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Delphi survey questionnaire: Round 1

Introductory text	Thank you for your willingness to take part in the survey and for contributing to the creation of a profile of the core competencies of health professionals in the area of health literacy in Switzerland. Your answers will make a decisive contribution to identify and prioritize the core competencies relevant to health professionals. The survey takes around 60 minutes. You can use the buttons (arrows) below to move forwards and backwards in the questionnaire. If you interrupt the questionnaire, your results will be saved and you can continue again. If you have any questions about the questionnaire, please contact [Name with affiliations].
Declaration of consent	Please read the following points carefully. If you agree or consent to all points, please click on "Continue" to start the consultation. - I was informed in writing by the project team about the objectives, the course of the study and my tasks. This information can be found in the information letter on the study. I have read and understood the written information provided on the study "Core competencies of health professionals in the area of health literacy". My questions in connection with participation in this study have been answered satisfactorily. - I agree to participate in the Delphi study voluntarily. I have received and understood the information on the Delphi study. - I agree that the data collected will be stored in anonymized form (on the company's own drive) and evaluated. Third parties will not have access to the personal documents. My name will not be mentioned when the results of the study are published and it will not be possible to draw conclusions about me personally. My consent to participate in this Delphi study is voluntary and can be withdrawn at any time without giving reasons. This does not result in any disadvantages for me. If you withdraw from the study, any material already obtained can be deleted on request. - I have been informed that there are no risks for me in participating in this study, as the study is purely a survey study.
1. Questions about the	At the beginning we ask you to answer a few questions about yourself and your professional background.
1.1	What gender are you? Male Female Not specified
1.2	In which country were you born? Switzerland Germany Austria Other, namely:
1.3	Which country do you live in? Switzerland Germany Austria Other, namely:
1.4	How would you rate your German language skills? Mother tongue C2 (language proficiency) C1 (specialized language skills) B2 (independent use of language) B1 (advanced language use)

A2 (basic knowledge)
A1 (beginner)

1.5	What is the highest educational qualification you have achieved (usually you have you receive a certificate or diploma for this)?

Higher vocational training with federal certificate or federal diploma/ master craftsman's diploma or similar training
University / University of Applied Sciences / Federal Institute of Technology: Bachelor's degree
University / University of Applied Sciences / Federal Institute of Technology: Master or Licentiate
Doctorate from a university or Swiss Federal Institute of Technology (ETH)
Other, namely:

1.6	Which profession do you belong to? (multiple answers possible)

Human medicine
Pharmacy
Nursing (all training levels)
Medical practice assistant
Physiotherapy
Other (specify)

1.7	What is your current function? (open question)
1.8	Do you work in your profession as a teacher in training and further education?

Yes
No

1.9	Would your work colleagues consider you an expert in health literacy?

Yes
No

2. Definition	Before we get to the assessment of competencies, we would like to know from you how you assess the health literacy of health professionals. or what you understand by it. (text field)
3. Questions competencies	Next, various competence descriptions are listed. These are based on a study in the United States (Coleman et al. 2013), a version adapted for Europe (Kararunga et al. 2017) and a supplementary current analysis of the literature. The competence descriptions were translated by a translation institute and checked by us. The aim is now to validate these competencies for the Swiss context.

Clarification of terms:
By "health literacy competencies" we mean the knowledge, skills and attitudes that health professionals need in order to find, understand, assess and use the relevant specialist knowledge, as well as those needed to improve patients' health literacy and patients and to support them appropriately in managing their health and making health decisions.

We would now like to ask you **to assess** the following competence descriptions in **terms of their importance and appropriateness, based on your own profession and professional field.**

The competencies are structured according to knowledge, skills and attitude and appear in this order. At the end of the competence descriptions, you have the option of **adding missing aspects** or **adapting** the w**ording of existing competences.**

Please check whether certain aspects are missing and feel free to add them. You are also welcome to change our suggestions for the competence descriptions if they are difficult to understand or inappropriately worded for you.

