

Best Practice Brief for Health Departments

Actionable Insights: Using an Organizational Health Literacy (OHL) Approach

Main Takeaways for Health Departments and beyond

Apply an OHL approach* to all parts of your work, at every stage.

Taking an OHL approach becomes how you do the work, not something extra. You will reach your priorities with greater efficiency and effectiveness and improve how information and services engage your intended audience.

Use an OHL approach* beyond health(care) issues and settings alone.

All topics and services need an OHL approach because all kinds of information and services impact health, from healthcare to housing to work. To increase positive public health outcomes, your audience must know how to access the internet, public transportation, social and educational services, paid family and medical leave, housing, and more.

Where Do These Actionable Insights Come From?

This brief explores work that explicitly facilitated and implemented organizational health literacy (OHL) best practice to improve products and deliverables. The [OT21-2103 COVID-19 Health Equity Collaborative](#) hosted many publicly accessible, rich [technical assistance \(TA\) opportunities](#). Here, we highlight important resources for further learning and project insights that can propel your work forward.

What is Organizational Health Literacy? Foundational Definitions

[Healthy People 2030: Health Literacy](#)

*Organizational Health Literacy

The degree to which organizations equitably enable individuals to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

Personal Health Literacy

The degree to which individuals have the ability to find, understand, and use information and services to inform health-related decisions and actions for themselves and others.

An organizational health literacy approach can help health departments create processes, information, environments and department policy that better allow their audience to easily and consistently access, understand, use, and be satisfied with department information and services. A health literate organization integrates this approach across every part of their work. For example, they have guidelines, requirements, and support in place to help staff produce written and oral information in plain language, in multiple languages, and with clear action steps. Likewise, there are policies requiring health literacy training for staff, and vendor contract language that obligates a plain language, health literate approach. Job descriptions highlight previous health literacy experience as a preferred, or necessary, job requirement, and indicate the necessity of using an organizational health literacy approach in the role. Using an OHL approach is how a health literate organization does its work. That is, organizational health literacy is the lens through which all information and services are created, provided, and routinely assessed.

Get Started Creating a Health Literate Health Department

I. Learn More about Organizational Health Literacy

Use the [Organizational Health Literacy Resource Collection](#)!

The collection gathers useful information, guides, toolkits, and assessments across OHL work. It also includes sections on health literacy training, conferences, policy, organizations, and best practice examples. This collection came directly at the request of health departments who were part of the OT21-2103 Health Equity Collaborative. In the collection, choose “*Start Fresh*” if you’re new to OHL or “*Learn More*” if you want to go deeper!

II. Top Five Insights: What Helps Move New Practice Forward

Top five insights for health departments that want to become health literate organizations.

- 1 Build relationships early and often.** Take time to talk with others in your department, on the project, and in the community. Buy-in and understanding accelerate and ease adoption of OHL best practice.
- 2 Involve the staff and community.** Get staff and community members/partners involved in and associated with the organization or project. Introduce OHL concepts, entertain questions, and give examples so people understand what you want to change, what you are specifically asking them to do, and why.
- 3 Connect OHL to current priorities.** Clearly link OHL work to current organizational priorities and target goals. Emphasize how OHL accelerates and improves the organization or project’s ability to meet strategic organizational metrics.
- 4 Show the value up front.** Demonstrate how OHL practice helps the organization or project deliver more at every step: better information, services, products, outcomes, and participant satisfaction.
- 5 Plan for institutional change.** Leadership is largely supportive of OHL once they understand it, but institutional change is complicated and typically slow. Relationship-building and clear communication are foundational for changing structurally embedded practices.

III. Take Action! Examples Incorporating an Organizational Health Literacy Approach

Note, an expert consultant facilitated the work these examples highlight. You will find resources that guided the work throughout this brief and in the [Organizational Health Literacy Resource Collection](#).

Example #1: Establish Evidence-based Guidelines for Public-Facing Information

Grantee Team Aim: Create easy-to-use, health literacy guidelines that facilitate best practice by staff in presenting information to the public.

What Helped Move the Work Forward:

- ✓ Creating buy-in and awareness among staff and the public: a [territory-wide effort](#) to increase health equity.
- ✓ Crafting staff participation opportunities from the beginning.
 - Involving staff, partners, and community members at the very start
 - Incorporating these perspectives into planning and implementation efforts
 - Designing opportunities for regular feedback from professional and community experts

What Made the Work Hard to Do:

- ✓ No previous exposure to health literacy.
- ✓ Pushback generally about change, especially about plain language.
- ✓ Fear that plain language would make the work seem unprofessional and inaccurate.

Relevant Guidelines:

- [Federal Plain Language Guidelines: Plain Language Guide Series](#)
- [Improving Health Literacy for More Equitable Health Outcomes \(Health Literacy Fact Sheets\)](#)

Product Created: Plain Language Guide (internal, not available online)

How Can I Establish Standard Guidelines for Public-Facing Information?

1. Gather a team from various departments to move the work forward, including partners and your audience.
2. Together, complete a health literacy [training](#).
3. Discuss which organizational health literacy approach is both possible and most connected to your priorities. For example, evidence-based health literacy guidelines for public-facing information may be where you want to start.
4. Explore existing guidelines with the team. Choose to adapt an example (with attribution) or create your own.
5. Adapt or draft the guidelines; simultaneously collect feedback from department employees and the team.
6. Finalize the guidelines by integrating feedback. Make plans to disseminate. Monitor use.
7. Create a policy that requires use of the guidelines; perhaps, adapt a current policy.

