has used these attributes to inform the development of the organisational health literacy self-assessment tool.

1	Has leadership that makes health literacy integral to its mission, structure and operations.
2	Integrates health literacy into planning, evaluation measures, service user safety and quality improvement.
3	Prepares the workforce to be health literate and monitors progress.
4	Includes consumers in the design, implementation and evaluation of health information and services.
5	Meets the needs of consumers with a range of health literacy skills while avoiding making assumptions about individual health literacy levels.
6	Uses health literacy strategies in interpersonal communications and confirms understanding at all points of contact.
7	Provides easy access to health information, services and navigation assistance.
8	Designs and distributes print, audio-visual and social media content that is easy to understand and act on.
9	Addresses health literacy in high risk situations, including care transitions and communications about interventions.
10	Communicates clearly the costs that funding schemes may cover and what individuals may have to pay for services.

Adapted from: Brach, C et al. *Ten attributes of health literate health care organizations*. Institute of Medicine, Washington DC. (2012). Retrieved from:

<https://nam.edu/perspectives-2012-ten-attributes-of-health-literate-health-care-organizations/>

## References

A Checklist for Health Literate Organisations, Northern NSW Local Health District and North Coast Primary Health Network, 2017.

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Australian Bureau of Statistics, Health Literacy, in ABS Australian Social Trends. 2009, cat. no. 4102.0, ABS: Canberra. p. 8-11.

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Australian Commission on Safety and Quality in Health Care, National Statement on Health Literacy: *Taking actions to improve safety and quality*. 2014

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Australian Commission on Safety and Quality in Health Care, *Consumers, the health system and health literacy: Taking action to improve safety and quality*. Consultation Paper. Sydney: ACSQHC, 2013.

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C Brach, D Keller, L Hernandez, C Baur, R Parker, B Dreyer et al. *Ten attributes of health literate health care organizations*. Institute of Medicine, Washington DC. 2012. Retrieved from: <https://nam.edu/perspectives-2012-ten-attributes-of-health-literate-health-care-organizations>

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International Foundation for Integrated Care (IFIC)-Australia Website: <https://integratedcarefoundation.org/ific-australia>

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NSW Health *Strategic Framework for Integrating Care*. 2018  
<https://www.health.nsw.gov.au/integratedcare/Publications/strategic-framework-for-integrating-care.PDF>

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Online-utility.org. *Readability Calculator*. 2009; Available from: [http://www.online-utility.org/english/readability\\_test\\_and\\_improve.jsp](http://www.online-utility.org/english/readability_test_and_improve.jsp)

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Org-HLR © 2016 Deakin University; Ms Anita Trezona, Dr Sarity Dodson and Professor Richard H Osborne. Health Systems Improvement Unit, Centre for Population Health Research, School of Health and Social Development, Deakin University

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Sørensen K, Van Den Broucke S, Fullam J, Doyle G, Pelikan J, Slonska Z, & Brand H. (2012). *Health literacy and public health: A systematic review and integration of definitions and models*. BMC Public Health, 12(1), 80. Retrieved from: <https://doi.org/10.1186/1471-2458-12-80>

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Trezona, Anita, Dodson, Sarity and Osborne, Richard H. 2017, Development of the organisational health literacy responsiveness (Org-HLR) framework in collaboration with health and social services professionals, *BMC health services research*, no. 17, Article number: 513, pp. 1-12.

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*The Teach-back method – tools for promoting health literacy*; Department for Health and Ageing, Government of South Australia. January 2013.

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*Always Use Teach-back!* 2015; Available from: <http://www.teachbacktraining.org>

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World Health Assembly, 69. (2016). Framework on integrated, people-centred health services: report by the secretariat. World Health Organization.  
<https://apps.who.int/iris/handle/10665/252698>

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