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	Knowledge/ skills On a scale from 1 (very important / appropriate) to 4 (not important / appropriate at all), how important and appropriate are the following competencies (focus on knowledge) of or for health professionals in the area of health literacy? A health professional should...
1	...know what health literacy means.
2	... know the basic literacy skill domain (reading, writing, speaking, listening, numeracy) and gives examples of healthcare related demands put on patients for each domain, including difficulties navigating the healthcare systems.
3	... know the difference between the ability to read, and reading comprehension, and why general reading levels do not ensure patient understanding.
4	... know which kinds of words, phrases, or concepts may be jargon to patients.
5	... know that 16 % of the Swiss population have basic reading and writing difficulties, but that most patient education materials are written at a much higher reading level.
6	... know that about one in two people in Switzerland has low health literacy, but that most patient education materials require adequate health literacy.
7	... know that cultural and linguistic differences between patients and health professionals can increase difficulties in mutual understanding.
8	... know that adults with low literacy tend to experience shame and hide their lack of skills from health professionals.
9	... know that "you can't tell who has low health literacy by looking".
10	... recognize certain "red flag" behaviors which may suggest patients have low health literacy.
11	... know that tools are available for estimating individuals' health literacy skills, but that routine screening for low health literacy has not been proven safe or acceptable.
12	... know that health literacy is context-specific; individuals with high general literacy may have low health literacy.
13	... know that health literacy may decrease during times of physical or emotional stress.
14	... know that everyone, regardless of literacy level, benefits from and prefers clear plain language communication.
15	... know that transition point of "hands-off" in healthcare (e.g., moving from in-patient to out-patient setting) are especially vulnerable to patient communication errors.
16	... know the rationale for, and principles underpinning the need for a universal precautions approach to all health communication interactions.
17	... know established principles of plain language and clear health communication for oral and written communication.
18	... know that patients learn best when a limited number of new terms or information are presented at the same time.
19	... know examples of the direct relationship between health literacy and -knowledge about one's chronic disease(s) and medications. -adherence to medications and treatment plant. -receipt of preventive health services. -health outcomes or health risks.
20	... know the rationale for and mechanics of using "teach-back" or "show me" technique to assess patient understanding.
21	... know that community services and resources exist for helping adults improve their general literacy skills.
	Skills On a scale from 1 (very important / appropriate) to 4 (not important / appropriate at all), how important and appropriate are the following competencies (focus skills) of or for health professionals in the area of health literacy? A health professional should...