Example #2: Design Your Approach and Product Using Evidence-based Guidelines

Grantee Team Aim: Design a tool to help health departments gauge their own readiness for structural change, specifically where they are along the journey of establishing fair practices and services for everyone. Use a health literacy approach to ensure the tool is easy to access, understand, and use.

What Helped Move the Work Forward:

- ✓ Staff with expertise in creating [easy-to-use, action-oriented products](#).
- ✓ Staff interested in learning about an organizational health literacy approach.
- ✓ Staff began to weave in a health literacy approach along with their own previous toolkits (variety of topics).
- ✓ Iterative feedback with the team and intended users who piloted the tool.

What Made the Work Hard to Do:

- ✓ No previous use of a health literacy approach.
- ✓ Team initially uncertain about incorporating a health literacy approach as part of the development process.
- ✓ Team had to adapt existing best practice guidelines to apply to this kind of interactive assessment tool.

Relevant guidelines:

- [Federal Plain Language Guidelines: Plain Language Guide Series](#)
- [Improving Health Literacy for More Equitable Health Outcomes \(Health Literacy Fact Sheets\)](#)
- [Resources and Style Guides for Framing Health Equity & Avoiding Stigmatizing Language](#)
- [Action-oriented Toolkits to Increase Equitable Organizational Practice](#)
- [Foundations of Community Engagement](#)

Products Created: [Temp Check Tool](#) and [Temperature Check for Your Equity Journey](#)

How Can I Design an Approach and Product (e.g., tool) Using Evidence-based Guidelines?

1. Together, complete a health literacy [training](#).
2. Use your health department's standard guidelines for designing public-facing information. If there are none, use existing [guidelines](#) to facilitate the approach.
3. Consider how the guidelines or best practices may need to be adapted, e.g., for an interactive assessment tool. For example, what needs to be explained and contextualized before presenting the tool? *Decision:* Plain language and active voice must explain what the tool is, why you might use it, and how. Also, how do best practices for charts, forms, and numbers apply to the tool's layout and presentation? *Decision:* Be explicit about how to use the tool, e.g., who completes it, how the layout works. To design the tool, use evidence-based design features like simple charts, ≥ 12-point font, and simple rating scales with supported calculations and interpretation.
4. Then, create the tool with a health literacy approach: everyone (e.g., all health departments) should be able to access, understand, and use this tool.
5. Pilot the tool with a variety of users (e.g., staff, variety of health departments). Iteratively revise the tool with users. Share stories of tool use.
6. Include clear contact information in the tool so users can ask questions.
7. Finalize the tool. Make plans to disseminate. Monitor use.

Example #3: Create an Organization-wide Health Literacy Policy.

Grantee Team Aim: Institute an organization-wide health literacy policy. Create related procedures/products.

What Helped Move the Work Forward:

- ✓ Team had previous health literacy training.
- ✓ Training modules (products) for all staff developed by an expert health equity trainer.
- ✓ Leadership, though cautious, was open to organization-wide health literacy policy.
- ✓ [Strong county focus](#) on language access and health equity.

What Made the Work Hard to Do:

- ✓ Other departments worried the policy could create additional work.
- ✓ Organization-wide policy change was slow: staff turnover, other project demands, and required approval processes often impeded progress.

Relevant Guidelines:

- [Federal Plain Language Guidelines: Plain Language Guide Series](#)
- [Improving Health Literacy for More Equitable Health Outcomes \(Health Literacy Fact Sheets\)](#)
- [HLE2: The Health Literacy Environment of Hospitals and Health Centers](#) (adaptable for use beyond healthcare)
- [CDC'S Health Equity Guiding Principles for Inclusive Communication](#)

Products:

- Organization-wide Health Literacy Policy in effect. Department incorporated new policy elements into an existing language access policy (internal, not available online)
- [Equitable Language Guide](#)
- Staff Training Modules (internal, not available online)
- Plain Language and Health Literacy Guide (internal, not available online)

How Can I Create Organization-wide Health Literacy Policy?

1. Gather a team from various departments to move the work forward.
2. Together, complete a health literacy [training](#).
3. Talk with important decision makers across the organization: leadership, department heads, respected staff, etc.
4. Talk with staff responsible for policy implementation:
staff who create information for the public, write job descriptions, create vendor contracts, who approve processes and organizational products (e.g., websites, brochures, registration, environments), who manage user/community engagement.
5. Consider academic and grey literature together with themes from decision maker and staff conversations.
6. Iteratively draft policy:
Your team can write a first draft. Then, invite staff (those you spoke with and others) to provide perspectives on whether the policy best meets, and applies to, various needs in the organization. Integrate feedback.
7. Create procedures (e.g., products that help the organization implement the policy across departments). For example, these can include guidelines (example #1, see above), tools (example #2, see above), hiring practices, procurement language, and staff orientation/trainings.
8. Disseminate the policy and procedures widely. Host an online webinar, a newsletter feature, live practice sessions, office hours, a table in a high-traffic area in the building to offer information and answer questions, etc.
9. Monitor use, including what is needed for fidelity to the new policy. Update procedures as necessary.

Perspective of the Collaborative Leading OT21-2013 Grant Work

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Applying an organizational health literacy approach to our work was incredibly valuable. We saw it work well for public health departments, public health institutes, and grant administration. Topics ranged from plain language to organizational structural change to implementation and dissemination.

-- National Network of Public Health Institutes, OT21-2103 Collaborative

Thank you!

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Note: This practice brief is written for health departments in the United States about the lessons learned from other health departments in the United States. However, the insights can be adapted, as necessary, and applied to many types of organizations.

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