Implementing health promotion, disease prevention and health literacy in primary care units – an Austrian Initiative

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Vision: Integrating health promotion, prevention and health literacy in primary health care units

Health Literacy (HL)
Finding, understanding, judging and applying health information for decision making

Health promotion (HP)
Strengthening resources

Prevention
Risk reduction

Primary health care unit

Health care Co-Production
## Scope of main functions for primary health centres concerning health promotion, prevention and health literacy

<table>
<thead>
<tr>
<th>Function Target</th>
<th>Risk-reduction</th>
<th>Strengthening resources</th>
<th>Strengthening health literacy</th>
</tr>
</thead>
</table>
| **Life style**  | » Avoiding risky life styles  
» Abstinence from risky coping behaviour | » Choosing healthy life styles  
» Acquisition of healthy coping skills | » Selecting good health information  
» Acquisition of health literate use of information and communication skills |
| **Setting**     | » Reduction of harmful environmental impact  
» Reduction of social conflicts and stress | » Creating supportive living and working environments  
» Building health promoting organizations and social networks (including self-help) | » Creating health literate primary health care units (providing good health information and communication)  
» Supporting health literate communities and organizations |

Source: modification based on Fischer et al. (2005), Klein et al. (2017)
Creating preconditions:

<table>
<thead>
<tr>
<th>Building organisational capacities</th>
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<tbody>
<tr>
<td>Support leadership (policy, mission statement), provide infrastructures und resources for HP and HL</td>
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Qualify staff for health literate interaction with patients

<table>
<thead>
<tr>
<th>Adapt structures and core activities:</th>
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<tr>
<td>Creating <strong>supportive environment</strong> – navigation aids</td>
</tr>
<tr>
<td>Provide health literate <strong>patient communication</strong> and access to relevant health information (oral, written / audio-visual / digital, mother tongue)</td>
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<tr>
<td>Identify and appraise health promotion needs of patients</td>
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<tr>
<th>Extend services:</th>
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<tbody>
<tr>
<td>Improve health literacy of <strong>patients</strong> and relatives offering tutorials</td>
</tr>
<tr>
<td>Promoting a healthy workplace by improving health literacy of <strong>staff</strong> to support their own health</td>
</tr>
<tr>
<td>Contribute to a health literate <strong>region</strong></td>
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Cooperation with relevant actors in the region, dissemination of experience, advocacy for health
Health promotion, prevention and health literacy in primary health care

THE PROJECT
Health promotion in primary care: history and background of the project

INTERNATIONAL/ WHO Europe
2017
Demand on "WHO–CC HPH" to prioritise primary care: development of policy brief, guidance document und competence catalogue (2019, 2021)

NATIONAL / Zielsteuerung Gesundheit, ÖSG 2017, Primary health care law
2016 : Basic study “Health promotion in the GP practice “ (Klein et al. 2017)
2017: Health Promotion, Prevention and Health Literacy become duty of Primary care by law

PROJECT of Main Association of Austrian Social Security Institutions and Austrian Health Promotion fund
2018
systematic implementation of health promotion, prevention and health literacy in primary health care (units)
## Objectives

### Strategic objective:
Systematic provision of health promotion (HP), prevention and health literacy (HL) in primary health care (PHC) units.

### Operational targets

<table>
<thead>
<tr>
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<th>(Core)Products</th>
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<tr>
<td>1. Identification of effective starting points for HP, prevention and HL in primary care</td>
<td>Framework for HP, prevention, HL in PHC</td>
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<td>2. Provision and implementation of a blue print for consideration of HP, prevention and HL in the health care provision concept and contract („organisation model“)</td>
<td>Evaluated blue prints for care concept and contract</td>
</tr>
<tr>
<td>3. Provision and implementation of human resources development – tools in PHC</td>
<td>Evaluated human resources development – tools</td>
</tr>
<tr>
<td>4. Accompanying nationwide transfer of project results and tools</td>
<td>Transfer products for organisational, human resources and system demands</td>
</tr>
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Rojatz et al. 2018
### Target groups

<table>
<thead>
<tr>
<th>User of the project results</th>
<th>Beneficiary of HP, Prevention, HL by the PHC–unit</th>
</tr>
</thead>
<tbody>
<tr>
<td>- PHC and their teams</td>
<td>- Patients (and relatives)</td>
</tr>
<tr>
<td>- Financers of PHC</td>
<td>- Staff of PHC–unit</td>
</tr>
<tr>
<td>- Stakeholder of the health care system (dissemination of (interim–) results)</td>
<td>- Population of the region</td>
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</table>
Add-in: Reorienting existing services
Add-on: new HP, prevent. and HL services in PHC
Approach: Multi-strategic & multi-level interventions

- Exchange and transfer
- Development of public health policies (makro level)
- Primary health care unit (meso level)
- PHC-team (micro level)

Organizational development („organization model“)

Human resources development

Rojatz et al. 2018
Lessons learned

» Development, understanding and communicating the vision is essential

» There is a need for comprehensive development, AND

» there is a need for local support in ongoing processes („quick wins“)

» This development needs co–production of scientific and practical knowledge

» There is a need for very practical support for new PHC units (blue prints for care concept and contract)

» There is a need to consider the financial and structural regulations too
  » There is a need for HP, P, HL remuneration (“money counts, not only dedication”)
  » There is a need of training for PHC–team in HP, P and HL

Rojatz et al. 2018