22	... have/show the ability to use common familiar lay terms, phrases and concepts, and appropriately define unavoidable jargon, and avoid using acronyms in oral and written communication with patients.
23	... have/show the ability to recognize, avoid and/or constructively correct the use of medical jargon, as used by others in oral and written communication with patients.
24	... have/show the ability to follow established principles of easy-to-read formatting and written communication with patients.
25	... have/show the ability to recognize plain language principles in written materials produced by others.
26	... have/show the ability to put information into context by using subject headings in both written and oral communication with patients.
27	... have/show the ability to translate information from a non-simple language format into a scientifically correct, plain, and easily understood language format.
28	... have/show the ability to speak slowly and clearly with patients.
29	... have/show the ability to use verbal and non-verbal active listening techniques when speaking with patients.
30	... have/show the ability use action-oriented statements to help patients know what they need to do.
31	... have/show the ability to select culturally and socially appropriate and relevant visual aids, to enhance and support oral and written communication with patients.
32	... have/show the ability to make instructions interactive so that patients are able to engage with, facilitate and recall the information.
33	... have/show the ability to elicit the patient's full set of concerns at the outset of the conversation.
34	... have/show the ability to negotiate a mutual agenda at the outset of the encounter.
35	... have/show the ability to elicit patients' prior understanding of their health issues in a non-shaming manner (e.g., by asking "what do you already know about high blood pressure?").
36	... have/show the ability to non-judgmentally elicit root causes of non-adherent health behaviors or unhealthy lifestyles.
37	... demonstrate effective use of a "teach back" or "show me" technique for assessing patients' understanding.
38	... have/show the ability to "chunk and check" by giving patients small amounts of information and checking for understanding before moving to new information.
39	... have/show the ability to effectively ask patients' questions through a "patient-centerer" approach (e.g., by asking "what questions do you have on the topic?" rather than "do you have any questions?").
40	... have/show the ability to orally communicate accurately and effectively in patients' preferred language, using medical interpreter services.
41	... have/show the ability to use written communication to support important oral information.
42	... have/show the ability to emphasize one to three "need-to-know" or "need-to-do" concepts during a given patient encounter.
43	... have/show the ability to convey numeric information (e.g., risks) using specific approaches and examples, in oral and written communication.
44	... have/show the ability to write or re-write ("translate") unambiguous medication instructions (e.g., "take 1 tablet by mouth every morning and evening for high blood pressure" rather than "take 1 tablet by mouth twice daily").
45	... have/show the ability to use examples or analogies to improve patient's understanding.
46	... have the ability to give information that facilitate goal setting concerning health, health behavior and health related activities.
	Attitude On a scale from 1(very important / appropriate) to 4 (not important / appropriate at all), how important and appropriate are the following competences (focus on attitude/attitude) of or for health professionals in the area of health literacy? A health professional should...
47	... express the attitude that effective communication is essential to the delivery of safe high quality healthcare.

48 ... express the attitude that all patients are at risk for communication errors and that one cannot tell who is at risk of communication errors simply by looking or through typical healthcare interactions; a universal precautions approach is required with all patients.

49 ... express the attitude that because the "culture" of healthcare includes special knowledge, language, logic, experiences and explanatory models of health and illness, every patient's encounter can be considered a cross-cultural experience.

50 ... express acceptance of an ethical responsibility to facilitate the two-way exchange of information in "shared decision making" to the degree and at the level desired by the patients and their families.

51 ... acknowledge patients' autonomous right to both informed consent and "informed refusal" of recommended evaluations or treatments.

52 ... express empathy with patients' potential sense of shame around low literacy (or health literacy) issues.

53 ... express a non-judgmental, non-shaming, and respectful attitude toward individuals with limited literacy (or health literacy) skills.

54 ... express empathy with the common experience of the healthcare system as a confusing, stressful, frustrating, intimidating and be frightening physical and virtual environment for many patients.

55 ... express the attitude that every patient has the right to understand their healthcare and that it is the health professional's duty to elicit and ensure patients' best possible understanding of their healthcare.

56 ... express the attitude that it is the responsibility of the healthcare sector to address the mismatch between patients' and healthcare providers' communication skills and tactics.

57 ... express the attitude that it is a responsibility of all members of the healthcare team to be trained and to be proactive in addressing the communication needs of patients.

The following is a list of additional competencies from the area of organisational health literacy (De Gani et. al, 2020).

On a scale from 1 (very important / appropriate) to 4 (not important / appropriate at all), how important and appropriate are the following additional competences of or for health professionals in the area of health literacy?

A health professional should...

58 ... create circumstances that allow calm communication (e.g., relocate to an appropriate room, closing doors).

59 .. dedicate sufficient time for conversations with patients and their relatives.

60 ... provide assistance for patients and their relatives in completing forms (e.g., in case of referrals, registration, patient decree).

61 .... empower patients and their relatives
a) to access health information (e.g., by referencing good and reliable sources of information, brochures, links, contact person),
b) to appraise health information (e.g., through explanation, replying to inquiries),
c) to evaluate health information (e.g., through informing and explaining different options and their advantages and disadvantages),
d) to apply health information to make informed decisions in regard to their own health (e.g., decisions regarding diagnostic methods and therapies, changes in lifestyle).

