Healthy People 2020 Summary of Objectives

Health Communication and Health IT

Number	Objective Short Title
HC/HIT−1	Health literacy
HC/HIT−2	Satisfaction with health care providers' communication skills
HC/HIT−3	Individuals' involvement in their health care decision making
HC/HIT−4	Receipt of providers' recommendations for personalized health care resources
HC/HIT−5	Electronic personal health management tools
HC/HIT−6	Internet access
HC/HIT−7	Social support
HC/HIT−8	Quality of Internet health information sources
HC/HIT−9	Access to online health information
HC/HIT−10	Electronic health records in medical practices
HC/HIT−11	Users of health information technology
HC/HIT−12	Best practices in health protection messages
HC/HIT−13	Social marketing in health promotion and disease prevention

Topic Area: Health Communication and Health IT

HC/HIT-1: (Developmental) Improve the health literacy of the population.

> HC/HIT–1.1 Increase the proportion of persons who report their health care provider always gave them easy-to-understand instructions about what to do to take care of their illness or health condition.

Potential data source: Medical Expenditure Survey (MEPS), AHRQ.

> HC/HIT–1.2 Increase the proportion of persons who report their health care provider always asked them to describe how they will follow the instructions.

Potential data source: Medical Expenditure Survey (MEPS), AHRQ.

> HC/HIT–1.3 Increase the proportion of persons who report their health care providers' office always offered help in filling out a form.

Potential data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

HC/HIT–2: Increase the proportion of persons who report that their health care providers have satisfactory communication skills.

> HC/HIT–2.1 Increase the proportion of persons who report that their health care provider always listened carefully to them.

Target: 65 percent.

Baseline: In 2007, 59 percent of persons reported that their health care provider always listened carefully to them.

Target setting method: 10 percent improvement.

Data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

> HC/HIT–2.2 Increase the proportion of persons who report that their health care provider always explained things so they could understand them.

Target: 66 percent.

Baseline: In 2007, 60 percent of persons reported that their health care provider always explained things so they could understand them.

Target setting method: 10 percent improvement.

Data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

HC/HIT–2.3 Increase the proportion of persons who report that their health care provider always showed respect for what they had to say.

Target: 68.2 percent.

Baseline: In 2007, 62 percent of persons reported that their health care provider always showed respect for what they had to say.

Target setting method: 10 percent improvement.

Data source: Medical Expenditure Panel Survey (MEPS), AHRQ.

HC/HIT–2.4 Increase the proportion of persons who report that their health care provider always spent enough time with them.

Target: 54 percent.

Baseline: In 2007, 49 percent persons reported that their health care provider always spent enough time with them.

Target setting method: 10 percent improvement.

Data source: Medical Expenditure Survey (MEPS), AHRQ.

HC/HIT–3: Increase the proportion of persons who report that their health care providers always involved them in decisions about their health care as much as they wanted.

Target: 56.8 percent.

Baseline: In 2007, 51.6 percent of persons reported that their health care providers always involved them in decisions about their health care as much as they wanted.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NIH, NCI.

HC/HIT-4: (Developmental) Increase the proportion of patients whose doctor recommends personalized health information resources to help them manage their health.

Potential data source: Pew Internet and American Life Project, PEW.

HC/HIT-5: Increase the proportion of persons who use electronic personal health management tools.

HC/HIT–5.1 Increase the proportion of persons who use the Internet to keep track of personal health information, such as care received, test results, or upcoming medical appointments.

Target: 15.7 percent.

Baseline: In 2007, 14.3 percent of persons reported using the Internet to keep track of personal health information, such as care received, test results, or upcoming medical appointments.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NIH, NCI.

HC/HIT–5.2 Increase the proportion of persons who use the Internet to communicate with their provider.

Target: 15.0 percent.

Baseline: In 2007, 13.6 percent of persons reported using the Internet to communicate with their provider.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NIH, NCI.

HC/HIT-6: Increase individuals' access to the Internet.

HC/HIT– 6.1 Increase the proportion of persons with access to the Internet.

Target: 75.4 percent.

Baseline: In 2007, 68.5 percent of persons reported having access to the Internet.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NCI.

HC/HIT– 6.2 Increase the proportion of persons with broadband access to the Internet.

Target: 83.2 percent.

Baseline: In 2007, 75.6 percent of persons reported having broadband access to the Internet.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NCI.

HC/HIT– 6.3 Increase the proportion of persons who use mobile devices.

Target: 7.7 percent.

Baseline: In 2007, 6.7 percent of persons reported using mobile devices.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NCI.

HC/HIT-7: Increase the proportion of adults who report having friends or family members whom they talk with about their health.

Target: 87.5 percent.

Baseline: In 2007, 79.5 percent of adults reported having friends or family members that they talk to about their health.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NIH, NCI.

HC/HIT–8: Increase the proportion of quality, health-related Websites.

> HC/HIT–8.1 Increase the proportion of health-related Websites that meet three or more evaluation criteria disclosing information that can be used to assess information reliability.

Target: 57.2 percent.

Baseline: In 2009, 52 percent of health-related Websites met three or more evaluation criteria disclosing information that can be used to assess information reliability.

Target setting method: 10 percent improvement.

Data source: Office of Disease Prevention and Health Promotion survey, HHS.

> HC/HIT– 8.2 (Developmental) Increase the proportion of health-related Websites that follow established usability principles.

Potential data source: Office of Disease Prevention and Health Promotion survey, HHS.

HC/HIT–9: Increase the proportion of online health information seekers who report easily accessing health information.

Target: 41.0 percent.

Baseline: In 2007, 37.3 percent of online health information seekers reported easily accessing health information.

Target setting method: 10 percent improvement.

Data source: Health Information National Trends Survey (HINTS), NIH, NCI.

HC/HIT–10: Increase the proportion of medical practices that use electronic health records.

Target: 27.5 percent.

Baseline: In 2007, 25.0 percent of medical practices reported using electronic health records.

Target setting method: 10 percent improvement.

Data source: National Ambulatory Medical Care Survey (NAMCS), CDC, NCHS.

HC/HIT–11: (Developmental) Increase the proportion of meaningful users of health information technology (HIT).

Potential data source: Centers for Medicare and Medicaid Services (CMS) Update/Report on Meaningful Use.

HC/HIT-12: (Developmental) Increase the proportion of crisis and emergency risk messages intended to protect the public's health that demonstrate the use of best practices.

Potential data source: CDC Risk Communication Message Survey, CDC.

HC/HIT-13: (Developmental) Increase social marketing in health promotion and disease prevention.

HC/HIT–13.1 Increase the proportion of State health departments that report using social marketing in health promotion and disease prevention programs.

Potential data source: The National Public Health Information Coalition (NPHIC/CDC Cooperative Agreement Healthy People 2020 Survey), CDC.

HC/HIT–13.2 Increase the proportion of schools of public health and accredited master of public health (MPH) programs that offer one or more courses in social marketing.

Potential data sources: National Survey of Public Health Competencies in Social Marketing: Survey of Association of Schools of Public Health (ASPH) member schools and accredited MPH programs (Florida Prevention Research Center, University of South Florida).

HC/HIT–13.3 Increase the proportion of schools of public health and accredited MPH programs that offer workforce development activities in social marketing for public health practitioners.

Potential data sources: National Survey of Public Health Competencies in Social Marketing: Survey of ASPH member schools and accredited MPH programs (Florida Prevention Research Center, University of South Florida).