62 ... offer courses to patients and their relatives about the following topics, or we refer them to other adequate providers:
a) coping with chronic disease (self-management).
b) lifestyle changes (e.g., nutrition and exercise, health coaching, stop smoking).
c) use of health information and conversational skills (e.g., how to find trustworthy health information, contributing to a good and informative conversation with a health professional).

63 ... provide free-access health information for patients and their relatives.

64 ... inform patients of their rights (e.g., right to inspect the patient file, right to information).

65 ... support patients in the transition to other service providers (e.g., in making appointments, collecting and filling out documents, by exchanging information between service providers).

4. Additions	In your opinion, are there any other aspects that have not been mentioned here that are important and appropriate? Please add them below. (open question)
4.2	Do you have any specific comments on the wording of the respective competences? Please state the number and your suggestion for the wording.
4.3	Do you have any further comments? (open question)

5. Conclusion	Thank you very much for your participation in this study and your commitment in this area!

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Delphi survey questionnaire: Round 2

Introductory text	Thank you for agreeing to take part in the second round of this Delphi study! Your answers will make a decisive contribution to identifying and prioritising the core competencies relevant to healthcare professionals. The survey will again take a maximum of 60 minutes. You can use the buttons (arrows) below to move forwards and backwards in the questionnaire. If you have any questions about the questionnaire, please contact [Name and affiliation]
Explanation of evaluation round 1 and procedure round 2	The competences that did not reach a consensus after the first round were excluded in round two. Our aim is to create a set of core competences for health professionals with a focus on those from the fields of human medicine (doctors and medical assistants), pharmacy, nursing and physiotherapy. According to the feedback from Round 1, the difference between "important" and "appropriate" did not seem entirely clear to many - we therefore decided to define this more clearly in the following round and summarise it under "relevance". By this we mean how important these competences are considered to be for all health professionals and how appropriately these competences can actually be implemented in practice. In round 2, we therefore proceed with the following procedure to prioritise the competences: In a first step, you should rank the remaining competencies in terms of their relevance for all these health professionals and prioritise them in a second step.
Knowledge - Relevance	Please select the competences (focus on knowledge) of or for health professionals in the area of health literacy that you consider relevant. A health professional should…
1	… know what health literacy means. (1)
2a	… know about the importance of basic literacy skills (reading and writing) for health literacy. (2a)
2b	… know the requirements that are placed on patients and their families in the individual areas in connection with healthcare. (2b)
4	… know which terms and phrases are difficult to understand for patients and their relatives. (4)
7	… know that cultural and linguistic differences between patients and healthcare professionals can exacerbate difficulties in mutual understanding. (7)
8	… know that patients with poor literacy skills tend to hide their lack of knowledge from healthcare professionals. (8)
10	… know certain signs that may indicate low health literacy on the part of the patients or their relatives. (10)
13	… know that health literacy / dealing with information is particularly difficult during times of physical or emotional stress. (13)
14	… know that every person benefits from and prefers easily understandable information and plain language. (14)
15	…know that special attention must be paid to understanding patient and family communication at interfaces in the healthcare system (15).
17	… know the principles of plain language and clear health communication for oral and written communication (17).
18	… know that patients and their relatives learn best when a limited number of new concepts are presented at the same time (18). (new additions)

20	...know suitable methods to assess whether information conveyed has been understood (20).

Knowledge - Prioritisation	Please prioritise the skills you consider relevant (focus on knowledge) according to importance. To prioritise the competences, please click on the competence with a light blue border and a number will appear in the order in which you would like to prioritise this competence and the frame of the competence will appear in dark blue. If you want to change the order, you must click again on the competence with the dark blue border. (1= most important competence, 2= second most important competence, etc.)
	Only the competences relevant to the person are listed here.

Skills - Relevance	Please select the competences (focus skills) of or for health professionals in the area of health literacy that you consider relevant. A health professional should…
22	... have the ability to use comprehensible formulations and to apply the principles of plain language in oral and written communication with patients and their relatives.
24	... have the ability to follow established principles of easy-to-read formatting and written communication with patients and their relatives. (24)
25	... have the ability to recognize the principles of plain language in written materials produced by others. (25)
27	... have the ability to translate information from a non-simple language format into a scientifically correct, simple and easily understandable language format. (27)
28	... have the ability to speak slowly and clearly with patients and their relatives. (28)
29	... have the ability to use verbal and non-verbal active listening techniques when speaking with patients and their relatives. (29)
30	... have the ability use action-oriented statements to help patients and their relatives know what they need to do. (30)
32	... have the ability to make instructions interactive so that patients and their relatives are able to engage with, facilitate and recall the information. (32)
33	... have the ability to elicit the patient's full set of concerns at the outset of the conversation. (33)
35	... have the ability to elicit patients' and their relatives' prior understanding of their health issues in an appreciating manner. (35)
37	... demonstrate effective use of adequate methods for assessing the understanding of patients and their relatives. (37)
39	... have the ability to effectively ask questions to patients and their relatives through a "patient-centered" approach. (39)
44a	... have the ability to write or re-write medication instructions understandably. (44a)
44b	... have the ability to recommend methods that support proper medication use. (44b)
45	... have the ability to use examples or analogies to improve the understanding of patients and their relatives. (45)
58	... have the ability to create good conditions for conversation. (58)
59	... have the ability to dedicate sufficient time for conversations. (59)
62	... offer courses to patients and their relatives about the following topics, or we refer them to other adequate providers: (was moved the category 'skills' after round 1) a) coping with chronic disease (self-management). b) lifestyle changes (e.g., nutrition and exercise, health coaching, stop smoking). c) use of health information and conversational skills (e.g., how to find trustworthy health information, contributing to a good and informative conversation with a health professional). (62)

New	... have the ability to discuss the opportunities and risks of digital technologies with patients and their relatives. (new 1)
New	... have the ability to support patients and their relatives in accessing, searching for and using digital information sources. (new 2)
New	... have the ability to support patients and their families in dealing with digital health information. (new 3)

Skills prioritisation	Please prioritise the skills you consider relevant (focus skills) according to importance. To prioritise the skills, please click on the skill with a light blue border and a number will appear in the order in which you would like to prioritise this skill and the frame of the skill will appear in dark blue. If you want to change the order, you must click again on the competence with the dark blue border. (1= most important competence, 2= second most important competence, etc.) *Only the competences relevant to the person are listed here.*
Attitude - Relevance	Please select the competences (focus on attitudes) of or for health professionals in the area of health literacy that you consider relevant. A health professional should…
47	... express the attitude that effective communication is essential to the delivery of safe high quality healthcare. (47)
55	... express the attitude that every patient has the right to understand their healthcare and that it is the healthcare professional's duty to elicit and ensure patients' best possible understanding of their healthcare. (55)
New	... express the attitude that digital technologies bring both opportunities and risks. (new 4)

Setting - Prioritisation	Please prioritise the skills you consider relevant (focus on attitudes) according to importance. To prioritise the competences, please click on the competence with a light blue border and a number will appear in the order in which you would like this competence to be prioritised and the frame of the competence will appear in dark blue. If you want to change the order, you must click again on the competence with the dark blue border. (1= most important competence, 2= second most important competence, etc.) *Only the competences relevant to the person are listed here.*
Additions	Do you have any additions or feedback on the competences in general or on prioritisation? (open question)
Critical health literacy	In your opinion, are all three levels of health literacy (functional, interactive and critical level) sufficiently reflected in the competences listed? (yes, rather yes, rather no, no) In our view, the competences listed are strongly characterised by a functional understanding of health literacy. Finally, we would therefore like to know how you would operationalise the critical health literacy of health professionals and which aspects we should consider when operationalising critical health literacy.
Conclusion	Is there anything else you would like to tell us? Thank you very much for your participation and your commitment! We will be happy to send you the results of the Delphi survey as soon as they are available.